

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

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August 20, 2018

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Continued from Fol. 104 - Sept. 1 Wt. 144 - Several small fights during month. Nov 1 145# Is much the same condition, eats ordinary. Frequently in small fights. Dec 1 Wt. 148. Has had more encounters with other patients since clothes are being fitted on B' & it was necessary to use C hall closets & washrooms. Most of his quarrels were with B' patients. Jany 2 '99 Struck J Brannan with spittoon - slight scalp wound.

Feb 1 - July 31 '99 (Delusions) Wt. 150. Has delusions: thinks he is controlled by great nations. Is inclined to be somewhat noisy & restless & at times pugnacious, often getting into trouble with other patients. Is very active & busies himself with work on ward.

Aug 1 1900 - Jan 31 1900. (Dr. Chapple) Wt. 138½#. No change during period. Physical condition has been very good. Has worked constantly on ward. Is noisy: talks a great deal to himself & others Frequently has trouble Becomes angry if patients get in his way. Feby 1/1900. Wt 146#. Phys. No change, in any way, during period. Physical condition Excellent; has ravenous appetite; a very diligent worker on ward. Will not allow others to interfere with his work, and is somewhat of a "bully" towards other patients; - and frequently gets into quarrels with them; very deluded & talkative. Says "he owns the whole Institution" - Conversation very incoherent. Augt. 146# - Nov 30. Patients' condition shows no change, in any way. No change, during the period. Health excellent: works constantly on ward: is very talkative; irrational: at times, noisy & profane. Is easily irritated & then becomes violent. Does not pick quarrels, but will not allow others to interfere with his work. Is extremely deluded & thinks that others are living off his labor. Dislikes other patients much & orders them about. Feby. Wt 151#: May 2 Wt 164# - Wt 165#: Nov 1 Wt 140# - Dec 20. Has been losing weight of late, & has had poor appetite: vomiting occasionally: this morning had a "fainting spell" & was transferred to T.W.: 99°: Considerable pain in abdomen: given liquid diet & enemas: mustard plaster to stomach. Dec 31. Still has a little fever. Is kept on soft diet: bowels are regular. Jany 8 '01. Dep. on ward. Is much improved - Jany 16. Transferred to C1. Jany 31 '01. Physical condition good: Mentally, same as formerly: very irrational & talkative: good worker on ward: occasionally violent. - Has been in good physical health, during past year; good worker on ward: at times noisy: sometimes, ugly & pugnacious: goes outside to work for Hot Springs, about buildings. -

Feby 1 1900 - Augt 31 1900 - Dec 20 1900 - Jan 8/01 - 31 1901 - July 31

Personal and Medical History of A. J. McEwen

GIBBEY, FICKLE & CHAMBERS, DAVENPORT, IOWA

Whole No. 3614

Residence, 513 - 8th Ave So. Minneapolis, Minn

Date Admission, 6th January 1894

Admitted by, Dr Phelps Hour, 7 PM

How Sent, John A Steele, Jof P, Hennepin County

Sex, Male

Age, 34

Civil Condition, married

Children, none

Age Youngest Child, —

Occupation, Barkeeper (Gives this occupation 2 days / Night clerk)

Degree Education, Common School

Profession Religion, not a church member

Habits, possibly intemperate

Nativity, Wisconsin, (father's Canada; Mothers, Nova Scotia)

Physicians Committing, T. A Jones & James A Dunn

Correspondents, Mrs A. J. McEwen - 513 - 8th Ave So

Family Physician T. A. Jones (at one time) — mpls

No. for Year, 184

Insane Relatives, none

Cause Exciting, over-work

Cause Predisposing, Chronic

Form, dementia

Accompanying Bodily Disorder, None mentioned

Suicidal or Not, not

Date of this Attack, about 2 years ago

Duration, about 2 years

No. of Attack, 1st (probably continuous)

No. of Admissions, 1st here (Was in Jamestown)

Age First Attack, about 32.

Time of Leaving, Feb. 22nd '94

Time in Hospital, 1 mo 16 ds.

Result, Imp.

Crossed off from Jamestown Book Feb 1st, 1894, because the case commenced.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam'd Dr. Herzog Jany 8/94.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Good

Recent Events, Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, appears Deficient

Special Subjects,

EMOTIONAL STATE:

Normal, Calm, normal & calm

Indifferent,

Exalted,

Depressed,

Had DELUSIONS: at time of examination before

Systematized or Not, Coming here; careful; &

Special Subjects, avoids showing any fear

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Somewhat guarded.

GENERAL DESCRIPTIVE REMARKS:

Admits having been in Hospital at Jamestown, Dakota, for a few weeks & having come away from there. Also admits having drunk some but says "not to any great extent." The patient states that he came here of his own free will & accord to receive medical treatment but not for his insanity, but for some obscure stomach disorder. Upon questioning him as to any delusions of persecution, he becomes uncommunicative. All his answers were guarded & showed that he was suspicious of the examiner.

Personal and Medical History of A. J. McEwen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 5 3/4 WEIGHT, 132½ lbs. NUTRITION, fair; anaemic, however,

WOUNDS OR ABNORMALITIES, Scar on left breast; not pigmented; oval in shape; superficial.

TONGUE, Tremors, quite marked Fibrillary Coatings, large, anaemic; papillae Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, normal Accommodation, normal

SIGHT, somewhat myopic - about 20/20 —

HEARING, seems normal

COORDINATION, Arms, fairly good; Finger to nose, eyes shut, quite accurate.

Legs, very slightly impaired, if any; Standing on foot, slightly unsteady; Reports: Turns properly quite good. Standing, Eyes shut, sways

TREMORS, Hands, slight Tongue, quite marked

Facial Muscles, none General, none

REFLEXES, Patellar, Equal - about 4 - Dr. Ft scale

Other Reflexes,

ARTICULATION, Hesitating, no Slurred, no — normal

FACIAL EXPRESSION, somewhat worried

SENSIBILITY,

HEART, 3 action somewhat forcible; otherwise normal.

LUNGS, 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 - hysterical

Father or Pat. Relations, Father died 27 years ago; thinks "Dropsy" —

Brothers or Sisters, No further history brought out —

Personal and Medical History of A. J. McEwen

1894

This patient was brought here by Sheriff's Deputies Stuefferly & McFarland with the following history of case. There is no history of consanguinity or heredity. This is 1st attack (seemingly Continuous); was at Jamestown. N. D, hospital, about 2 years ago; for a few weeks. Eloped from there. First symptoms of this attack were manifested about 2 years ago; was suspicious and showed delusions of persecution. Disease seems increasing; is variable; for a time (from a few days to a few months) is quite well-behaved and worked for 7 months this summer. Derangement is now shown by his being apprehensive of danger; suspicious and fears persecution. Is, at times, irritable and inclined to violence. Disregard to injuring others, shows some tendency towards wife. Suicide has not been attempted; propensity not active. Is not filthy or destructive. Before 2 years ago, was irritable; there was a gradual change in disposition. There is no family history of intemperance. Patient has not been subject to any severe disease &c or head-injury. Supposed cause of the disease is overwork. If under treatment, unknown. On personal examination, Patient said "that he was apprehensive of danger; is irritable and, at times, laughing without provocation. He wanders away from home, without warning. Is boastful &c. Appearance and manner were suspicious.

Jan 6 Jan 5/94. On admission, was put on B. (SR Complexion light; hair light-brown; Eyes blue; condition of skin good. Has a scar on breast. Bodily condition clean; Behavior good). Pulse 80. R 18. T(o) 99.4.

" 7 Jan 7/94. Was restless for 5 hours, more or less, last night, sleeping but 3 hours. AM. P 74 R 19 T 99.-
Appetite medium; bowels seem regular; no cough noticed. Stands about on the hall. Talk is rather silly; answers questions freely, at times. PM. Pulse 76. T(o) 99.2. No complaints or injuries to report.

" 8 Jan 8/94. Slept fairly well (7 hours) last night. AM. Pulse 74 R 18 T(o) 99.2. Appetite only medium
" 9 Stands idly about. Talks some with patients. PM. Pulse 78. T(o) 99.5. Jan 9/94. Slept 8 hours, last night. AM. Pulse 76. R 16. T(o) 98.8. Stands stupidly about the hall; has to be led in to his meals &c; appetite only medium. Is on medicine. PM. Pulse 78. T(o) 99. No complaints to report, today. —

" 10/11 Jan 10/94. AM. Pulse 76. Talks some with his fellow patients. Is silly in manner. Jan 11/94. Has been
" 12 sleeping well, the past 2 nights. AM. Pulse 74. Jan 12/94. AM. Pulse 78. There is no noticeable
" 13 change in patient's condition. Jan 13/94. Slept 6 hours; was restless 2 hours or so, last night. —
" 14 AM. Pulse 76. Stands about on the hall. Is rather stupid. Jan 14/94. Slept 8 hours, last night.
" 15 AM. " 74. Jan 15/94. Slept fairly well, last night. AM. 72. Still stupid; standing idly about, talks
" 16 some with the other patients; continually pulling moustache, as if in deep thought. Jan 16/94. AM
" 17/18/19 Pulse 74. Jan 17/94. AM. Pulse 72. Jan 18/94. AM. Pulse 74. Jan 19/94. AM. Pulse 75. —
" 20 Jan 20/94. Has been restless for an hour or so, in each of the past few nights, but has slept 7 hours nightly. There is no material change in patient. He still stands idly & stupidly about, talks but little, has to be led into the dining room &c. Says "he is going to run away." Habits are good. —
" 31 Jan 31/94. Appetite fairly good. Apparently rests & sleeps well, at night. Generally stands idly about, curling moustache &c. Talks some, when addressed. Appears discontented, though makes no complaints.

Feb 1/5 Feb 1/94. Wt 127 lbs (has lost some, without apparent cause). Pulse 72. Feb 5/94. Attacked one of the
" 7 attendants, today. Feb 7/94. Was restless for about 2 hours, last night, sleeping but 3 hours. Habits clean.
" 28 Feb 28/94. Sleeps well, generally. Appetite good. Bowels seem regular. Talks but little. Stands idly about, on guard, in meditation. Appears discontented.

Sent home with his mother, today.

— Crossed off the Records —

Personal and Medical History of John Scanlon Jr. (or no. 2)

From 328.

1894

Sep 19 Sep 19/94. Noisy 5 hours, during the night & slept poorly. Very noisy today: "Fears fusion". Was visited by a friend.
" 25 Engaged in a fight with a fellow patient. Sep 25/94. Has continued noisy at night, the greater part of each night being so; noisy & restless by day; aggravating to the other patients, causing him to get into occasional fights.
" 26 Is also destructive, some nights - Has been eating quite well. Sep 26/94. Was given a "Combination" bath
" 28 at 7.30 last evening; afterwards, slept about 7 hours. Sep 29/94. A "Combination bath" given last evening,
" 30 also a hypodermic at 9 PM. Had without effect, as he was noisy seven hours during night & slept poorly for an hour or so. Sep 30/94. Summary). Continues very noisy, nights - Sleeps very poorly & on some nights, none at all - Frequently destroys his Clothing, at night. Appetite very good; bowels regular. Behavior very noisy, every day. Is obstinate & has "fits & spells"; aggravating to other patients. Has been in quite a number of fights in which he was the aggressor. Talks all day; generally incoherently; has many delusions - Makes no complaints. Physical condition seems good - No improvement, Mentally.

Oct 1 Oct 1/94. Wt 140 pounds. (Has made a slight gain in weight, in the past month). Pulse &c. —
" 3/4 Oct 3/94. Visited by his wife, today. Oct 4/94. Was noisy, at bed time; knocked down patient, &c. Reed
" 5 Oct 5/94. Shows delusions: "Expects to be swallowed up by an Earth-quake, before morning." —, — —
" 12 Oct 12/94. Very annoying to the patients; picks quarrels with them: spits on their backs. Habits dirty.
" 13/22 Oct 13/94. Was visited by his wife & mother, today. Oct 22/94. Both ears seem slightly inflamed, today.
" 30 wrist also inflamed; apparently a boil: same pointed. Oct 30/94. Slight suppuration from wrist. —
" 31 Oct 31/94. There has been no improvement, whatever, noted in this case. Patient continues noisy, restless & excited at night, the greater part of the time, & sleeps very poorly - Some nights, none at all - Has continued noisy & troublesome, by day; annoying to the other patients; frequently gets into fights and he is almost always the aggressor. Destructive quite often both by night & day, is also dirty in habit & quite frequently wets his bed. Is nevertheless constipated, from time to time. Talks incoherently & still manifests delusions. Appetite very good. He is fed out on the hall.

Nov 1/10 Nov 1/94. Wt 144 lbs. Pulse 68. Nov 10/94. There has been no change to note in his conduct or behavior.
" 20 He is, every day, noisy & troublesome - Has been restless & noisy each night, for from 5 to 7 hours & has
" 30 been sleeping only from 2 to 4 hours, each. Habits have become dirty - Nov 30/94. No change & note as above described - One night, is extremely noisy & restless - Physical condition quite good.

Dec 1/2 Dec 1/94. Wt 154 lbs. Pulse 92. Dec 2/94. Patient slept sleeps poorly. He has been very quiet, all day.
" 3 Dec 3/94. Complains, today, of not feeling well. 3 PM. Pulse 114. 8 PM. Pulse 124. T(o) 103 4/10.
" 4 Dec 4/94. Restless 3 hours, during the night & slept only 5 hours or so. 10 5 am. Moved to 6 2 —
Is put on liquid diet; milk 3 times a day; Ear very sore; much swollen & inflamed: is entirely closed. Same treated & dressed. Patient put in restraint. Removed dressing in afternoon & was redressed.
" 5 Dec 5/94 Patient removed dressing several times; Ear had to be redressed each time. Very noisy today. —
" 7/6 Dec 7/94. Ear much improved. Dec 8/94. Patient continually in restraint. Very excited & noisy. -
" 10 Dec 10/94. Patient is still kept in restraint. He is very restless & noisy at night. Ear is dressed daily & is looking much better; but he frequently removes dressings. Appetite fair: is still on liquid Diet. Occasionally refuses a meal. Bowels fairly regular. Was very restless & noisy, by day, singing, whistling &c. Is also noisy the greater part of each night, sleeping only 2 to 3 hours. Dec 10/94. No improvement
" 16 in Conduct & behavior either by day or night. Sleeps very poorly. Refuses milk at meal times.

(carried to page 309)

Personal and Medical History of Patrick Lavey

LIBBEY, PERLAN & CHAMBERS, DIVENPORT, IOWA

Whole No. 3615.

Residence, Hassan, Hennepin County, Minn

Date Admission, 8th January 1894.

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

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

Sex, Male

Age, 68 years

Civil Condition, married

Children, one

Age Youngest Child,

Occupation, Farmer

Degree Education, none scarcely; reads a little

Profession Religion, Roman Catholic

Habits, not intemperate

Nativity, Ireland; (parents also born there)

Physicians Committing, J.C. Cockburn & A.P. Williamson

Correspondents, none given in papers

Family Physcn Dr Simard, Osseo Minn

No. for Year, 185

Insane Relatives, none

Cause Exciting, Family trouble

Cause Predisposing, possibly sunstroke, some years ago

Form, acute melancholia

Accompanying Bodily Disorder, none mentioned

Suicidal or Not, Not; but perhaps homicidally inclined.

Date of this Attack, about 3 months ago

Duration, about 3 months

No. of Attack, unknown

No. of Admissions, 1st

Age First Attack, unknown

Time of Leaving, Mch 6th 94

Time in Hospital, 2 mo.

Result, Rec.

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

EXAMINATION ON ADMISSION.

Ex by Dr Herzog, Jany 12/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear at present

Quick or Sluggish, sluggish

MEMORY:

Past Events, } much impaired

Recent Events, }

Special Subjects, }

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, } as good as could be expected of a man in his situation in life.

Own Mental State, }

Special Subjects, }

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, much

DELUSIONS:

Systematized or Not, none brought out

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none brought out

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, reticent

GENERAL DESCRIPTIVE REMARKS:

Patient owns 160 acre farm, about 25 miles from Minneapolis; all paid for & free from mortgage; but he is, nevertheless, weighed down with an indescribable, indefinable "world of woe". He admits this property ought to be sufficient to provide for him in his age; but still he is not sure as to how long a man might live. On attempting to reassure him on this point, he found cause for complaint in the Constipated Condition of his bowels. His entire manner was that of profound dejection.

Personal and Medical History of Patrick Lavey

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6in WEIGHT, 149 lbs. NUTRITION, Good for a man of his years

WOUNDS OR ABNORMALITIES, varicose veins.

TONGUE, Tremors, none; Defects, marked by fat Coatings, whitish; at base. Promptness Movement, Slow

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Yes

SIGHT, Presbyopic

HEARING, somewhat impaired.

COORDINATION, Arms, somewhat impaired: finger to nose, eyes shut, inaccurate.

Legs, standing, eyes shut, sways slightly.

TREMORS, Hands, none Tongue, none

Facial Muscles, none General, none noted.

REFLEXES, Patellar, Equal; about 3 or 4 — Dr P's scale.

Other Reflexes,

ARTICULATION, Hesitating, Yes Slurred, yes & mumbling.

FACIAL EXPRESSION, Despondent

SENSIBILITY,

HEART, Sounds seem good.

LUNGS, Sounds seem good.

EXAM. URINE.

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, probably some time ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Patrick Lavey

EBERT, FICKAR & CRAWBERG, DAVENPORT, IOWA.

1894

He is brought here by Deputy Sheriffs Kemperly & Mc Farland, (Deputy Ohlin also accompanying the patients coming this date), with the following history. As to consanguinity unknown; no history of heredity. Number of attack unknown. If previously sent to hospital, unknown. First symptoms of this attack were manifested about 3 months ago. Disease seems increasing. At times, he appears somewhat rational, but these intervals come irregularly. Generally, is quiet & disinclined to talk much. Derangement runs thown by the idea that he will not have sufficient money to take care of himself in his old age & that his friends have not sufficient, to take care of him with. Told his wife she had better leave or she might be killed, but showed no disposition to injure her. — Is not suicidal. Is tidy & clean; no tendency to destructiveness. Is quick tempered, but has other particular traits. There is no history of intemperance, nor of epilepsy, nor of convulsions, but patient had sunstroke some years ago. He has not been restrained or confined. Supposed cause of the disease is family trouble. Has been under treatment a short time (with Dr Simard). —

On personal examination, memory is fair; does not wish to answer questions, although he replies when requested to. Is evidently depressed & worried. Can give no reason for not wishing to talk. He sat silently; answered questions reluctantly; seemed preoccupied; dull, heavy; when he speaks, mumbles his words & articulates thickly. Appearance & manner were dull, indifferent & depressed. How others, we learn he became depressed, silent & suspicious without any reasonable assignable cause.

Jan 6 Jan 6/94. On admission, was put on B4. (S.R. Complexion dark; hair gray; eyes blue; condition of skin clean; has thick veins on right leg; bowl on abdomen, nearly well — Bodily condition clean; " 7 Is well-behaved). Jan 7/94. Has quiet, sleeping 7 hours, last night. AM. Pulse 92. R 20. — Appetite good; bowels constipated; no cough noticed. Is quiet and well-behaved; talks very little; answers questions in a slow, drawling way; but rationally. Makes no complaints. Is, apparently, in good " 8 bodily health. Jan 8/94. Slept, again, 7 hours, last night. AM. Pulse 84. R 24. No apparent change. — " 9 Jany 9/94. Again, slept quite well, last night. AM. Pulse 98. R 26. Appetite good; bowels badly constipated. " 10 Jany 10/94. Rested & slept well, 8 hours, last night. AM. " 92 " 24. Appetite good; bowels have moved. no cough yet observed. Quiet & well-behaved; talks but little; seems to have difficulty in understanding what is said to him. Dull & demented. Apparently in good health; makes no complaints. " 11 Jan 11/94. Slept 9 hours, last night. AM. Pulse 98. Bowels seem more regular. Talks little. Very stupid. " 12 Jan 12/94. AM. Pulse 90. Wandering in his speech, at times. Bowels seem now quite regular. " 13 Jan 13/94. AM. " 84. Appetite rather poor. Bowels constipated. Complains that he does not have any passage from the bowels & can't eat. Quiet & well-behaved. Talks little. Seems despondent. " 14 Jan 14/94. Has been sleeping 9 hours, most of past few nights. AM. Pulse 88, slightly irregular. Talks but little & in a low tone of voice. Is dissatisfied & melancholy. Complains of headache. Bowels free. " 15/16 Jan 15/94. AM. Pulse 86. No perceptible change, in patient's condition. Jan 16/94. AM. Pulse irregular. Had no passage from bowels yesterday; complains of headache today. Seems much " 17 discouraged & depressed. Jan 17/94. AM. Pulse 80. Bowels slightly constipated. Complains of head- " 18 -ache & giddiness in the head when he attempts to walk. Is feeble-minded. Jan 18/94. AM. Pulse 76. Headache is some better today, yet he still complains of constipation & dizziness. Talks very little. Is " 19 depressed & childish in his manner. Jan 19/94. AM. Pulse 68. Bowels quite badly constipated;

Personal and Medical History of Patrick Lavey

1894

Jan Cont'd 19 Patient complains of dizziness of head; particularly during the night; of weakness of the limbs & headachere. Jan 20/94. During past week, patient has continued quiet & restful, at night, sleeping " 20 uniformly, 9 hours ea each. Has been quiet & well-behaved. Talks very little in a slow drawling way, as if unable to comprehend what is said to him. Is very despondent. Appetite is fair; bowels badly constipated, as a rule. He has numerous groundless complaints regarding the state of his health. " 31 Is dull and demented. Jan 31/94. Apparently, rests well at night. Appetite has much improved, and he now eats quite well. Bowels more regular. He is uniformly quiet & well-behaved — Makes no complaints — Talks much more readily; is brighter, more cheerful & takes quite an interest in his surroundings. Physical condition has also improved and he is able to walk better and with firmer step. Has even gone out walking several times, of late. Habits are clean —

Feb 1/94 Feb 1/94. Pulse 152 pos. Pulse 7 pr. Feb 2/94. Apparently rests and sleeps well, at night. Appe- -tite good; bowels regular. Patient, since his admission, has greatly improved — He is quiet and inoffensive & willing to do anything asked of him. At first, he was greatly depressed; suffered from dizziness in the head and weakness in the lower limbs — During the past months, these have, however, entirely disappeared, and, at the same time, his mind has become more clear and active. Formerly, he talked in a low monotone, which it was very difficult to follow, and he imagined he was suffering from numerous ailments — He is now in a more rea- -sonable mind, but, even yet, often repeats himself and talks about trivialities — Still he is a little weak & could be easily imposed upon — Habits are cleanly —

March 6/94. Patient was committed here under the "Law of 1893" recently declared March unconstitutional. He was today sent home, with Comedien from Kemper County —

— Crossed off the Records —

Personal and Medical History of Fred. Heamel. (Himel)

EBBERT, FICKE & CHAMBERS, DAVENPORT, IOWA

Whole No. 3616.
Residence, 905 Margaret St. St Paul.
Date Admission, 8th January 1894.
Admitted by, Dr Okeefe Hour, 7 PM.
How Sent, John B. Olivier, Jof P. Ramsey County
Sex, Male
Age, 47 (he says 1/9/47)
Civil Condition, married
Children, none
Age Youngest Child, ——
Occupation, Plasterer
Degree Education, None
Profession Religion, Lutheran
Habits, unknown
Nativity, Germany (parents also born there).
Physicians Committing, P Marchand & G. L. Stanley.
Correspondents, (Kies) Mat. Lighthouser, 900 Fremont
no family Physician.

No. for Year, 186.
Insane Relatives, unknown
Cause Exciting, family trouble
Cause Predisposing, not stated
Form, alcoholic dementia
Accompanying Bodily Disorder, unknown.
Suicidal or Not, not.
Date of this Attack, unknown
Duration, unknown
No. of Attack, unknown
No. of Admissions, 1st
Age First Attack, unknown
Time of Leaving, March. 14' 94
Time in Hospital, 2 mo. 6 d.
Result, Rec.

Closed F. T. by ... 14th 1894 because ... 2 yrs. ... Unimproved

EXAMINATION ON ADMISSION.

Exam'd Dr. Herzog Jan 10/94

MENTAL CHARACTERISTICS.

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

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

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

REASONING POWER:
Ordinary Subjects, good
Own Mental State, somewhat defective; poor; thinks himself just as bright as any man
Special Subjects,

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

DELUSIONS: (see note)
Systematized or Not,
Special Subjects,
Transitory or Not,

HALLUCINATIONS: ✓

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, quite voluble

GENERAL DESCRIPTIVE REMARKS:

Admits that, occasionally, he drinks a good deal. He gives a history of 3 "Epileptiform seizures". The bulk of his conversation relates to his wife who left him 4 years ago. Says that time, his method of earning a livelihood seems to have been somewhat precarious. While he was living with his wife she became pregnant 5 times each time miscarried. He believes that these miscarriages were the result of medicines taken by herself. His delusions [illegible] of thought is shown by the remarkably insufficient reasons upon which he bases this belief; for example, he found an empty bottle in her room; then again, at one time his wife refused to ride in a lumber wagon & at another time, rode with 9 a load of oats. He is unable to see that this has nothing to do with her miscarriages. He admits however, that his wife never objected to having children. This remarkable history of miscarriages points rather to a specific infection than to criminal intent.

Personal and Medical History of Fred. Heamel

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 in. WEIGHT, 158 lbs. NUTRITION, Quite Good.
WOUNDS OR ABNORMALITIES, Mouth noted to right inline of mucous membrane of mouth some specific looking scars. and some pale, irregular scars impressed (superficial) —
TONGUE, Tremors, markedly tremulous Coatings, some Promptness Movement, quite slow
on right side is abrasion which he says he bit while in epileptic convulsion —
PUPILS, Equality, equal Size, Contracted
Response Light, peasy Accommodation, sluggish
SIGHT, normal
HEARING, seems normal
COORDINATION, Arms, very slightly impaired; finger to nose, eyes shut, fairly accurate.
Legs, standing & foot, quite fair; standing, eyes shut, sways considerably.
TREMORS, Hands, slight Tongue, marked
Facial Muscles, none General, none
REFLEXES, Patellar, equal; sluggish; about ✓ —
Other Reflexes,
ARTICULATION, Hesitating, seems about normal Slurred, some foreign accent
FACIAL EXPRESSION, Noted —
SENSIBILITY, ✓
HEART, Sounds are 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, 75.	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Probably 4 years ONSET GRADUAL OR SUDDEN Gradual
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother dead
Father or Pat. Relations, father dead
Brothers or Sisters,
} no history of heredity brought out —

Personal and Medical History of Fred. Heamel

EBERT, FICKE & DRAWBRS, DAVENPORT, IOWA

1894

Was brought here by Deputy Sheriff M. N. Goss, with the following history, which is somewhat meagre. As to consanguinity, number of attack, if previously at hospital, When first symptoms of this attack were manifested; also as to any relatives being insane, any previously show peculiarities, any history of intemperance, if subject to any severe disease &c, nothing seems to be known. Disease seems to be increasing; not variable; no rational intervals. There is a general insane manner about the patient, and he also shows a general mental deficiency. He is neither disposed to injure others, nor suicidal, nor filthy, nor destructive. He has not been restrained or confined. Supposed cause of the disease is family trouble. Has had no medical treatment. On personal examination, there are found a general insane manner, and an inability to answer questions, and pantomime; refusing to talk; during the examination, he performed in pantomime. Appearance also & manner insane.

Jan 8 Jan 8/94. On admission, is in fair physical condition. Has pulse 134. (S.R. Complexion dark; hair dark brown; eyes blue; condition of skin good. Bodily condition clean. Behavior is good).-

" 9 Jan 9/94. Slept well (9 hours) last night; Abt. Pulse 92 R 18. Appetite good; bowels free; no cough noticed. Is quiet & well-behaved. Talks readily & coherently. Makes no complaints. Is, apparently, in good

" 10 health. Jan 10/94. Gani, rested & slept well, last night. Appetite good; bowels regular. Well-behaved;

" 11 talks little, but answers promptly & sensibly. Pulse 82. R. 19. Jan 11/94. Abt. Pulse 78. R. 18. —

" 12 Continues about as above described. Jan 12/94. AM. Pulse 86. no material change to note. —

" 13 Jan 13/94. AM. Pulse 98. Seems somewhat more bright & intelligent. Appetite good. Bowels regular.

" 14/15 Jan 14/94 Am. " 75. Jan 15/94. Am. Pulse 84. Quiet & well-behaved. Talks coherently; no delusions

" 22 observable by attendants. Jan 22/94. During this the second week of his stay, and for several nights previous, patient has been resting & sleeping well, (uniformly 9 hours, at each night). Pulse has been about normal. Appetite has continued good; bowels regular. Has always been quiet & well behaved; making no Complaints. Talks when spoken to, in a prompt & sensible manner & is, apparently, free from delusions & He is desirous of returning to St. Paul to work, but is quite satisfied with his treatment while here, in Hospital. Says he had a hard back before admission to this institution, but is now well again.

" 31 Jan 31/94. Appetite good; bowels seem normal. Is quiet and well-behaved. Talks freely & sensibly. Makes no complaints. Is desirous of going home. Habits cleanly. Is in good physical condition.-

Feb 1/94 Feb 1/94. Wt 197 pds. (Has gained 1¼ pounds in the past 23 days). Pulse 82. Feb 28/94. Apparently restful at night. Appetite good; bowels regular. He is well behaved; talks freely & rationally. Is cleanly.

Mar 1/14 March 1/94. Wt 195 pds. Pulse 74. March 14/94. No change & report in either his physical or mental condition since note of 28th ult. For some time, though not discontented at remaining here, he has expressed a desire to return to St. Paul & go to work. Went home today.

— Crossed off the Records —

Personal and Medical History of Mathias Peterson #1

From 20 —

1894

June 2/30 June 2/94. Wt 199 pds. Transferred to B1 today. June 30/94. Continues quiet & well-behaved. Works onward. Has had no "spells", while in this ward. Works well & willingly. Appetite quite good. Habits are cleanly. —

July 1/15 July 1/94. Wt 194 pds. Pulse 90. July 5/94. Has commenced to work outside with the farm & grounds. —

" 25/31 July 25/94. Rested to-day, & remained in the ward. July 31/94. Has, (with exception last noted) continued to work outside daily; works well & willingly - Behaves well; has had no "spells" for some time. Habits cleanly.

Aug 1/20 Aug 1/94. Wt 190 pds. Pulse 70. Aug 20/94. Commenced working with the farmer, to-day.

" 26/31 Aug 26/94. Refused to work any longer, outside. Aug 31/94. Quiet & well-behaved, at all times, now. Has had no "spells", for some months. Willingly helps with ward-work. Is pleasant in manner. Thinks he might be allowed to go home. Appetite good; bowels are regular.

Sep 3/15 Sept 3/94. Wt 194 pds. Pulse 76. Sept 8/94. Continues quiet & well-behaved. Has had no "spells" now for a long time. Says he feels very well & is anxious to go home & work. Habits clean.

" 20 Sept 20/94. Was, today, sent home alone.

Discharged Nov 9-94-

Peter Dalen

1895

From 128.

June 1/30 Is not very tidy about his person. June 1/95. Wt 174 pds. P 70. June 30/95. Seems to keep about same, all the time: has numerous delusions. Says "he wants to go home": has to be watched very closely, or will escape. Works some on ward. July 1/95. Wt 173 pds. P 72. July 27/95. Tried to escape, while out

July 1/31 walking today. July 31/95. No change, in any way. Has still many delusions: mental condition not improved.

Aug 1/31 Aug 1/95. Wt 152 pds. Pulse 60. Aug 31/95. Patient seems to be getting worse: scarcely knows enough to dress himself: very restless: will sit very quietly & all of a sudden will begin talking in a loud tone. Goes out walking: works on ward. Sep 1/95. Wt 151 pds. P 74. Sept 30/95. No change to note in patient's condition.

Sep 1/30 Has delusions; also hallucinations. Makes no complaints. Oct 1/95. Wt 155 pds. Pulse 64.

Oct 1 Oct 31/95. Seems worse: has many & various delusions: noisy, at times: cannot talk rationally: he

" 31 works some. Physical condition good. Nov 1/95. Wt 159 pds. Pulse 64. Nov 11/95. Had a "spell" & was

Nov 1/11 very troublesome: talked all day & was slightly noisy. Nov 30/95. Does not seem to improve. Talks & acts

" 30 very foolishly & at times, annoys other patients: Lazy in his habits. Appetite good: bowels regular.

Dec 1 Physical condition seems good. Works some onward. Dec 1/95. Wt 160 pds. Pulse 80. Dec 31/95. No change

" 31 noted in his condition. Still holds delusions. Jan 1/96. Wt 167 pds. " 96. Jan 20/96. No special

1896

Jan 1/20 change noted. Jan 21/96. Transferred to B3 (on account of general change of the wards).

" 21 Jan 31/96. Still no change. Has "spells" when he is talkative noisy & obstinate: annoys the others.

" 31 Still holds delusions & talks & acts very foolishly. Physical health seems good: he works some on the ward.

Feb 1/29 Feb 1/96. Wt 169½ pds. P 82. Feb 29/96. Has a "spell" every 2 or 3 weeks & is very noisy & foolish: no delusions noticed: Physical condition good: appetite good: bowels regular: very untidy in dress & habit. Works on the ward.

Mar 1/ Mar 1/96. Wt 168 pds. P 80. Mar 11/96. Had a "spell" & was very noisy, all day. Mar 17/96. Very noisy, during day.

" 30 Does not sleep well, at night. Mar 30/96. No change noticed: remains about the same as last month.

April 1/30 April 1/96. Wt 166 pds. P 78. April 5/96. Very noisy, for a day or two. April 30/96. Patient appears to be somewhat improved: Quiet, while on ward & talks more rational. Works onward. Physical condition good. Appetite good. Bowels regular.

May 1/15 May 1/96. Wt 165½ pds. P 78. May 14/96. Had a "spell" & was very noisy. Talked a great deal: & was very foolish. Works some on ward. (carried to page 194)

GIBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3617
Residence, Minneapolis
Date Admission, 8th January 1894.
Admitted by, Dr. Phelps Hour, 7 PM
How Sent, John H. Steele, Jof P. Hennepin
Sex, Male
Age, 33½ years
Civil Condition, married
Children, two
Age Youngest Child,
Occupation, Dyer
Degree Education, Limited (went to school till 10 years old)
Profession Religion, not a church member
Habits, very intemperate, at times
Nativity, Scotland (Came to also born here)
Physicians Committing, L. A. Lippert & Chas Simpson
Correspondents, 6, Saratoga road, Millfield Road Lowe (wife) no family Physcn. & Clapton, London England

J. Pitkathly
532 West Superior St
Duluth Minn
Correspondent Duncan McFarland

Age First Attack, about 29.
Time of Leaving, Feb 21 '94
Time in Hospital, 1 mo 13 d.
Result, Rec.

Crossed off from Register Jan 3rd 1st, 1894, because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr Herzog, Jany 11/94.

MENTAL CHARACTERISTICS.

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

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

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

REASONING POWER:
Ordinary Subjects, }
Own Mental State, } Seems to be good
Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:
Admitt, that, at times, he gets a strong desire for drink, which he cannot overcome; eats nothing then and has some 'mucr' attacks"; but had not been drinking for a week before he came here. Has been working up to the Saturday before coming here, at his regular trade. This attack came upon him after supper, while walking down town. The only delusion brought out by examination was that he believes his arrest to have been a "put up job", although he admits he has no enemies. And, when questioned as to who instigated his arrest says "he does not know" "It may have been an Unseen Power". —

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

DELUSIONS:
Un Systematized ~~or Not~~, of persecution
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

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

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9½ WEIGHT, 162 lbs NUTRITION, Fair.
WOUNDS OR ABNORMALITIES, Slight old scar on right wrist, cut by putting hand thro a pane of glass: few spiders on both legs —
TONGUE, Tremors, none Coatings, light gray, at base Promptness Movement, prompt
PUPILS, Equality, Equal Size, ✓
Response Light, somewhat excessive Accommodation, somewhat excessive.
SIGHT, normal
HEARING, seems good
COORDINATION, Arms, } Does not seem impaired Romberg test
Legs, }
TREMORS, Hands, slight Tongue, none
Facial Muscles, none General, none
REFLEXES, Patellar, equal; exaggerated; about 8 —
Other Reflexes,
ARTICULATION, Hesitating, no — rapid — Slurred, English - Scotch Accent
FACIAL EXPRESSION, somewhat anxious
SENSIBILITY, ✓
HEART, 1st Sound, at apex, somewhat muffled
LUNGS, good, so far as known. —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, kept Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, fair. Records Poor, Irregular,
PULSE, 80. 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, Paternal uncle had paralytic stroke & died from it.
Brothers or Sisters, 1 sister died of consumption.

Personal and Medical History of Duncan Mc Farland

EGBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3617
Residence, Minneapolis, Minn.
Date Admission, 8th January 1894. —
Admitted by, Dr Phelps Hour, 7 PM.
How Sent, John A. Steele, Jof P. Hennepin County.
Sex, Male
Age, 33½ years
Civil Condition, married
Children, two
Age Youngest Child, —
Occupation, Dyer
Degree Education, Limited (went to school till 10 years of)
Profession Religion, not a church member
Habits, very intemperate, at times.
Nativity, Scotland; (Sam'l also born there)
Physicians Committing, L. A. Rippert & Chas Swinson
Correspondents, (wife) 6, Saratoga road, Millfield Rvas. Lowe
No family Physcn. Clapton, London, England.

No. for Year, 1897.
Insane Relatives, none; father inebriate
Cause Exciting, Intemperance
Cause Predisposing, previous attacks
Form, mania a potu
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, Suicidal.
Date of this Attack, not stated
Duration, not stated
No. of Attack, several (probably)
No. of Admissions, 1st here (In Asylum in England 4 yrs ago)
Age First Attack, about 29.
Time of Leaving, Feb 21/94
Time in Hospital, 1 mo 13 d.
Result, Rec.

Crossed off from this date Jan 1st, 1894, because illegible comments.

EXAMINATION ON ADMISSION.

Exd by Dr Herzog, Jany 11/94.

MENTAL CHARACTERISTICS.

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

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

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

REASONING POWER:
Ordinary Subjects, }
Own Mental State, } Seems to be good
Special Subjects, }

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

DELUSIONS:
Un Systematized ~~or Not~~, of persecution
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

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

GENERAL DESCRIPTIVE REMARKS:

Admits, that, at times, he gets a strong desire for drink, which he cannot overcome; has had some "minor attacks"; but had not been drinking for a week before he came here. Has been working up to the Saturday before coming here, at his regular trade. This attack came on Sunday after supper, while walking down town. He only delusion brought out by examination was that he believes his arrest to have been a "put up job", although he admits he has no enemies. And, when questioned as to who instigated his arrest says "he does not know" "It may have been an unseen Power". —

Personal and Medical History of Duncan Mc Farland

[redacted]

IISSION.—(Continued.)

TICS.

NUTRITION, Fair.

cutly putting hand thro' a pane of glass: few

Promptness Movement, prompt

ion, somewhat excessive.

TREMORS, Hands, slight — Tongue, none
Facial Muscles, none — General, none
REFLEXES, Patellar, equal; exaggerated; about 8 —
Other Reflexes,
ARTICULATION, Hesitating, no — rapid — Slurred, English - Scotch Accent
FACIAL EXPRESSION, somewhat anxious
SENSIBILITY,
HEART, 1st Sound, at apex, somewhat muffled
LUNGS, good, so far as known. —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,
BOWELS, Normal, kept Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, fair the Reports Poor, Irregular,
PULSE, 80. 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, Paternal uncle had paralytic stroke & died from it.
Brothers or Sisters, 1 sister died of consumption.

EBERT, FICLAN & CRAUBERG, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy Sheriff James Stines, with the following history. There is no history of consanguinity. This is not 1st attack; they come on occasionally, when drinking too much, and, 4 years ago, was confined in Asylum at Banstead, England, for 5 months. When first symptoms of this attack were manifested & in what way, is not stated. Disease is increasing in number of attacks & severity; is variable & there are rational periods, but at no regular intervals. Derangement now shown as to special subject, except troubling himself about his work & wages. Is not disposed to injure others. Has also attempted suicide by lying across St. R.W. Track; propensity not now active, however. Has no filthy or destructive habits. No insane relatives; but father was inebriate, and patient himself drinks freely, at times. Previous to accession of disease, was easily impressed, Emotional. Can tell when the attacks are approaching, but cannot describe feeling. There is no history of any severe disease &c or injury to head. He has not been restrained or confined. Supposed cause of the disease is Intemperance. He has had no medical treatment. —

On personal examination; patient appears perfectly rational while being examined: answered all questions intelligently and rationally, and promptly. Appearance & manner were somewhat weird, otherwise natural. From other sources it is learned that patient is a very heavy drinker of ardent spirits. —

Jan 8 Jan 8/94. On admission was put on B^d/S.R. Complexion light; hair light brown; eyes blue; condition of skin good. Has a slight scar (old) on wrist: also a few bruises on leg. Bodily condition clean. Is well-behaved. Pulse 84. R 18. T(a) 100.2. Jan 9/94. Quiet, sleeping 8 hours, last night. AM. P 84 R 17. T(a) 100. Appetite good. Bowels probably regular. Talks freely; no delusions noticed. Plays games &c.

" 10 PM. Pulse 82. R 18. T(a) 100.2. no complaints or injuries to report. Jan 10/94. Slept but 6 hours, was restless for 2 hours last night. AM. Pulse 80. R 18. T(a) 99.6. PM. Pulse 84. R 17. T(a) 99.8. Conduct

" 11 and behavior about as yesterday. Jan 11/94. Again passed a poor night, last night; being restless &

" 12 sleeping only 6 hours, or so. AM. Pulse 82. R 17. T(a) 100. PM. Pulse 86. T(a) 99.8. Jan 12/94. Slept better (7 hours), last night: restless for about an hour. AM. Pulse 78. Appetite good. Talks freely; makes

" 13/14/15 no complaints. Jan 13/94. AM. Pulse 80. Jan 14/94. AM. Pulse 80. Jan 15/94. AM. Pulse 80.

" 16 Continues quiet and well-behaved. Talks freely; no delusions yet noted. Jan 16/94. Rest & sleep at night have been much better (7 hours) in each of last 4 nights. Appetite is good: bowels seem normal. Plays games, with quite an interest, and helps with the work on ward.

" 17/18/19 Jan 17/94. AM Pulse 74 — Jan 18/94. AM Pulse 72. — Jan 19/94. AM. Pulse 74. —

"20/21/22 Jan 20/94. AM " 74 — Jan 21/94. AM. " 76 — Jan 22/94. AM " 78. —

" 23 Jan 23/94. During past week, patient has been resting & sleeping well, uniformly 8 hours, each night. Has, all along, been quiet and well behaved; gets, however, somewhat excited, at times. Appetite has been uniformly good. Bowels apparently regular. Talks freely; no delusions yet noticed. Makes no complaints. Takes an interest in games &c. Works in the dining-room.

" 31 Is in good physical condition. Habits are clean and neat. Jan 31/94. Continues quiet and well-behaved. Is somewhat troubled with constipation. Talks freely & sensibly. Seems in good spirits; apparently contented (though occasionally given to worry about his family in Old Country). Works in the dining, also helps with the other ward-work.

1894

Feb 1/94 Feb 1/94. Wt 174½ pds. (has gained 12½ pds, since coming). Pulse 76. Feb 28/94. Apparently rests & sleeps well, at night. Appetite good; bowels somewhat constipated, at times. Talks freely and quite sensibly; makes no complaints. Works in the dining room. Has improved greatly, and seems fairly well.

Sent home, alone, today.

— Crossed off the Records —

Joseph Bercet

From 80

1895

Feb 1/95 Feb 1/95. Wt 132 pds. P 76. Feb 28/95. Appetite fair; bowels regular. no cough noted. Appears to be getting

" 28 gradually weaker & is losing in flesh. Makes no complaints; seems to have no bodily ailment. Behavior

March 1/95 quiet & inoffensive. Talks very little. Is slightly incoherent. Weak-minded. Habits are cleanly.

April 1/95. Wt 129 pds. P 75. March 31/95. no change to report, during month; Habits are clean.

May 1/95. Wt 138 " P 82. April 30/95. Condition about same as reported on 28th February last.

June 1/95. Wt 127 " P 79. May 31/95. Quiet & harmless: no complaints: talks very little: is dull & uninterested: is clearly in habit. Is of a weak constitution & seems losing strength gradually.

July 1/95. Wt 122 pds. P 102. June 30/95. The only change observable in patient's condition, since last report is a gradual diminution of strength & mental power. July 1/95. Wt 122 pds. Pulse 88.

" 15 July 15/95. Has been complaining, the last few days, of a pain in throat, causing expectoration.

" 31 Cod-liver oil & maltine administered. July 31/95. Still losing strength & mental faculties much impaired.

Aug 10/95 Aug 10/95. Patient continues to lose ground, both physically & mentally. Aug 15/95. Growing weaker,

" 19 gradually. Aug 19/95. Transferred to I.W. at 11^30 Am: Appeared pretty-down & quite weak.

" 21 Was given a Sponge bath & put to bed. Aug 21/95. Sleeps scarcely any: has difficulty in breathing: takes a fair amount of nourishment, but finds difficulty in swallowing: chokes, at times.

" 22 Aug 22/95. Has distinct "Cheyne-Stokes" breathing, this morning: heart-sounds slow. no distinct murmurs, but 1st sound is blurred & 2nd sound roughened. Patient is more dull & weak: apex-beat under nipple: no other bodily symptoms new. Arteries somewhat atheromatous. Heart

" 24 failing. Aug 24/95. Still confined to bed. Appears some better, this morning. Visited by Kerr Howden.

" 25 (on examination, urine was found to contain albumen). Aug 25/95. Is steadily growing weaker.

" 26 Sleeps & eats very poorly, at night. Bowels move freely, by aid of enemata. Aug 26/95. Very weak this Am.

" 27/28 Aug 27/95. Appears some brighter & stronger, today. Still, however, sleeps poorly. Aug 28/95. Breathing very hard this Am. Given warm bath (lasting 40 minutes): seemed much relieved, by it.

" 30 Aug 30/95. Weaker than usual, today. Was very restless, all night: has "spells" when he appears to be choking. Aug 31/95. Slept none, last night. Was very restless and disturbed.

Sep 1 Sep 1/95. Patient now chokes on the slightest particle of food. Cannot even swallow milk.

" 2/3 Sep 2/95. Is gradually failing. Refuses all nourishment. Sep 3/95. Slept none, during night. 7 Am. very weak: in semi-comatose condition: passive oedema of lungs: slight consolidation of both bases. Large moist rales over entire chest. Heart sounds obscured (see nurse's record). Is rapidly failing. —

" 4 Sep 4/95. Continues to fail rapidly during night & Died at 4^45 Am. — Died —

Personal and Medical History of Mathias Peterson #1 (Anderson)

ABBOTT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3618.
Residence, Manchester, Minn.
Date Admission, 8th January 1894.
Admitted by, Dr. Phelps Hour, 7 PM.
How Sent, Newman Stackner Jo P. Hudson County
Sex, Male.
Age, 30
Civil Condition, Single
Children, none
Age Youngest Child, —
Occupation, Farmer
Degree Education, not much
Profession Religion, Lutheran
Habits, not stated - probably not good.
Nativity, Minnesota (Parents from in Norway) —
Physicians Committing, A. Wedge & H. N. Wilcox
Correspondents, Lavinty Peterson
Nearest Relative or Friend, Manchester Minn
Family Physician

No. for Year, 188.
Insane Relatives, none - father intemperate.
Cause Exciting, Sunstroke in 1880 —
Cause Predisposing, previous attacks.
Form, acute mania (recurrent)
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, Not.
Date of this Attack, 4th January 1894
Duration, about 4 days —
No. of Attack, 4th (others Oct 90 - Dec 91 previously)
No. of Admissions, 4th (has been in this hospital before)
Age First Attack, 18 years
Time of Leaving, Sept. 20. 94
Time in Hospital, 8 mos 12 d
Result, Rec.

Ed by Dr. Herzog Jany 11/94.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Quick
MEMORY:
Past Events, } Impaired
Recent Events, }
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, fairly Correct
REASONING POWER:
Ordinary Subjects, } Defective; considers himself sane" —
Own Mental State, }
Special Subjects, }
GENERAL DESCRIPTIVE REMARKS:
This patient has been admitted to this institution 3 previous times, 1 boyhood, he was recognized as defective. While he was in the hospital, previously, his symptoms were those of acute mania. When sent home, he was not considered in perfect mental condition. His present condition is a relapse & his judgment at fault. His history seems to indicate that he has suffered from a chronic mania with acute exacerbations and is now degenerating into a condition of dementia.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, excited
Depressed,
DELUSIONS:
Systematized or Not, none brought out
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none brought out
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent but incohesive
Voluble or Reticent, Voluble

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 3/4 WEIGHT, 182½ lbs. NUTRITION, good
WOUNDS OR ABNORMALITIES, old scar on nose, (received in a fight while here before); haematoma auris (left).
TONGUE, Tremors, slight Coatings, light; whitish at base Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Normal Accommodation, Normal
SIGHT, Good
HEARING, Good —
COORDINATION, Arms, not impaired; finger to nose, eyes shut, quite accurate
[illegible] not steady; Standing eyes shut, slightly unsteady

Case No. 3618. Mathias Peterson #1. Vol. 27.

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, somewhat restless.
SENSIBILITY, ✓
HEART, palpitating; strong; 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, Records kept	Poor,	Irregular,
PULSE, 110.	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, Father Intemperate
Brothers or Sisters,

Personal and Medical History of Mathias Peterson #1 (Anderson)

BARRETT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3618.

Residence, Manchester, Minn.

Date Admission, 8th January 1894.

Admitted by, Dr. Philips Hour, 7 PM.

How Sent, Herman Blackner Jof P. Fillmore County

Sex, Male.

Age, 30

Civil Condition, Single

Children, none

Age Youngest Child, —

Occupation, Farmer

Degree Education, not much

Profession Religion, Lutheran

Habits, not stated - probably not goo

Nativity, Minnesota (Parents born in Norway) —

Physicians Committing, A. Wedge & H. H. Hel

Correspondents, Lavinty Peterson

Profession Physcn Manchester minn

No. for Year, 188.

Insane Relatives, none - father intemperate.

Cause Exciting, Sunstroke in 1880 —

Cause Predisposing, previous attacks.

Form, acute mania (recurrent)

Accompanying Bodily Disorder, none mentioned

Suicidal or Not, Not.

Date of this Attack, 4th January 1894

Duration, about 4 Days —

No. of Attack, 4th (Others Oct 90 - Dec 91 previously)

No. of Admissions, 4th (Brookings in Nov. 1890)

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Ed by Dr. Herzog Jany 11/94.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Quick

MEMORY:

Past Events, } Impaired

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, fairly Correct

REASONING POWER:

Ordinary Subjects, }

Own Mental State, } Defective; considers himself sane —

Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

This patient has been admitted to this Institution 2 previous times, Subsequent, he was recognized as defective. While he was in the hospital, previously, his delusions were those of acute mania. When sent home, he was not considered in perfect mental condition. His present condition is a relapse & his judgment at fault. His history seems to indicate that he has suffered from a Chronic mania with acute exacerbations and is now degenerating into a condition of Dementia.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, somewhat

Depressed,

DELUSIONS:

Systematized or Not, none brought out

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none brought out

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Somewhat incoherent

Voluble or Reticent, Voluble

Personal and Medical History of Mathias Peterson #1

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 3/4 WEIGHT, 182½ lbs. NUTRITION, good

WOUNDS OR ABNORMALITIES, old scar on nose; (received in a fight while here before); haematoma auris (left).

TONGUE, Tremors, slight Coatings, light; whitish at base Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, normal Accommodation, normal.

SIGHT, Good

HEARING, Good —

COORDINATION, Arms, not impaired; fingers to nose, eyes shut, quite accurate

Legs, very slightly impaired; standing erect, cannot stand steady; staggy eyes shut, Romberg

TREMORS, Hands, slight Tongue, slight

Facial Muscles, none General, none

REFLEXES, Patellar, Equal — abnt q — Dr. P's scale —

Other Reflexes,

ARTICULATION, Hesitating, ✓ Slurred,

FACIAL EXPRESSION, somewhat restless.

SENSIBILITY, ✓

HEART, palpitating; strong; 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, 110.		RESP.,	TEMP.,

Records kept

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, Father Intemperate

Brothers or Sisters,

Personal and Medical History of Mathias Peterson #1

1894

This patient was received here at the hands of Deputy Sheriff T. L. Torgerson, attended by him, with the following history. There is no history of consanguinity, nor of heredity, but father was intemperate. This seems to be 4th attack. Has previously been in this (Rochester) Hospital (see note below ®); remained quite well until four days ago (Jany 4/94) when the first symptoms of this attack were manifested, by quick, restive looks; he had been up at a dance all the night before. Does not sleep. The disease seems increasing; is variable, however, and there are rational intervals, but at irregular periods. He seems to be getting worse all the time; talks unintelligibly. Now, seems to be dazed and very unreasonable. Patient is not disposed to injure others, nor suicidal, nor filthy nor destructive. Previous to accession of the disease, was not regarded as bright or strong-minded; somewhat irritable and unreasonable. He had a sunstroke in 1880. Has not been restrained only when brought before the Court in Sheriff's harness (2). Supposed cause of the disease is sunstroke formerly received. Has received no treatment except in Hospital for Insane. On personal examination, patient appears dazed; almost stupid; will only answer about half the questions. There is a sort of general forgetfulness, so much so that he cannot continue a conversation. Said he felt cheap; said one of the witnesses told a lie; could not remember dates very well. Patient's eyes look wild, congested. Pulse 116. Sat in a sort of stupidly-dazed condition. Appearance & manner, stupidly restless. From others it is learned that patient is stubborn, unreasonable, unmanageable, and shows delusions. Hence his commitment here.

Jan 8 Jan 8/94. Note ®. Patient has been here 3 times before; (see Vol 1 page 128; Vol 5 page 81. Vol 14 page 173); the last time from Oct 7/90 to July 17/91. From date of last coming until March/91, he was restless, noisy and, at times, violent, very destructive, pugnacious, denuding himself and was frequently in seclusion. About this latter date he began to improve, and kept up this improvement until being taken out by his friends. Manner however, was still somewhat foolish.

On admission, was in fair physical condition. Was put on B3. (S.R. Complexion Sandy; hair light; eyes blue; condition of skin good; is slightly bruised on left shoulder. Bodily condition clean. Has hamatoma on/ left side. Is well-behaved). Jan 9/94. Was restless for 4 hours, sleeping but 5 hours, last night. Am. Pulse 72 R 18 - T(e) 99.8. Appetite good; bowels have moved. Is restless today; does
" 10 not seem to be contented; "wants to go down to the office". Jan 10/94. Slept 6 hours, last night, was restless for 3 hours or so. Am. Pulse 96. T(e) 99.4. Is fairly well-behaved today. —
" 11 Jan 11/94. Rested & slept better (7 hours), last night: though somewhat restless. Am. Pulse 84. T(e) 99.2.
" 12 Jan 12/94. Slept 8 hours, last night. Was quiet. Am. Pulse 78. T(e) 99. Appetite good. Works in dining room.
" 13 Jan 13/94. Again, slept well, last night. Bowels are regular. Habits are clean. Is neat & tidy in
" 14 his personal appearance. Jan 14/94. Is fairly well-behaved. Am. Pulse 70. T(e) 99.8. Behavior is
" 15 fairly good. Is willing & obedient. Works well on the ward. Jan 15/94. Am. Pulse 70. T(e) 99.2.
" 22 Jan 22/94. During past week, though occasionally restless for a few hours, yet, on the whole, he has slept about 7 hours or so, each night. Appetite has been good. Bowels regular. Pulse has been about normal. T(e) on 17th 100, and on 18th 99.8; has since become about normal. Patient's behavior shows
Considerable of weak-mindedness, but he has behaved quite well & mind works quite clearly.
" 31 Jan 31/94. No material change, since last note. Helps with the work on ward. Is fairly well behaved. Habits are clean. —

1894

Feb 1/17 Feb 1/94. Wt 187½ pds; (has gained some in flesh). Pulse 96. Feb 17/94. Appetite good; bowels regular. Seems to be growing worse than he was, when brought in; is beginning to be very troublesome. Has some peculiar actions about him, of late: will stand by a window looking vacantly out and
" 19 act foolishly; laughs to himself. Feb 19/94. Engaged in a fight with Jos. Bricke, receiving a
" 21 black eye. Feb 21/94. Got hold of the gas fixtures in the dining-room this A.M. and twisted them all out of shape, before he was stopped. Also attempted to get out of the door, last evening, (when Physician was making his round). Was restless & noisy for 5 hours, last night, sleeping but 4 hours. Was taken to C3 this morning.

Patient, having been committed under the "new law" recently declared illegal,
Feb 21 he was today taken out and brought back, under "new Commitment Papers, from Olmsted County. Was put back on B3. (On being brought back, about 3 PM, today, he was very excited & violent, refusing to return toward; had to be carried up & was put on C3 for a while, in the alcove. Feb 22/94. Was quite noisy for 5 hours, sleeping but 4 hours, last
" 22 night; soiled his room, all over. Feb 23/94. Slept only 2 hours, last night; was restless and noisy
" 23 for 7 hours; tore up his mattress & broke his chamber; also soiled his room. Feb 24/94. Restless
" 24 & noisy for 5 hours, sleeping but 4 hours, last night. Feb 25/94. Again passed a restless & noisy night;
" 25 also tore up his mattress. Attacked one of the attendants in C3 yesterday & got him down but help arrived before any injury was done. Feb 26/94. Extremely noisy nearly all night and
" 26 slept but 1 hour. Was up, standing in one corner of his room, most of the time. Tore his mattress.
" 27 Feb 27/94. Again extremely noisy, last night. Slept only 2 hours. Tore up his mattress & clothing.
" 28 Feb 28/94. Behavior is violent & destructive. Habits are dirty. Physical condition good.
Mar 1 Mar 1/94. Wt 176 ½ pds. Has lost 11 pounds in past month. Complains of no ill feeling. By-
" 5 Mar 5/94. Has improved some of late; not so noisy; does not now destroy his clothing &c &c.
" 15 Mar 15/94. Seems to have recovered from his recent "spell". Is now well-behaved. Talks quite rationally
and seems to be all right. Works well on the ward. Habits are clean. Health good. —
" 31 Mar 31/94. No change to report since note of 15th inst. Works a little in the dining-room —
Apl 2/7 Apl 2/94. Wt 190 pds. (a gain of 13½ pounds in the past month); pulse 84. Apl 7/94. Patient has been growing worse, in the last few days; has a very vicious look and is very mischievous. Had some trouble with a fellow-patient (Joseph Stees) a few days ago & got his face slightly bruised. Is becoming quite quarrelsome & pugnacious. At present, kept in C3 in day-time; sleeps in C4. —
" 8/10 Apl 8/94. Tore up his mattress & blankets during the night & also soiled his room. Apl 10/94. Bit a fellow patient, Steven Johnson, ear partly off, today. Fell against a settee & cut himself
" 12/15 above the eye. Apl 12/94. Soils his room, every night; also destroys his clothing. Apl 15/94. Is somewhat better today. Does not tear his clothing any more & is also somewhat quieter. Appe-tite continues good; bowels regular. Habits clean, of late. Still kept in C3 in the day-time.
" 21/26 Apl 21/94. Has improved some, of late. Was taken back to B3 today. Apl 26/94. During the past few
" 30 nights, sleep has been poor & patient has required sleeping doses. Apl 30/94. Appetite good; bowels regular. Behavior, of late, is good; talks rationally. Works on ward. Habits clean at present. (Was 4 days out in month)
May 1/31 May 1/94. Wt 196 pds. (is still gaining in flesh); Pulse 92. May 31/94. Appetite good; bowels regular; Behavior, at present, fairly good. Works on ward; habits clean. Somewhat more rational, at times.

(carried to page 12)

Personal and Medical History of Wm. Otzikoski

Wm. Archercufski
Shenandoah, Pa.

GIBERT, PUGLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3619.
Residence, Webster, Minn.
Date Admission, 10th January 1894
Admitted by, Dr Kilbourne Hour, 4.30 PM
How Sent, C. N. Pye, Ct Commr, Rice County
Sex, Male
Age, about 25.
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer
Degree Education, very limited; can read Polish.
Profession Religion, Roman Catholic
Habits, not intemperate, so far as known.
Nativity, Poland; (parents also born there)
Physicians Committing, H. A. Stuntz & A. J. Schmidt
Correspondents, Adam Archercufski
No family Physician Mount Carmel Pa.

No. for Year, 189.
Insane Relatives, Cannot find out.
Cause Exciting, Despondency & worry
Cause Predisposing, previous attack
Form, acute mania
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, not
Date of this Attack, 4th Jany 1894
Duration, about 6 days
No. of Attack, 2nd (one last July, lasting several days)
No. of Admissions, 1st
Age First Attack, about 25 or 26 years
Time of Leaving, 3rd August 1895
Time in Hospital, 1 year: 6 mos = 24 Days
Result, Disch. Nov 6/95 = Recovered.

EXAMINATION ON ADMISSION.

Exby Dr Herzog, Jany 12/94

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events,
Recent Events, } not very Good
Special Subjects,

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

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

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

DELUSIONS:
Systematized or Not, None brought out.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none brought out

ILLUSIONS:

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

GENERAL DESCRIPTIVE REMARKS:

Gait is somewhat uncertain & straddling. He acts rather peculiarly; very seldom will look at his questioner, either keeps his head down or gazes out of window. Patient labors under some difficulty owing to his unfamiliarity with the English Language, but even when he does understand a question, he wanders from the subject. Patient specifically denies any delusions of grandeur mentioned in the history & insists that he's a poor uneducated laboring man. General appearance at time of examination simple melancholia.

Personal and Medical History of Wm. Otzikoski

Wm. Archercufski
Shenandoah, Pa.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5¼ WEIGHT, 134 lbs. NUTRITION, somewhat poor; Circulation poor. Tips of fingers cold.
WOUNDS OR ABNORMALITIES, None noted.
TONGUE, Tremors, Fibrillary Coatings, bluish color Promptness Movement, somewhat slow.
PUPILS, Equality, Equal & reasonably mobile Size.

Case No. 3619. Wm. Otzikoski or Archercufski. Vol. 27.
The Law of 1893 having been declared unconstitutional, this patient was recommitted.
New commitment papers in box file in vault with the original ones.

TREMORS, Hands, slight [illegible] Tongue, fibrillary tremors
Facial Muscles, None General, restlessness.
REFLEXES, Patellar, Equal; about q — Dr Js scale.
Other Reflexes,
ARTICULATION, Hesitating, somewhat Slurred, Foreign Accent
FACIAL EXPRESSION, Despondent.
SENSIBILITY,
HEART, Sounds forcible; no murmurs —
LUNGS, supra & infra clavicular spaces depressed but no further evidence of consolidation.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Previous Attack ~~ONSET GRADUAL OR SUDDEN~~, tho' he denies this
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} no history of heredity could be brought out

Personal and Medical History of Wm. Olzikoski

Wm. Archercyski
Shenandoah, Pa.

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3619.
Residence, Webster, Minn.
Date Admission, 16th January 1894.
Admitted by, D. Kilbourne Hour, 11.30 PM
How Sent, C. H. Pope, Ct Commr, Rice County
Sex, Male
Age, about 25.
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer
Degree Education, very limited; can read Po
Profession Religion, Roman Catholic
Habits, not intemperate, so far as known.
Nativity, Poland; (parents also born there)
Physicians Committing, H. A Stuart and A. J. Schmidt
Correspondents, Adam Archercyzeski
No family Physcn Mount Carmel Pa.

No. for Year, 189
Insane Relatives, Cannot find out.
Cause Exciting, Despondency + worry
Cause Predisposing, previous attack
Form, acute mania
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, not

Time of Leaving, 3rd August 1895
Time in Hospital, 1 year: 6 mos = 24 days
Result, Dsch Nov 6/95 = Recovered.

EXAMINATION ON ADMISSION.

Early D. Herzog, Jany 17/94

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events,
Recent Events, } not very good
Special Subjects,

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

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

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

DELUSIONS:
Systematized or Not, none brought out.
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none brought out

ILLUSIONS:

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

GENERAL DESCRIPTIVE REMARKS:
Said is somewhat uncertain + straddling. He acts rather peculiarly; very seldom will look at his address either keeps his head down or gazes outward. Patient labors under some difficulty owing to his unfamiliarity with the English Language, but even when he does understand a question, he wanders from the subject. Patient specifically denies any delusions of grandeur mentioned in the history + insists that he's a poor uneducated laboring man. General appearance at time of examination simple melancholia.

Personal and Medical History of Wm. Olzikoski

Wm. Archercyski
Shenandoah, Pa.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5½ WEIGHT, 134 pds. NUTRITION, somewhat poor; Circulation poor. Xtr. of fingers cold.
WOUNDS OR ABNORMALITIES, None noted.
TONGUE, Tremors, Fibrillary Coatings, bluish Color Promptness Movement, somewhat slow.
PUPILS, Equality, Equal very excessively mobile Size,
Response Light, very ready Accommodation, very ready.
SIGHT, good
HEARING, Seems normal
COORDINATION, Arms, very Slightly impaired; finger to nose, eyes shut, some impairment.
Legs, Standing in foot, quite steady; stand, eyes shut, without swaying; turning quickly, heeled
TREMORS, Hands, slight Tongue, fibrillary tremors
Facial Muscles, None General, restlessness.
REFLEXES, Patellar, Equal; about q — Dr P. scale
Other Reflexes,
ARTICULATION, Hesitating, somewhat Slurred, Foreign Accent
FACIAL EXPRESSION, Despondent.
SENSIBILITY,
HEART, Sounds forcible; no murmurs —
LUNGS, supra + infra clavicular space depressed but no further evidence of consolidation.
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, Previous Attack ~~ONSET GRADUAL OR SUDDEN~~, tho' he denies this.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} no history of heredity could be brought out

Personal and Medical History of Wm Ozikoski

Wm. Archercupske
Shenandoah, Pa.

EBERT, FULLER & CHAMBERS, DAVENPORT, IOWA

1894

This patient was received here at the hands of Deputy Sheriff A. J. Shaw, attended by P. O. Larson, with the following history. As to consanguinity, nothing known. This is, probably, 2nd attack; he had one last July, lasting for several days. First symptoms of this attack were manifested Jany 4/94; he became very extravagant in his ideas; wanted to buy everything. Disease seems to be increasing; is variable & there are rational intervals; these not regular; occur principally when he begins to talk of his schemes. Derangement now shown by his wanting to buy farms, horses, lumber & give employment to the idle men in the cities & also build churches. Patient is not seriously disposed to injure others. Is not suicidal, nor filthy nor destructive in habits. Cannot find out as to any history of heredity. He was always rather quick tempered; further than this nothing previously noticed. No history of intemperance nor of any severe disease, Epilepsy &c nor any injury to head, so far as known. Was put in City Jail for one day & night. The supposed cause of the disease is despondency & worry. Has had no medical treatment. On personal examination, he talks irrelevantly & continually, when speaking of his business, and does not answer a question when asked; talks continually at the lab question, and is rather incoherent; claims he has great plans for the relief of all the poor. Appearance and manner were rather wild. His Employer claims that patient get excited & wild after talking for a time, and frightens all about him.

Jan 10 Jan 10/94. On admission, patient is in apparently good physical condition. Was put on B3 (S.R. Complexion light; hair brown; Eyes gray; condition of Skin good. Bodily condition dirty; Is well-behaved). Jan 11/94. Was very restless for 5 hours or so, sleeping but 3 hours, last night. AM Pulse 62. R. 16. T. 99. Appetite medium. No cough noticed. Sits about, on seat, in middle way, all the day. Talks but little and only when questioned. PM. Pulse 64. T. 99.2. No complaints or injuries to note, today. Jan 12/94. Slept better (7 hours), restless only from 2 to 5 o'clock last night. — AM. Pulse 62. R 15. T. 98.8. Appetite, still, only medium. Sits quietly on a bench. Talks some. " 13 PM. " 64 T. 99.2. Jan 13/94. Was restless for 3 hours, sleeping but 5 hours, last night. AM. Pulse 62 R 16. T. 98.9. Appetite good. Walks some about the hall. Talks some. PM. Pulse 62. T. 99. Went out walking, with his ward, today. " 14 Jan 14/94. Slept 6 hours, restless for 2 hours, last night. AM Pulse. " 15 Conduct & behavior about as above described. Jan 15/94. Slept fairly well (7 hours), last night. Was quiet. " 16/17 AM. Pulse 62. Jan 16/94. Slept 8 hours last night. AM. Pulse 64. Jan 17/94. Slept 7 hours, last night; AM. Pulse 60. Quiet & well-behaved. Walks some about hall. Talks some unless addressed. Habits good. " 24 Jan 24/93. During past week, patient has been quiet & restful, at night, uniformly sleeping 8 hours, at a stretch. Pulse, taken daily, has been a little below normal. Appetite has been good; bowels, apparently, normal. There has been no noticeable change in his conduct or behavior by day. Walks about hall some, but generally sits quietly on a bench. Is very reticent, merely answering when spoken to. Habits clean. " 31 Jan 31/94. no change to note from what is above reported. Habits are clean. —

Feb 1/23 Feb 1/94. Wt 143 lbs; (has gained 9 lbs since coming). Pulse 70. Feb 23/94. Appetite not so good as usual " 24/25 Feb 24/94. Complains of being sick. Eye somewhat swollen. Went to bed in PM. Feb 25/94. Eye is red & inflamed; " 28 much swollen; shut. Patient put in isolation. Feb 28/94. Has been kept in isolation till today, when he was taken out, having been there 5½ hours. Pulse while there has ranged from 74 to 80. (Today 74). Feb 28/94. Patient was committed here under the "Law of 1893" recently declared unconstitutional by Supreme Court.

Personal and Medical History of Wm Ozikoski alias Wm Archercupske

1894

Feb 28 Cont'd Feb 28/94. Patient was today, Taken out and Returned under "new Warrant" from Austin Co. Was put back in isolation, on Ward B3 — and put to bed there. —

Mar 7/8 Mar 7/94. Weight 125 lbs (in underclothing). Pulse 76. Appetite medium. Mar 5/94. Sore as eye opened today. " 9/11 Has been kept in isolation until today (72½ hours). Mar 9/94. Got up today. Mar 11/94. Restless, today; " 12 walking the hall; talking & praying. Mar 12/94. Was very noisy part of the day, walking the hall, with " 14 Bible in hand. Mar 14/94. Was violent once, today. Broke a seat, by jumping on it. Turned the dishes " 15 over, on the table. Mar 15/94. Restlessly walking the hall; talking loudly & gesticulating &c &c. — " 18 Is much deluded. Appetite poor. Eats but very little. — Mar 17/94. Slept but 3 hours; restless and noisy for 8 hours, last night. Is violent, and troublesome, today; noisy; crawling about floor on his stomach. March 17/94. Extremely noisy 8 hours & slept none, last night. Insane in 1 hour " 19 today; then transferred to C3. Mar 19/94. Slept 6 hours; very noisy 3 hours, last night. Restless and " 20 noisy today; appetite poor. Mar 20/94. Noisy all night; slept none. Pulse 100. Has again been noisy and troublesome all day. Bowels are constipated. Is given cathartics; also frequent hypodermics " 21 Mar 21/94. Slept 8 hours; noisy 4 hours; last night. Noisy & troublesome all day. Bowels moved freely. " 22/23 Mar 22/94. Slept well last night; is also more quiet, today. Bowels moved regular. Mar 23/94. Quiet " 25 last night; also today. Slept 8 hours, last night. Mar 25/94. Noisy 3 hours during the night " 26/31 Mar 26/94. Has been noisy, all day. March 31/94. Appetite good; bowels regular. Is quietly behaves talks to himself but cannot be understood. Habits neat. Physical condition good. Patient seems to have made considerable improvement since coming on ward.

Apl 1 April 1/94. Wt 137½ lbs (a slight gain in flesh). Pulse 86. Seems quite rational today. Talked " 8 of his past life & the different places he had lived in, and his occupations. April 8/94. Is becoming " 9 more rational and lively; works some on ward. April 9/94. Has a peculiar motion of left leg, " 15 it seems weak or not entirely under control. April 15/94. Has been sleeping well, of late. Ap- petite very good: bowels regular. Is now well-behaved. Talks very little, only when addressed; " 23 hesitates. Seems drowsy by day. Physical condition is good. April 23/94. Restless & noisy; rolling " 30 on floor; gathering up dirt & eating it. April 30/94. During past 10 nights, patient has been almost nightly, noisy & restless for from 11 to 5 hours & has slept very poorly; has also been some- what destructive both by night & by day: noisy & troublesome a great portion of almost each day. Appetite very good: has to be fed at meal. Bowels regular. Has received a few slight bruises & scratches during the month. Was vaccinated on 28th inst. Habits are dirty. Is on medicines. There is no improvement (Attendant remarks) to note in this case. —

May 1/8 May 1/94. Wt 144½ lbs (a gain of 7 lbs, in last month): Pulse 70. May 8/94. During past week, has been " 11 noisy, by day & also by night. May 11/94. Very restless during day; eating dirt & rags. Never quiet by night " 31 May 31/94. Has been more or less noisy (since last noted) by night; also by day; at times, extremely so. Eats dirt & rags. At times, also, is troublesome. Is still fed on hall. Appetite good, but bowels irregular. Has a peculiar jerking of the leg, when walking. Talks incoherently; Habits fair. Physical condition fair, but on the whole no improvement.

June 1/30 June 1/94. Wt 142 lbs. Pulse 92. June 30/94. During first 18 days of this month he was noisy & destructive, day & night & slept very poorly: has been more quiet since 18th inst. Does not talk, though he seems to know what is said to him. Is fed on hall, as he will not eat himself. Habits, during these "spells" are dirty. There cannot be said to be any improvement noticed in this case. —

(Carried to page 52) —

ROBERT, FISCAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3621.
Residence, Oak Park, Was
Date Admission, 11th Janu
Admitted by, Dr. Phelps
How Sent, Rudolph Lehmic
Sex, Male.
Age, 37.
Civil Condition, married
Children, 3
Age Youngest Child, 1
Occupation, Laborer
Degree Education, Common
Profession Religion, Catholic
Habits, Probably Sober
Nativity, Stillwater, Minn; (parents born in Germany)
Physicians Committing, G. E. Clark & O. J. Merrill.
Correspondents, (address in case of necessity) Ellen C. Feiss Stillwater Minnesota
Family Physician, C. B. Marshall, Stillwater, Minnesota

Handwriting of Joseph Feiss Stillwater Minnesota March 25/94.

Joseph Feiss

Stillwater Minnesota

Result, Died; Case in General Paresis—

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog Jany 13/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish
MEMORY:
Past Events,
Recent Events, Almost Gone
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State, Seems Gone
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Patient is very dull mentally & sluggish in all his movements. Will scarcely answer questions & it is almost impossible to get any information from him.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None Detected
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None detected
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, reticent

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6¼ WEIGHT, 133 lbs. NUTRITION, Very Poor
WOUNDS OR ABNORMALITIES, Scar on breast; mole on belly; depressed linear scar over right eye; keloid See S.R. next page.
TONGUE, Tremors, tremulous; deviates to right. Coatings, slight yellowish Promptness Movement, slow
PUPILS, Equality, unequal; left the larger; probably due to a specific lesion irregular in Shape Size, right Contracted; left normal.
Response Light, will not respond Accommodation, no response
SIGHT, Good
HEARING, Seems normal
COORDINATION, Arms, Considerable inaccuracy. Fingers to nose, eyes shut, inaccurate.
Legs, Standing on foot, has great difficulty. Standing, eyes shut, sways some. Seems quickly, hesitating
TREMORS, Hands, slight Tongue, quite marked.
Facial Muscles, None General, slight.
REFLEXES, Patellar, Equal; about 9 or 10 — Dr. Pleads
No Abdominal —

Case No. 3621. Joseph Feiss. Vol. 27.

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

LUNGS, supra & infra clavicular spaces depressed; no other evidences of consolidation.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Record kept Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 84. 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,
Cannot obtain any history from him in these points.

Personal and Medical History of Joseph Feiss

HERBERT, PUTNAM & CHAMBERS, DAVENPORT, IOWA

Whole No. 3621.
Residence, Oak Park, Washington Co. Stillwater P.O.
Date Admission, 11th January 1894.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, Rudolph Lehnicke, Jo P, Washington County
Sex, Male.
Age, 37.
Civil Condition, married
Children, 3
Age Youngest Child, —
Occupation, Laborer
Degree Education, Common School
Profession Religion, Catholic
Habits, Probably have been bad —
Nativity, Stillwater, Minn; (parents born in Germany)
Physicians Committing, J. E. Clark & B. J. Merrill.
Correspondents, (address in case of emergency) Ellen E. Feiss. Stillwater Minnesota
Family Physician. E. B. Marshall, Stillwater, Minnesota

No. for Year, 191.
Insane Relatives, None.
Cause Exciting, Syphilis (prior to marriage 12 yrs ago
Cause Predisposing, probably bad habits
Form, general paresis
Accompanying Bodily Disorder, Syphilis (?)
Suicidal or Not, not.
Date of this Attack, September 1893.
Duration, about 4 months or so.
No. of Attack, 2nd (1st 2 years ago) —
No. of Admissions, 1st (was in Stillwater City Hosp.)
Age First Attack, about 35 —
Time of Leaving, 14th May 1895. —
Time in Hospital, 1 year; 3 mos; 23 Days
Result, Died; this in General Paresis —

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog, Jany 13/94.

MENTAL CHARACTERISTICS.

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

GENERAL DESCRIPTIVE REMARKS:
Patient is very dull mentally & sluggish in all his movements. Will scarcely answer questions & it is almost impossible to get any information from him.

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None detected
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None detected
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, reticent

(Continued.)

TRITION, Very Poor.
ed lucian scar over right eye; keloid

Promptness Movement, Slow
tooth marked. Suspicious looking scars on mucous membranes of mouth
Size, Right Contracted; Left normal.
Accommodation, No response

considerable pin[illegible] varicosed. Fingers & nose, Eyes shut; emaciated.
, standing on foot, has great difficulty. Standing, Eyes shut, Sways some. Saving jerky, hesitating
Tremors, slight Tongue, quite grained.
Facial Muscles, None General, slight.
REFLEXES, Patellar, Equal; about 9 or 10 — Dr. P's scale
Other Reflexes, no ankle clonus —

Case No. 3621. Joseph Feiss. Vol. 27.

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

LUNGS, supra & infra clavicular spaces depressed; no other evidences of consolidation.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Record kept
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,
Cannot obtain any history from him in these points.

HERBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3621.

Residence, Oak Park, Was

Date Admission, 11th Janu

Admitted by, Dr Phelps

How Sent, Rudolph Lehmic

Sex, Male.

Age, 37.

Civil Condition, married

Children, 5

Age Youngest Child, ✓

Occupation, Laborer

Degree Education, Common

Profession Religion, Catholic

Habits, Probably Lavet

Nativity, Stillwater, Minn; (parents born in G

Physicians Committing, G. E. Clark & B. J. Me

Correspondents, (address) in case of necessity Ellen E. Feiss. Stillwater Mn

Family Physician. C. B. Marshall, Stillwater, Minn

Handwriting of Joseph Feiss Stillwater Minnesota March 25/94

Joseph Feiss

Stillwater Minnesota

Exd by Dr Herzog, Jany 15/94.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events,

Recent Events, } Almost gone

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive,

REASONING POWER:

Ordinary Subjects,

Own Mental State, } Seems gone

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient is very dull mentally & sluggish in all his movements. Will scarcely answer questions & it is almost impossible to get any information from him.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Yes

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None detected

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None detected

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, reticent

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6¼ WEIGHT, 133 lbs. NUTRITION, Very poor.

WOUNDS OR ABNORMALITIES, Scar on breast; mole on belly; depressed cicatrix scar over right eye; keloid See S. K. next page.

TONGUE, Tremors, tremulous; deviates Coatings, slight yellowish Promptness Movement, slow.
right. large anaemic tooth marks. Suspicious looking scars on mucous membrane of mouth

PUPILS, Equality, unequal; left the larger; irregular in Shape Size, right Contracted; left normal.
probably due to specific sores

Response Light, will not respond Accommodation, no response

SIGHT, good

HEARING, Seems normal

COORDINATION, Arms, Considerable disturbance. Fingers & nose, Eyes shut, inaccurate.

Legs, Standing on foot, has great difficulty. Standing, Eyes shut, sways some. Jerking quickly, hesitating

TREMORS, Hands, slight Tongue, quite marked.

Facial Muscles, None General, slight.

REFLEXES, Patellar, Equal; about 9 or 10 — Dr P's scale

Other Reflexes, ankle clonus —

ARTICULATION, Hesitating, Yes Slurred,

FACIAL EXPRESSION, Blank.

SENSIBILITY, ✓

HEART, no murmurs.

LUNGS, supra & infra clavicular spaces depressed; no other evidences of consolidation.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good, Record kept	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 84.	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, } Cannot obtain any history from him in these points.

Brothers or Sisters,

1894

HERBST, FULLER & CHAMBERS, DAVENPORT, IOWA.

Was brought here by Sheriff's Deputy Geo. Green, with the following history. As to consanguinity unknown; no insane relatives. This is not 1st attack; one occurred 2 years ago, from July '92 to July '93; he was then in Stillwater City Hospital & treated; with sufficient benefit that he returned to work for several months. First symptoms of this attack was manifested during September 1893; by melancholia and dementia. Disease seems increasing; not variable; no rational intervals. Derangement is now shown by simple dementia. Patient has shown no disposition to injure others; nor is he suicidal; has filthy habits, however. There is no family history of intemperance. He has not been restrained or confined. Supposed cause of his disease is Syphilis, prior to marriage 12 years ago: has been under syphilitic treatment, with apparent improvement, at first. On personal examination, there was noticed Inequality of pupils, left slightly dilated; deflection of tongue to right; ordinary symptoms of dementia. Patient did not converse. Symptoms, appearance & manner, those of a Demented.

Jan 11 Jan 11/94. On admission was put on B³. (S.R. Complexion sandy; hair dark gray; Eyes blue; Condition of skin good; has scar on breast & mole on stomach; bruise on right elbow; bodily condition dirty; Is well-behaved). Patient is in fair physical condition. Jan 12/94. Quiet, sleeping 7 hours, last night. AM. Pulse 82. R 18. T 100.4. Appetite poor. Is dull & stupid. Does not speak any. —
" 13 Jan 13/94. Slept but 6 hours, last night. Appetite still poor. Has spoken some today and seems somewhat brighter
" 14 than yesterday. Jan 14/93. Slept better (8 hours) last night. AM. Pulse 72. T(e) 99.2. Appetite improving
" 15 some. Speaks but very little. Habits dirty & filthy. Jan 15/94. Slept 7 hours, last night. AM. Pulse 70.
" 16 T(e) 98.6. Appetite, now, fairly good. Jan 16/94. Slept only 6 hours, last night. Appetite good. Bowels move.
" 17 Is dull and stupid. Soils his clothes. Jan 17/94. Slept 7 hours last night. Appetite fairly good.
" 18 Bowels regular. Jan 18/94. Slept 8 hours, last night. Appetite fairly good; bowels regular. Appears to be a little brighter than when first brought in, and will now answer when spoken to & come when called.
" 19/20 Jan 19/94. No noticeable change. Jan 20/94. Is now medicine and seems to be now improving some.
" 25 Jan 20/94. Has continued to sleep quite well (7 hours) each night, for some time. Is quietly behaved, by day. Sits quietly on a bench most of the time - Seems to have improved quite a good deal of late; is
" 31 more active & will now, talk a little. Habits are filthy - Jan 31/94. Was struck by a fellow-patient (John McDonald) during the night, causing his eye to swell up and turn black. — Appetite good; bowels regular. Is quietly behaved. Talks very little. Physical condition is improving. Habits are dirty. (was 14 days dirty, during the month.). ——

Feb 1/28 Feb 1/94. Wt 123 pds (a loss of 10 pounds since admission). Pulse 88. Feb 29/94. Appetite good; bowels irregular. Seems to be improving some in the way of becoming more intelligent, yet habits continue dirty. -
Mar 1 Mar 1/94. Wt 126 pds (some gain in flesh). Still very dirty in habits. Today, transferred to B⁴. ——
" 15 Mar 15/94. Appetite good; bowels free. No cough noticed. Appears to be rather weak but does not complain of any pain or ill-feeling. Is rather well-behaved, though restless & excitable. Very answers to do anything he can. Talks readily; seems to be in an "exalted state". Has not been dirty since coming aboard.
" 21 Talks, in an absent manner, on all subjects, chiefly about his wealth, how he can purchase &c - Anything in the way of work that he does, he gets mixed up at doing. Mar 21/94. Patient was committed here under the "Laws of '93" recently declared unconstitutional. He was, today, Taken out and
" 23 Returned under "new warrant" from Olmsted County. March 23/94. Received a cut on the lip today being struck by patient Jno. R. Rhodes. (Note by D. Herzog. "Joseph Feiss appears like a general paretic;

1894

[illegible] Dear Wife I
I would write you
letter to day
how are the Children
I wish I was
you and can
I feel well it so
nabes.
Joseph Feiss

May 31 ...ico-ordination of legs & arms, delusions of grandeur, ...pressed by saying "he feels first-rate". He had adhesions of ...tropine. The right pupil is still slightly irregular." —) ...oticed: physical health seems good. Patient is very ...leeps little during the night, being often noisy & destructive. ...es constant watching - Makes no complaints, however. ...e better so". Habits are cleanly. ——— ..., struck on the left eye & cheek, also kicked & prostrated by ...iglen). - Apl 9/94. (Note by D. Herzog: "Patient's mental ...somewhat improved, both of arms and of legs. Articulation responds more promptly & he is able to pronounce ...bles. The left eye is, today, the larger".). - Apl 13/94. Today, ...brow and cheek, causing the blood to flow in both places. ...so much noise at night as to prevent him from sleeping. ...ket Feiss with his walking stick when Feiss was ...ite edge of left eye - Shortly afterward Geo. E. Todd ...oking him down - Apl 30/94. Patient's appetite ...is no change observable since note of 9th inst. — ...mouth). Pulse 98. May 31/94. Appetite good, bowels ...b. Has a rather skated gait, when walking. Behavior ...always in the best of spirits & says he feels good, all the ...time restraint - weights of 5-6-7 lbs. Bed (30 hrs) ...cleanly though he was dirty most of the month while in restraint.

June 1/30 ...Pulse 84. June 30/94. In the main, patient is ...ion, however, at night, not so noisy. Looks considerably ...very much rather childish. Is quiet & behaves in a fairly rational manner.

July 2/31 July 2/94. Wt 139 pds (a further gain of 8 pds, in past month). Pulse 90. July 31/94. Physical condition is very good; mental condition seems much improved: talks & acts more rationally. Habits are cleanly.

Aug 1/31 Aug 1/94. Wt 139 pds. Pulse 84. Aug 31/94. Behavior has been quiet & good. Makes no complaints. Talks, now, very little, and has fallen into a stupid, semi-somnolent state. Patient for the last two weeks has shown a marked retrogressive change in intellectual power. Formerly he was quite bright; sharp & ready with his answers to questions; now, he is dull & unable readily to understand what is said to him. Is cleanly in his habits. Physical condition apparently good.

Sept 1/10 Sept 1/94. Keeps about as last described. Sept 10/94. Was today, transferred to the Annex.
" 30 Sept 30/94. Patient was very filthy for first few days that he was in Annex; stupid in behavior & demented. For the past few days, he has been brightening up a little. Habits still very dirty.

Oct 1/31 Oct 1/94. Stupid & dull; rather uncertain in his gait. Filthy in habits. Oct 31/94. No change to note.

Nov 1/30 Nov 1/94. Keeps in his usual flesh. Is quiet, stupid and clumpish in behavior - Walks with a staggering gait - Speech quite rational, at times. Untidy in dress. Habits are filthy.

Dec 31 1895 Jany 31 Health is apparently good. — (carried to page 40)

EBERT, FICKE & CHAMBERS, DAVENPORT, IOWA.

1894

Was brought here by Sheriff's Deputy Geo. Green
unknown; no kin and relatives. This is not 1st
July "or; he was then in Stillwater City
to work for several months. First symptom
by melancholia and dementia. Disease
- ment is now shown by simple de
he suicidal; has filthy habits, low
confined. Supposed cause of
Syphilitic treatment, with
noticed inequality of p
Patient did not com

Jan 11 Jan 11/94. On, admi
of skin good; has scar on
" 12 Is well-behaved). Patient
last night. Tm. Pulse 82. R 18.
" 13 Jan 13/94. Slept but 6 hours, last nigh
" 14 than yesterday. Jan 14/93. Slept better (8
" 15 Some. Speaks but very little. Habits dirty
" 16 Is (a) 98.6: Appetite, now, fairly good. Jan 16/94.
" 17 Is dull and stupid. Soils his clothes. Jan 17/94.
" 18 Bowels regular. Jan 18/94. Slept 8 hours, last night. A
fairly good; bowels regular. Appears to be
a little brighter than when first brought in, and will now answer when spoken to & come when called.
" 19/20 Jan 19/94. No noticeable change. Jan 20/94. Is on medicine and seems to be now improving some.
" 25 Jan 20/94. Has continued to sleep quite well (7 hours) each night, for some time. Is quietly behaved, by
day. Sits quietly on a bench most of the time. Seems to have improved quite a good deal of late; is
" 31 more active & will now, talk a little. Habits are filthy. Jan 31/94. Was struck by a fellow
- patient (John McDonald) during the night, causing his eye to swell up and turn black. —
Appetite good; bowels regular. Is quietly behaved. Talks very little. Physical condition is
improving. Habits are dirty. (was 14 days dirty, during the month.) ——

Feb 1/28 Feb 1/94. Wt 123 pds (a loss of 10 pounds since admission). Pulse 88. Feb 29/94. Appetite good; bowels
irregular. Seems to be improving some in the way of becoming more intelligent, yet habits continue dirty.
Mar Mar 2/94. Wt 128 pds (some gain in flesh). Still very dirty in habit. Today, transferred to B4 ——
" 15 Mar 15/94. Appetite good; bowels free. No cough noticed. Appears to be rather weak but does not complain
of any pain or ill-feeling. Is rather well-behaved, though restless & excited. Very anxious to do
any thing he can. Talks readily; seems to be in an "exalted state". Has not been dirty since coming a ward.
" 21 Talks, in an absent manner, on all subjects, chiefly about his wealth, how he can juniper &c — Any
- thing in the way of work that he does, he gets mixed up at doing. Mar 21/94. Patient was committed
here under the "Law of '93" recently declared unconstitutional. He was, today, Taken out and
" 23 Returned under "new warrant" from Olmsted County. March 23/94. Received a cut on the lip today
being struck by patient Jno. R. Rhodes. (Note by D. Herzog. "Joseph Feiss appears like a general pantie;

he has exaggerated reflexes, inequality of pupils, inco-ordination of legs & arms, delusions of grandeur,
the peculiar feeling of self-satisfaction, expressed by saying "he feels first-rate". He had adhesions of
the iris on both sides, which were broken up by atropine. The right pupil is still slightly irregular." —)
March 30/94. Appetite good; bowels free; no cough noticed: physical health seems good. Patient is very
restless; constantly on the move during the day; sleeps little during the night, being often noisy & destructive.
Generally, he is a most troublesome patient & requires constant watching — Makes no complaints, however.
Considers himself well treated here; "could not be better so". Habits are cleanly. ——

April 1/5 April 1/94. Wt 127 pds. Pulse 104. Apl 5/94. Was struck on the left ear & cheek, also kicked repeatedly
" 9 on the back, today, by a fellow-patient (alias Vaughn). Apl 9/94. (Note by D. Herzog: "Patient's mental
state remains about the same; co-ordination has somewhat improved, both of arms and of legs. Arti-
" 13 culation is not so hesitating as formerly & the tongue responds more promptly & he is able to pronounce
difficult words without stumbling on the syllables. The left eye is, today, the larger".) Apl 13/94. Today,
patient Jacob Johnson struck Feiss on the left eyebrow and cheek, causing the blood to flow in both places.
His reason for doing so was because Feiss made so much noise at night as to prevent him (Johnson) sleeping.
" 15 April 15/94. This morning patient Wentworth struck Feiss with his walking stick when Feiss was
passing him on the hall, cutting him slightly on outer edge of left eye. Shortly afterward Geo. E. Todd
" 30 struck Feiss on right eye, cutting the skin & knocking him down. Apl 30/94. Patient's appetite
Continues good: bowels regular. No cough noticed. There is no change observable since note of 9th inst. —

May/31 May 1/94. Wt 122 pds (has lost some in flesh, in past month). Pulse 98. May 31/94. Appetite good; bowels
free. No cough observed. Appears to be in fairly good health. Has a rather skeleton gait, when walking. Behavior
has much improved & he is now quite & more sensible. Always in the best of spirits & says he feels good all the
time". — Is still noisy & somewhat destructive, at night. Was in restraint on nights of 5th 6th & 7th inst (3 nights)
Talks freely & is seemingly free from delusions. Habits cleanly though he was dirty one night while in restraint.

June/28 June 1/94. Wt 131 pds (a gain of 9 pds, in past month): Pulse 84. June 30/94. In the main, patient is
about as described in last general note. He sleeps better, however, at night; not so noisy. Works considerably
on the ward. Talks freely but is rather childish. Is quiet & behaves in a fairly rational manner.

July 7/31 July 7/94. Wt 139 pds (a further gain of 8 pds, in past month). Pulse 90. July 31/94. Physical condition is
very good; mental condition seems much improved: talks & acts more rationally. Habits are cleanly.

Aug 1/31 Aug 1/94. Wt 139 pds. Pulse 84. Aug 31/94. Behavior has been quiet & good. Makes no complaints. Talks,
now, very little, and has fallen into a stupid, semi-somnolent state. Patient for the last two
weeks has shown a marked retrogressive change in intellectual power. Formerly he was quite
bright; sharp & ready with his answers to questions; now, he is dull & unable readily to under-
stand what is said to him. Is cleanly in his habits. Physical condition apparently good.

Sep 1/30 Sep 1/94. Keeps about as last described. Sep 10/94. Was today, transferred to the Annex.
" 30 Sep 30/94. Patient was very filthy for first few days that he was in Annex; stupid in behavior &
demented. For the past few days, he has been brightening up a little. Habits still very dirty.

Oct 1/31 Oct 10/94. Stupid & dull; rather uncertain in his gait. Filthy in habits. Oct 31/94. No change to note.
Nov 1/30 Nov 10/94. Keeps in his usual flesh. Is quiet, stupid and clumpish in behavior - Walks with
Dec 31 1894 Jany 31 a staggering gait - Speech quite rational, at times. Untidy in dress. Habits are filthy.
Health is apparently good. —— (carried to page 40)

Personal and Medical History of George Wright (Colored)

TIBBETT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3623

Residence, St Paul.

Date Admission, 12th January 1894.

Admitted by, D. Phelps Hour, 7 PM

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

Sex, Male

Age, 25 years

Civil Condition, single

Children, —

Age Youngest Child, —

Occupation, R. R. Porter &c.

Degree Education, limited; can read & write.

Profession Religion, Baptist (but does not attend church)

Habits, not intemperate.

Nativity, Virginia (U.S.); Parents born in West Indies

Physicians Committing, C. C. Miller and A. B. Ancker

Correspondents, father James Wright. ~~Brook Ave. Richmond Va~~

Family Physician, Dr. C. C. Miller - 79 West 3d St.

No. for Year, 193.

Insane Relatives, no family history obtainable

Cause Exciting, possibly long period at Workhouse.

Cause Predisposing, not stated

Form, acute melancholia

Accompanying Bodily Disorder, none mentioned except Neuralgia

Suicidal or Not, Suicidal.

Date of this Attack, Dec 2 1893, at St Paul Workhouse.

Duration, about 2 weeks. —

No. of Attack, not known.

No. of Admissions, 1st

Age First Attack, not known.

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

Ex'd by Dr. Herzog Jany 16/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, } somewhat misty; though, on the whole, quite fair.

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, defective

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, slightly

Depressed,

DELUSIONS:

Systematized ~~or Not~~, fears of being harmed & prosecuted.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none brought out

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, fairly free

GENERAL DESCRIPTIVE REMARKS:

Cut on R. finger left hand, also scratch on neck, patient was caused in a scuffle while one of the Deputies or Guard were proceeding to take patient downstairs to the "White-cells". He said he had heard others say "if they get you down there, they will send you to the Hospital" & that frightened patient, hence his reason for refusing to go down to those cells. States he did not sleep for 10 days before his coming here & has not slept any since being here. (N.W. repeats differently) During examination, appears fear that he will have something done to him. Will be harmed or have his neck broken, while here in the office). He gives a fair history of syphilitic infection in 1887, although he says he had an inflammatory bubo at the same time (which may have been caused by contagion of the initial sclerosis.)

Personal and Medical History of George Wright (Colored)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 4 in WEIGHT, 128½ lbs. NUTRITION, Poor.

WOUNDS OR ABNORMALITIES, Cut on 3d finger, left hand.

TONGUE, Tremors, slightly tremulous Coatings, none marked Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, Yes, normal Accommodation, Yes, normal.

SIGHT, Good

Case No. 3623. George Wright. 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.

...es but, quite fairly accurate ...eady.

...Equal, normal presence; arm ...

Other Reflexes,

ARTICULATION, Hesitating, No Slurred, abnormal for his race.

FACIAL EXPRESSION, somewhat sullen.

SENSIBILITY,

HEART, beats strong; no murmurs.

LUNGS, sounds seem good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 68.	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably some time ONSET GRADUAL OR SUDDEN, probably sudden.

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

} no history of heredity brought out.

Personal and Medical History of George Wright (Colored)

EGBERT, FULLAM & CHAMBERS, DAVENPORT, IOWA

Whole No. 3623 — No. for Year, 193

Residence, St Paul. — Insane Relatives, No family history obtainable

Date Admission, 12th January 1894. — Cause Exciting, Possibly long period at Workhouse.

Admitted by, D. Phelps Hour, 7 PM. — Cause Predisposing, not Stated

How Sent, John B. Oliver, Jof P, Ramsey County. — Form, acute melancholia

Sex, Male — Accompanying Bodily Disorder, None mentioned except Neurasthenia

Age, 25 years — Suicidal or Not, Suicidal.

Civil Condition, Single — Date of this Attack, Dec 2-8/93, at St Paul Workhouse

Children, — — Duration, about 2 weeks

Age Youngest Child, —

Occupation, R. R. Porters &c.

Degree Education, Limited; can read &c

Profession Religion, Baptist (but does not

Habits, not intemperate.

Nativity, Virginia (U.S.); Parents born in West Indies — Result,

Physicians Committing, C. C. Miller and A. B. Anecker

Correspondents, Father James Wright Brook Ave. Richmond Va

Family Physcn. Dr. C. C. Miller - 79 West 3rd St.

EXAMINATION ON ADMISSION.

Ex-by Dr. Herzog Jany 16/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, } somewhat misty; though, on the whole, quite fair.

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, defective

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, slightly

Depressed,

DELUSIONS:

Systematized ~~or Not~~, fears of being harmed & persecuted.

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None brought out

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, fairly free

GENERAL DESCRIPTIVE REMARKS:

Cut on L. jugular left hand, also scratch on neck, he states was caused in a scuffle while one of the Deputies or Guard were proceeding to take patient down stairs to the "White-cells". He said he had heard others say "if they get you down there, they will send you to the Hospital" that frightened patient, hence his reason for refusing to go down to these cells. States he did not sleep for 4 or 5 days before his coming here (N.W. reports 3 days) During examination, appears fear that he will have something done to him. Will be harmed or have his neck broken, while here in the office). He gives a fair history of syphilitic infection in 1888, although he says he had an inflammatory boil at the same time (which may have been caused by constipation of the rectal sclerosis.)

Personal and Medical History of George Wright (Colored)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 4 in — WEIGHT, 128½ pds. — NUTRITION, Poor.

WOUNDS OR ABNORMALITIES, Cut on 3d finger, left hand.

TONGUE, Tremors, Slightly tremulous — Coatings, None marked — Promptness Movement, prompt

PUPILS, Equality, Equal — Size, normal

Response Light, Yes, normal — Accommodation, Yes, normal.

SIGHT, Good

HEARING, Normal

COORDINATION, Arms, } not much impaired; fingers true, eyes shut, quite fairly accurate

Legs, } Standing, Eyes shut, quite fairly steady.

TREMORS, Hands, none — Tongue, slight

Facial Muscles, none — General, none

REFLEXES, Patellar, Equal; somewhat lessened; about N.

Other Reflexes,

ARTICULATION, Hesitating, No — Slurred, about natural for his race.

FACIAL EXPRESSION, somewhat sullen.

SENSIBILITY,

HEART, beats strong; no murmurs

LUNGS, Sounds seem good.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Reg Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 68. RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably some time — ONSET GRADUAL OR SUDDEN, probably sudden.

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

Mother or Mat. Relations, } no history of heredity brought out.

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of George Wright (Colored)

EKBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1893

Was brought here by Deputy-Sheriff W.H. Goss, with the following history. No family history can be obtained. No. of attack is not known. First symptoms of this attack were manifested on Dec 28/93, at the St Paul Workhouse; held delusions as to certain persons going to murder him; by attempt to cut his throat with a piece of glass; the stealing of a knife which he said he took to defend himself with &c. Disease seems increasing. Is not variable; no rational intervals. Derangement now shown by his being in fear of bodily harm from imaginary enemies. He is sleepless, very nervous &c. Has shown a disposition to injure others; has also attempted suicide; propensity thought to be now active. Is also given to destruction of furniture & bedding. Patient is not addicted to intemperance, nor is any severe disease or injury to head mentioned. Was sentenced to the St Paul Workhouse for one year, last May, for larceny in second degree. Cause of the disease is possibly the long restraint in a prison. It has been impossible to treat him, as he has refused medicine. On personal examination, he is found to be fairly nourished, garrulous, nervous. The patient told of his trials, the enemies that he supposes are pursuing him, of his fear of being the victim of a conspiracy to restrain him of his liberty, of his arrest, his sleepless nights, his attempt at suicide &c. He sat near the Examiners, talking at random, at times. Appearance & manner not good; very nervous. (This patient has been under the surveillance of Dr. C. C. Miller, the Workhouse Physician, at the Workhouse, since Dec 28/93)—

Jan 12 Jan 12/94. On admission, is in fair physical condition. Wt as put on B[3]. (S.R. Complexion black, hair black; Eyes dark brown; Condition of skin good. One finger, l. hand, cut. Bodily condition dirty. Brain is good). Patient remarks, on coming, that he is afraid of being killed. Jan 13/94. Was restless for 4 hours, sleeping but 3 hours, last night. AM. Pulse 74 R 16 T(o) 99.6. Appetite poor; bowels constipated. Is well-behaved. no cough observed. Talks freely, but shows delusions; "thinks some one is going to kill him".

" 14 PM. Pulse 72. T(o) 99.4. No complaints or injuries to note. Jan 14/94. Was quite restless for 7 hours or so, last night, & slept but 1 hour. AM. Pulse 72. R 18. T(o) 99. Appetite poor. Talks nearly all the time. Is deluded. PM. Pulse 74. T(o) 99.2. Makes no complaints. Finger dressed today. Jan 15/94. Was restless and noisy for 3 hours, last night, sleeping but 2 hours. AM. Pulse 74 R 17 T(o) 98.8. Is well-behaved. PM. Pulse 70. T(o) 99. Wants to go home; says "he is not crazy &c". Jan 16/94. Slept 6 hours

" 17 last night; was restless 2 hours or so. AM. Pulse 72. Still shows delusions. Jan 17/94. Again passed a poor night, last night. AM. Pulse 74. Deluded; "talking with women up in transmove".

" 18 Jan 18/94. Restless and noisy for seven hours, sleeping but 1 hour, last night. AM. Pulse 72. —

" 19 Jan 19/94. Slept better last night, though restless a couple of hours. AM. Pulse 78. Appetite good.

" 20 Walks about the hall. Talks continually; still shows delusions. Jan 20/94. Restless 4 hours, sleeping

" 21 but 4 hours, last night. AM. Pulse 70. Jan 21/94. Was restless all night, sleeping none, last night.

" 22 AM. Pulse 70. Jan 22/94. Slept 7 hours, restless 1 hour or so, last night. Appetite good. Is more quiet than previously. Works some onward. Jan 23/94. Restless at times. Still shows delusions.

" 24 Jan 24/94. Still restless; refuses his medicine. Works quite well on the hall. Jan 25/94. Restless

" 25 for 3 hours, sleeping but 5 hours, last night. Is by day quite restless. Deluded. Jan 26/94. Was quite restless for 2 hours or so, but slept 6 hours, last night. Complains today of not feeling well. Pulse 74.

" 27 Walks about hall. Talk still shows delusions. Works some. Jan 27/94. Was restless for 7 hours & slept but 1½ hours, last night. Pulse has continued normal - Appetite good. Habits are clean.

" 31 Jan 31/94. Has been much disturbed the past few nights; restless about 4 hours in each; sometimes

Personal and Medical History of George Wright (Colored)

Jan Cont'd Jan 31 noisy, and sleeping only about 4 hours, in each. Appetite is good. He talks freely; not so deluded as he has been. Plays games &c. Works in the ward. Seems to be improving.

Feb 1/15 Feb 1/94. Wt 131 pds (Has made a slight gain in flesh). Pulse 80. Feb 15/94. Has been restless for

" 21 from 4 to 6 or 7 hours on each of the past 7 nights and has slept very poorly. Feb 21/94. Sleep has also been much broken during the past 3 nights. Patient is well-behaved. Works some in the ward. Plays billiards &c. Seems rather depressed at times. Habits are clean. —

" 23 Feb 23/94. This patient had been committed here under the "Law of 1893" recently declared unconstitutional. He was, today, Taken out and Returned under "new Commitment papers" from Olmsted County. Feb 28/94. Has been restless the past 2 nights, sleeping

" 28 only about 4 hours, in each. Appetite good. Is well-behaved. Plays games &c. Works some in the ward.

Mar 2/7 Mar 2/94. Wt 140½ pds. (Has gained 9½ pds. in past month). Pulse 80. Mar 4/94. Has been very

" 15 restless in each of past 4 nights, and has rested & slept poorly. Mar 15/94. Was restless for 6 hours, last night, sleeping only 2 hours. Appetite continues good. Is not very well behaved. Walks out occasionally, but has to be closely watched. Does no work; makes no complaints. —

" 23 Mar 23/94. Has been sleeping, nightly, only from 2 to 4 hours, during the past week; has been restless, the balance of each night. Is very cranky & indifferent, today. Mar 28/94. Has been

" 28 restless the greater part of the past 2 nights, sleeping only about 1 hour in each. Says "he was watching himself"; "thinks some one is going to injure him". Mar 31/94. Has been restless

" 31 the greater part of the past 3 nights, sleeping very poorly. Continues irritable at times & occasionally strikes fellow-patients without cause. Habits are clean and tidy. —

Apl 2 April 2/94. Wt 162 pds (a marked increase in flesh (21½ pds) in past month). Pulse 84. ——

" 15 April 15/94. Continues restless at night for from 5 to 6 hours, sleeping only 2 to 3 hours, in each. Is, at times, obstinate, refusing to go to bed & has had to be undressed by force on 2 occasions, lately. Cranky & obstinate by day; will not do anything requested of him. Is in good physical health.—

" 16 April 16/94. Appetite good; is obstinate & stubborn; when asked to move today, he shaved "fight" and was

" 19 transferred to B[3]. Habits are clean. April 19/94. Very stubborn & contrary; does not want to eat any; has not partaken of any food for past 2 days; always sitting down, holding a paper before his face;

" 21 does not speak to any one; very short in answer to any question put to him. April 21/94. Has not eaten anything, now, for 14 meals. April 23/94. Still continues to refuse to eat: has lost, in all, 24 meals.

" 24 April 24/94. Was to be fed, by the tube, today, but drank 2 cups of milk & promised to eat supper, but, when

" 25 supper-time came, he would not touch his food. April 25/94. Was fed, this forenoon, by the tube, and promised to eat dinner, but still refused dinner also his supper. Was going to be fed this evening, but

" 26/28 drank some milk. April 28/94. Still refuses to touch his food. April 28/94. Persists in refusing to eat, but

" 30 will drink milk, when the doctor comes to feed him, by the tube. April 30/94. Patient does not partake of any solid food, but, when Physician comes to feed him (by tube) will drink some milk. Still sits in the same place, all day, with a paper over his eyes. Habits are clean and neat. —

May 1/31 May 1/94. Wt 149 pds. (Has lost considerably in flesh, during this "spell"). Pulse 70. May 31/94. Still persists in refusing to eat, and has to be fed daily, by the tube. Sits in one place, most of the time. Speaks very seldom & not unless spoken to. Habits are clean. ——

June 2/30 June 1/94. Wt 136 pds (a further loss in weight). Pulse 84. June 30/94. No change. Still has to be fed.

(carried to page 84)

Personal and Medical History of Anthony Manley

ROBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3624.

Residence, 663, Orange St., St Paul

Date Admission, 13th January 1894.

Admitted by, Dr. Phelps Hour,

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

Sex, Male

Age, 34 years

Civil Condition, married

Children, 4

Age Youngest Child, —

Occupation, Motor-man

Degree Education, Fair; reads & writes ✕

Profession Religion, Roman Catholic

Habits, not intemperate

Nativity, Minnesota (father's Ireland; mother's, Wisconsin).

Physicians Committing, E. A. Whitcomb MD & A. B. Aucker

Correspondents, (wife) Mrs Anthony Manley, 663, Orange St.
(Northwestern) John Shaughnessy 557 Laurel Ave, St Paul

Family Physician Dr. L. L. Lohland, St Paul. Minn

No. for Year, 194.

Insane Relatives, Aunt Insane; grd father drunkard.

Cause Exciting, Possibly Constitutional predisposition

Cause Predisposing, Heredity.

Form,

Accompanying Bodily Disorder, indolent ulcer of leg (?)

Suicidal or Not, not.

Date of this Attack, about 4 weeks ago.

Duration, About 4 weeks.

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, 34 years.

Time of Leaving, Apr 6' 94-

Time in Hospital, 1y 2m 28d

Result, Impr.

EXAMINATION ON ADMISSION.

Exd by D. Eby, Feb 3/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Good

Recent Events, good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, fairly correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, Good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient was examined after the acute maniacal attack & subsequent depression had worn off. He became somewhat incoherent, at times, in his speech. —

EMOTIONAL STATE:

Normal, Calm, Yes

Indifferent,

Exalted,

Depressed,

DELUSIONS: none at present

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent (see note)

Voluble or Reticent, voluble.

Personal and Medical History of Anthony Manley

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8 in WEIGHT, 142 pds NUTRITION, Fair

WOUNDS OR ABNORMALITIES, See "S. R." on next page.

TONGUE, Tremors, Yes Coatings, slight; large flabby tooth marks Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Yes

SIGHT O. K.

Case No. 3624. Anthony Manley. Vol. 27.

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

t, slight swaying. —

REFLEXES, Patellar, Equal — rather active — No. Ankle clonus.

Other Reflexes,

ARTICULATION, Hesitating, no Slurred, no

FACIAL EXPRESSION, normal.

SENSIBILITY,

HEART, 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, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

Reads & Kept

HISTORICAL.

LENGTH OF INVASION, 4 weeks ONSET GRADUAL OR SUDDEN, Sudden

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

Mother or Mat. Relations, maternal aunt insane

Father or Pat. Relations, Paternal father Inebriate.

Brothers or Sisters,

ROBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3624.
Residence, 663, Orange St., St Paul
Date Admission, 13th January 1894.
Admitted by, Dr Phelps Hour,
How Sent, John B. Oliver, Jof P, Ramsey County.
Sex, Male
Age, 34 years
Civil Condition, married
Children, 4
Age Youngest Child, —
Occupation, Motor-man
Degree Education, Fair; reads & writes
Profession Religion, Roman Catholic
Habits, not intemperate
Nativity, Minnesota (father's Ireland; mother's, Wisconsin).
Physicians Committing, E. A. Whitcomb and A. B. Gucker
Correspondents, (wife) Mrs Anthony Manley, 663 Orange St
(Nathanias) John Shaughnessy 537 Laurel Ave, St Paul
Family Physician Dr. L. L. Holland, St Paul. Minn

No. for Year, 194.
Insane Relatives, Aunt insane; grd father drunkard.
Cause Exciting, Possibly Constitutional predisposition
Cause Predisposing, Heredity.
Form,
Accompanying Bodily Disorder, indolent ulcer of leg (?)
Suicidal or Not, not.

Time in Hospital, 1 m 2 d 28
Result, Imp.

EXAMINATION ON ADMISSION.

Exd by Dr Eby, Feb 1/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Quick
MEMORY:
Past Events, Good
Recent Events, Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, fairly correct
REASONING POWER:
Ordinary Subjects, Good
Own Mental State, Good
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Patient was examined after the acute maniacal attack & subsequent depression had worn off. He became somewhat incoherent, at times, in his speech. —

EMOTIONAL STATE:
Normal, Calm, Yes
Indifferent,
Exalted,
Depressed,
DELUSIONS: none at present
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent (see note)
Voluble or Reticent, voluble.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8 in WEIGHT, 142 lbs. NUTRITION, Fair
WOUNDS OR ABNORMALITIES, See "S. R." on next page.
TONGUE, Tremors, Yes Coatings, slight, large flabby tooth marks, Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, yes Accommodation, yes
SIGHT, Good
HEARING, slightly impaired.
COORDINATION, Arms, slight impairment —
Legs, " " Standing, Eyes shut, slight swaying. —
ATAXIA, Hands, No Tongue, marked
Facial Muscles, no General, no
REFLEXES, Patellar, Equal — yes — D. P. Scale.
Other Reflexes,
ARTICULATION, Hesitating, no Slurred, no
FACIAL EXPRESSION, normal.
SENSIBILITY,
HEART, 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, Poor, Irregular,
PULSE, RESP., TEMP.,
CRANIAL MEASUREMENTS,

Record to be kept

HISTORICAL.

LENGTH OF INVASION, 4 weeks ONSET GRADUAL OR SUDDEN, Sudden
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Maternal aunt insane
Father or Pat. Relations, Grand father Inebriate.
Brothers or Sisters,

Personal and Medical History of Anthony Manley

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1894

Was brought here by Deputy-Sheriff A.W. Chapel, with the following history. There is no history of consanguinity, but a family history of drunkenness and insanity; aunt insane and grand-father drunkard. This is 1st attack; has not previously been in hospital. First symptoms of this attack were manifestations about 4 weeks ago; became unusually irritable; language incoherent. The disease seems increasing, not variable; no rational intervals; is disposed to injure others; has shown violence toward wife & others. Is not suicidal. Derangement is now shown by the belief that he has enemies (imaginary). Believes his wife & near relatives are his enemies. Habits are destructive. Previous to accession of disease, patient was an unusually quiet and industrious man. Was not intemperate. Had Typhoid fever, followed by an indolent ulcer of leg. He has not been restrained or confined. Cause of the disease is, possibly, a constitutional predisposition. Has been addicted to the promiscuous use of patent medicines. (This seems to be the only mode of treatment)

On personal examination, Patient is very nervous; poorly nourished. Spent most of his time in incoherent, violent and obscene & blasphemous language. Complained of pain in his head. Was very restless, very violent, while in Jail and had to be chained to the floor.

Jan 13 Jan 13/94. On admission, is in fair condition. Was put on C4. (S.R. Complexion sandy; hair brown; eyes blue; condition of skin good; has a scar on left leg. Bodily condition dirty; is not very well developed; somewhat inclined to be ugly). Jan 14/94. Much disturbed & excited, sleeping but 3 hours, last night. Am. Pulse 84. R 22. Is badly behaved. Restless & excited. Talks rapidly & freely but in an incoherent manner. Appetite fair; has had no passage of the bowels since admission. No cough noticed. Has numerous

" 15 Complaints which attendant deems groundless & frivolous. Jan 15/94. Again excited & disturbed last night; slept only 4 hours. Am. Pulse 98. R 23. Is excited & violent today. Talks almost incessantly, without reason & disconnectedly. Subject to delusions &c. Imagines he knows everyone. Talks so much that he neglects his food. Appetite only fair. No cough noticed. Last night secured his bed and the floor of his room. Complained that night Watchman struck him in the eye; left eye is discolored.

" 16 (Watchman reports that he struck patients' eye accidentally). Jan 16/94. Slept but 3 hours, last night. Was restless & excited. Am. Pulse 92. R 19. Appetite fair; bowels regular. Is badly behaved this morning, striking attendants & patients repeatedly. Talks incoherently. Complains of attendants and others injuring him. Patient became violent and dangerous on ward this morning and was transferred to C3. Attendant here notes that patient came on Ward (C3) with his face bruised, & complaining of being in pain from being hurt in side & chest; he coughs & raises phlegm. Is very restless. (Complaints of his side being sore, and, at one time, accused attendants of C4 of hurting him. I can

" 17 find no signs of an injury on either side. D. Herzog). Jan 17/94. Was noisy, nearly all last night. Slept but 1½ hours. Destroyed his bedding. Am. Pulse 96. Appetite fair; bowels constipated; Cough, with pain. Is very restless. Talk is incoherent; "Cries for his family." Was more quiet in the afternoon.

" 18 Ate well. Jan 18/94. Was noisy for 5 hours, sleeping only 4 hours, last night. Am. Pulse 78. Appetite good. Bowels have moved freely. Is again restless & noisy today. Talk incoherently and also shows

" 19 delusions & delusions. Is now medicine. Jan 19/94. Again restless & noisy last night, sleeping but 4 hours. Bedding torn by him. Am. Pulse 78. Is today restless; also noisy. Appetite keeps good.

" 20 Jan 20/94. Slept somewhat better, (6 hours), last night. Am. Pulse 110. Appetite good. Is, today, more quiet,

" 21 and, seemingly, rather depressed. Talk still incoherent. Jan 21/94. Sleep was somewhat better (7 hours) last night. Am. Pulse 78. Appetite fair. Restless today; quite talkative but is, mostly, irrational.—

Personal and Medical History of Anthony Manley.

1894

Jan 22 Jan 22/94. Slept 8 hours, last night. Am. Pulse 90. Appetite poor. Bowels moved. Patient complains

" 23 of being sick; acts dull & listless. Given medicine (calomel). Jan 23/94. Am. Pulse 90. Appetite fair. Is quietly behaved; seems more active than yesterday. Does not complain any, today.

" 24 Jan 24/94. Am. Pulse 90. Appetite fair. Quietly behaved today; seems depressed. "Wants to go home"

" 25/26 Jan 25/94. Am. " 96. Quiet & well behaved. Appetite Good. Jan 26/94. Am. Pulse 90.

" 27 Appetite good. Is quiet. Does not talk much; seems depressed. Jan 27/94. Since last noted, patient has been quiet, at night, sleeping 8 hours each. Am. Pulse 78. Appetite good, but bowels are badly constipated; (no movement since 22nd inst); Is quietly behaved by day but

" 28 inclined to be quite Melancholy. Jan 28/94. Sleeps well. Appetite good. Bowels have moved freely.

" 31 Jan 31/94. Appetite good; bowels more regular, now. Is quietly behaved; inclined to be melancholy. Talks a little about going home. Physical condition slowly improving. Habits neat.

Feb 1/2nd Feb 1/94. Wt 140½ lbs. Pulse 80. Feb 4/94. Is very noisy this morning. Feb 22/94. Sleeps well, at night. Appetite good, bowels regular. Quietly behaved; moves about slowly or stands in one place, with head down, apparently brooding over something; melancholy. Talks but very little; sometimes will answer questions in a rational manner; again seems bewildered & incoherent. No special improvement noticed in patients' condition. Habits are neat.—

" 23 Feb 23/94. This patient had been committed here, under the "Law of 1893," recently declared unconstitutional. He was, today, Taken out and Returned under "new commitment papers," from Olmsted County. Feb 26/94.

" 26 Directed by his wife, today.—

" 28 Was restless out of bed for 6 hours, during the night. Feb 28/94. Continues about as described by note of 22nd inst (above); no improvement noticed. Still manifest delusions. Habits neat.

Mar 1/8 Mar 1/94. Wt 144 lbs. (has made a slight gain in flesh). Pulse 90. Mar 16/94. Is almost every night restless 5 hours or so, sleeping very poorly. Appetite also is poor. Is quietly behaved; stupid—not much interested in his surroundings—Talks only when spoken to: will answer, in a rational manner, at times & again seems much confused—Not much improvement yet noticed.—

" 31 March 31/94. During last 2 week, has continued restless, at night from 5 to 7 hours & has slept very poorly; & occasionally noisy, also. Appetite very good; bowels regular; is quietly behaved, by day; seems stupid & melancholy; seldom talk unless spoken to & then hesitates in replying; Habits fair; physical condition seems good. Not much improvement, otherwise, noticed.

April 1/2 April 1/94. Wt 154½ lbs. (a gain of 13½ lbs in past month). Pulse 90. April 2/94. Restless 5

" 5 hours during the night. April 6/94. Was very obstinate while out walking today; did not wish to

" 11 return to the ward; had to be brought back part of the way by 3 attendants. April 11/94. Has seemed

" 15 very dull and stupid the past 4 days. April 15/94. Seems to be resting somewhat better at night, of late. Appetite very good; bowels regular. Is stupid & dull; difficult to arouse him; not inclined to move about. Talks only when spoken to & in a hesitating way; is very incoherent. Habits fair. No noticeable improvement in his condition.——

" 25/30 April 25/94. Was vaccinated today. April 30/94 Has apparently been resting better at night, during the past 2 weeks. Appetite is fair; bowels regular. Is quietly behaved; seems stupid or melancholy; seldom speaks or even moves, unless requested to. Improves physically but not mentally. Habits clean.

May 1/3 May 1/94. Wt 152½ lbs. (is still gaining in flesh). Pulse 80. May 3/94. Appetite today; is very stupid.

(carried to page 88)

Personal and Medical History of Peter Duffy

BARRETT, FICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3627.
Residence, St. Paul, Minn.
Date Admission, 17th January 1894.
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, John B. Oliver Jof P. Ramsey County
Sex, Male
Age, 58 years 5m
Civil Condition, married
Children, 5
Age Youngest Child, ——
Occupation, Stone-Cutter
Degree Education, Common School
Profession Religion, not a church member
Habits, has "periodical sprees" -
Nativity, New York, (parents born in Ireland).
Physicians Committing, Geo. F. Hanley and F. A. Hunter.
Correspondents, (wife) Mrs. John Duffy, 166 S. Wabasha St. St. Paul
Ho family Physician.

No. for Year, 1971.
Insane Relatives, none
Cause Exciting, Grippe
Cause Predisposing, probably intemperance
Form,
Accompanying Bodily Disorder, great nervousness
Suicidal or Not, attempted suicide 25 years ago.
Date of this Attack, a week ago
Duration, a week —
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 58 years
Time of Leaving, Feb. 9th 94
Time in Hospital, 23 ds.
Result, Rec.

Crossed from ... 1st 1894, because not fully committed.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Herzog Jan 20/94.

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

MEMORY:
Past Events, } Good
Recent Events, }
Special Subjects, poor, regarding what happened during this attack

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

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

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

DELUSIONS: Denies delusions & all charges
Systematized or Not, made in history papers
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none
ILLUSIONS: none.

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

GENERAL DESCRIPTIVE REMARKS:

Admits he has been quite a hard drinker in his time. Denies having drunk any since last Summer, when he was drinking quite hard, for a while. Patient in giving his own history, states that he does not remember all that happened during his examination in St Paul. On relating to him the history, as given by the Physicians examination, he does not deny the truth of these statements, but insists that he does not remember them. On presenting to him a supposititious case (where a man makes the same statements that he has made) he states that he would believe the person the of unsound mind & further his decision by excellent reasoning; e.g.: Why should my wife desire to injure me, when she has always been a good wife to me? Why should my brother-in-law desire to injure me, after I had nursed him thro' a fit of sickness as if he were my own brother?

Personal and Medical History of Peter Duffy

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6¼ WEIGHT, 164 pds. NUTRITION, Good.
WOUNDS OR ABNORMALITIES, See S. R., next page. Scar over left eye.
TONGUE, Tremors, slight Coatings, yellowish, at base Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, normal Accommodation, normal
SIGHT, Normal; possibly slightly presbyopic
HEARING, Impaired.
COORDINATION, Arms, slightly impaired, by usual tests
Legs, not impaired " "
TREMORS, Hands, Marked Tongue, slight
Facial Muscles, none General, none
REFLEXES, Patellar, Equal; about q; Dr. P's scale.
Other Reflexes, very slight Ankle clonus.
ARTICULATION, Hesitating, No Slurred, Natural
FACIAL EXPRESSION, a little worried.
SENSIBILITY,
HEART, slightly irregular & palpitating; no murmurs.
LUNGS, Slight consolidation of right apex, but nothing positive.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 114, Regular	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See history ONSET GRADUAL OR SUDDEN, Sudden
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, } no history of any heredity thought of.
Father or Pat. Relations, }
Brothers or Sisters,

Personal and Medical History of John Duffy

1894

ERNST, FISCHER & CHAMBERS, DAVENPORT, IOWA.

Was received here at the hands of Deputy Sheriff G. Chapel, with the following history. As to Consanguinity unknown. Has no insane relatives. This is 1st attack: has not been in hospital before. First symptoms of this attack were manifested about a week ago. Thinks his wife wishes to poison him", which he discovered by mesmerizing her. The disease seems increasing; not variable; no rational intervals. Derangement now shown in the following way; having read a book on mesmerism, he mesmerized his wife, as he claims, and think a question, and she answers it, in her supposed hypnotized state. In this way he found out she wishes to get rid of him". Disposed to injure others; has threatened to kill his wife. He has attempted suicide, with an axe, 25 years ago. Propensity, however, not now active. Has no filthy or destructive habits. No peculiarities of disposition to previously shown. Patient goes on "periodical sprees". Bears the marks of a wound, from an axe, (25 years ago), self-inflicted, after a hard spree, with intention of committing suicide. He has not been restrained or confined. Supposed cause of disease is "Grippe". He has had no medical treatment. On personal examination, he thinks his wife, sister-in-law, and brother-in-law want to injure him. Did nothing in particular in presence of examiners. — Appearance & manner excitable & nervous.

Jan 17 On admission, is in fair physical condition. Was put on B.T. (S.R. Complexion fair; hair dark gray; Eyes gray; Condition of Skin good; marks on left cheek. Bodily condition clean. Behavior good; there seems nothing out-of-the-way, in his talk). Jan 6 18/94. Slept quite well (7 hours) last night; restless for only an hour or so. AM. Pulse 100. R 22. T. 99.4. Appetite fairly good; bowels been regular. Complains some of not feeling very well. No cough noticed. Is quietly behaved. Talks quite freely. No delusions yet noted.

" 19 PM. Pulse 102. T. 99.8. Jan 19/94. Was restless for a couple of hours but slept 6 hours, last night. AM. Pulse 100. R 22. T. 99.4. Appetite good. Is well behaved. Walks quietly about ward. Talks freely. No delusions stated.

" 20 PM. Pulse 98. T. 99.6. Jan 20/94. Slept quietly last night (7 hours). AM. Pulse 108. R 21. T. 99.4. Conduct

" 21 and behavior about as usual. PM. Pulse 104. T. 99.6. Jan 21/94. Was quite restless for 3 hours or so, last night, sleeping but 5 hours. AM. Pulse 100. Appetite is good. Says "he is feeling better now". Makes no

" 22/23 complaints. Jan 22/94. AM. Pulse 100. Jan 23/94. AM. Pulse 100. Continues about same from day to day.

" 24 Jan 24/94. AM. Pulse 96. Appetite good. Makes no complaints. Talks freely. Says "he is feeling much better".

" 25 Jan 25/94. Has been slightly restless for an hour or so, but has been sleeping about 7 hours, on each of past 3 nights. AM. Pulse 98. Continues quiet and well behaved by day. Is now on medicine. —

" 26 Jan 26/94. Was restless for about 3 hours, sleeping but 5 hours, last night. AM. Pulse 96. Talks freely;

" 27 Plays games &c. Went out walking today. Jan 27/94. Slept better (7 hours) last night. AM. Pulse 106.

" 28 Jan 28/94. Slept but 4 hours last night; was quite restless for 3 hours or so. AM. Pulse 112. Talks freely; makes no complaints. (Was examined in office on 20th inst. See Particulars of same).

" 29/30 Jan 29/94. Restless 2 hours, sleeping but 6 hours, last night. AM. Pulse 116. Jan 30/94. Passed a rather poor night, again, last night. AM. Pulse 118. At 2 PM, complained of not feeling well; had some chills. Went to bed. Pulse 116. Ate no supper. Jan 31/94. Was restless for 3 hours, sleeping only 5 hours, last night. AM. " 112. Remained in bed all day; but is feeling much better. Appetite fairly good. Is clean, tidy & of good personal habits.

Feb 1 Feb 1/94. Rested rather poorly, last night; slept but 6 hours. Sup now & out again in the hall.

" 6 Feb 6/94. Has apparently been resting & sleeping better the last few nights. Continues quiet and

" 7 well-behaved by day. Talks freely. No delusions yet noted. Feb 7/94. Was restless a good deal of

Personal and Medical History of John Duffy

1894

Feb 7 Cont'd last night (5 hours) and slept but 3 hours. AM. One of his eyes is red & somewhat inflamed. (Probably caught cold).

" 9 Feb 9/94. Patient has continued quiet and well-behaved. Has been neat tidy and of good personal habits. Made no complaints. Has been quite free & pleasant in conversation. No delusions have been noted. And though he did not care, he said, to be here, yet, now that he was here, seemed perfectly contented to remain until he was deemed well enough to return home.

Was today visited by his brother & a friend, who took him home on trial.

— Crossed off the Records —

From 78. Joseph Feiss

Vol 27
Folio 25 362

CASE RECORD.

Patient's Name Joseph Feiss Name Disease Name Physician W.W.W.

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 2	98.6	88	18		On liquid diet Refused dinner and supper	10 A.M. patient came on ward from D 9 appearing quite weak, put to bed.
	100	76	24			
May 3	103	114	28	Received enema of Castor oil ℥6 also applied turpentine stupe to abdomen	Took 1 biscuit for breakfast took no nourishment for dinner or supper	5 P.M. respiration very hard and rapid Bowels moved copiously
	104.6	108	30			
May 4	102.4	108	36		Took nourishment to day.	4 P.M. Bowels moved: also 12 30 P.M. Patient appears failing rapidly. respiration labored and rattling in throat 5 P.M. Died
	103.4	112	36			
	1 30 P.M. 105.9	126	60			
	4 30 P.M. 106.4			Gave strychnine ½ gr. hypodermically.		
				Skin in General Paresis		

1894

Was received here at the hands of Deputy Sheriff G. Chapel, with the following history. As to Consanguinity unknown. Has no insane relatives. This is 1st attack; has not been in hospital before. First symptoms of this attack were manifested about a week ago. Thinks his wife wishes to poison him, which he discovered by mesmerizing her. The disease seems increasing; not variable; no rational intervals. Derangement now shown in the following way; having read a book on mesmerism, he mesmerized his wife, as he claims, and think a question, and she answers it, in her supposed hypnotized state. In this way he found out she wishes to get rid of him. Disposed to injure others; has threatened to kill his wife. He has attempted suicide, with an axe, 25 years ago. Propensity, however, not now active. Has no filthy & destructive habits. No peculiarities of disposition as previously shown. Patient goes on "periodical sprees". Bears the marks of a wound, from an axe, (25 years ago), self-inflicted, after a hard spree, with intention of committing suicide. He has not been restrained or confined. Supposed cause of disease is "Grippe". He has had no medical treatment. On personal examination he thinks his wife, sister-in-law, and brother-in-law want to injure him. Did nothing in particular in presence of examiners. — Appearance & manner excitable & nervous.

Jan 17 On admission, is in fair physical condition. Was sent on B.V. (S.R. Complexion fair; hair dark gray; eyes gray; condition of skin good; marks on left cheek. Bodily condition clean. Behavior good; there " 18 seems nothing out-of-the-way, in his talk). Jan 18/94. Slept quite well (7 hours) last night; was restless for only an hour or so. AM. Pulse 100. R 22 Te 99.4. Appetite fairly good; bowels been regular. Complains some of not feeling very well. No cough noticed. Is quietly behaved. Talks quite freely. No delusions yet noted.
" 19 PM. Pulse 92 Te 99.8. Jan 19/94. Was restless for a couple of hours but slept 6 hours last night. AM. Pulse 100 R 22 Te 99.4. Appetite good. Is well behaved. Walks quietly about ward. Talks freely. No delusions detected.
" 20 PM. Pulse 98 Te 99.6. Jan 20/94. Slept quietly last night (7 hours). AM. Pulse 108 R 21 Te 99.4. Conduct
" 21 and behavior about as usual. PM. Pulse 104. Te 99.6. Jan 21/94. Was quite restless for 3 hours or so, last night, sleeping but 5 hours. AM. Pulse 100. Appetite is good. Says "he is feeling better now". Makes no
" 22/25 complaints. Jan 22/94. AM. Pulse 100. Jan 23/94. AM. Pulse 100. Continues about same, from day to day.
" 24 Jan 24/94. AM. Pulse 96. Appetite good. Makes no complaints. Talks freely. Says "he is feeling much better".
" 25 Jan 25/94. Has been slightly restless for an hour or so, but has been sleeping about 7 hours, in each of past 3 nights. AM. Pulse 98. Continues quiet and well behaved by day. Is now on no medicine. —
" 26 Jan 26/94. Was restless for about 3 hours, sleeping but 5 hours, last night. AM. Pulse 96. Talks freely;
" 27 Plays games &c. Went out walking today. Jan 27/94. Slept better (7 hours) last night. AM. Pulse 106.
" 28 Jan 28/94. Slept but 4 hours last night; was quite restless for 3 hours or so. AM. Pulse 112. Talks freely; makes no complaints. (Was examined in office at 2 o'clock P.M. See particulars of same).
" 29/30 Jan 29/94. Restless 2 hours, sleeping but 6 hours, last night. AM. Pulse 116. Jan 30/94. Passed a rather poor night, again, last night. AM. Pulse 118. At 2 PM, complained of not feeling well; had some chills. Went to bed. Pulse 116. Ate no supper. Jan 31/94. Was restless for 3 hours, sleeping
" 31 only 5 hours, last night. AM. " 112. Remained in bed all day; but is feeling much better. Appetite fairly good. Is clean, tidy & of good personal habits.
Feb 1 Feb 1/94. Rested rather poorly, last night; slept but 4 hours. Is up now & out again in the hall.
" 6 Feb 6/94. Has apparently been resting & sleeping better the last few nights. Continues quiet and
" 7 well-behaved by day. Talks freely. No delusions yet noted. Feb 7/94. Was restless a good deal of

1894

Feby 7 Cont'd last night (5 hours) and slept but 3 hours. AM. One of his eyes is red & somewhat inflamed. (Probably caught cold). Feb 8/94. Patient has continued quiet and well-behaved. Has been neat
" 9 tidy and of good personal habits. Made no complaints. Has been quite free & pleasant in conversation. No delusions have been noted. And though he did not care, he said, to be here, yet, now that he was here, seemed perfectly contented to remain until he was deemed well enough to return home.

Was today visited by his brother & a friend, who took him home on trial.

— Crossed off the Records —

From 78. Joseph Feiss

Vol 27 Folio 25 3621

CASE RECORD.

Patient's Name Joseph Feiss Name Disease Name Physician H.H.H.

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
May 2	98	88	18		On liquid diet	10 A.M. patient came
	100	96	24		Refused dinner and supper	on ward from B.V. appearing quite weak, put to bed.
May 3	103	114	28	Received enemas of Castor oil ℥6 also applied turpentine stupe to abdomen	Took 1 pint milk for breakfast took no nourishment for dinner or supper	3 P.M. respiration very hard and rapid Bowels moved copiously
	100.6	108	30			
May 4	102.4	108	36		Took no nourishment to day.	4 P.M. Bowels moved. also 12 30 A.M. Patient appears failing rapidly. respiration labored and rattling in throat 5 P.M. Died
	103.4	112	36			
1 30 P.M.	105.8	126	60			
4 30 P.M.	106.4			Gave strychnine ½ gr hypodermically.		

(Cont'd Chronic General Paresis

Recorded by J. R. Spillane Nurse.

1894

TIBBETT, FOLEY & CHAMBERS, DAVENPORT, IOWA.

Was received here at the A
- sanguinity unknow
First symptoms o
him, which he
Derangem
as he d
for

Received by C. C. Chadwick Nurse.

3

Jan'y
" 18 Jems
for only a
of not feeling
" 19 Pm. Pulse 102 &
R 22 T 101 99.4. Appe
" 20 Pm. Pulse 98 T 101 99.6
" 21 and behavior about as us
night, sleeping but 5 hours.
" 22/23 Complaints. Jan 22/94. Mk. Pu
" 24 Jan 24/94. Mk. Pulse 96. Appetite
" 25 Jan 25/94. Has been slightly restless
3 nights. Mk. Pulse 98. Continues quiet
" 26 Jan 26/94. Was restless for about 3 hours, sle
" 27 Plays games &c. Went out walking today.
" 28 Jan 28/94. Slept but 5 hours last night; was res
freely; makes no complaints. (Was examined in office on 26th Inst. See Particulars of same).
" 29/30 Jan 29/94. Restless 2 hours, sleeping but 6 hours, last night. Mk. Pulse 116. Jan 30/94. Passed a rather poor night, again, last night. Mk. Pulse 118. At 2 Pm, complained of not feeling well; had some chills. Went to bed. Pulse 116. Ate no supper. Jan 31/94. Was restless for 3 hours, sleeping only 5 hours, last night. Mk. " 112. Remained in bed all day; but is feeling much better. Appetite fairly good. Is clean, tidy & of good personal habits.
Feb 1 Feb 1/94. Rested rather poorly, last night; slept but 6 hours. Sent now out again in the hall.
" 6 Feb 6/94. Has apparently been resting & sleeping better the last few nights. Continues quiet and
" 7 well-behaved by day. Talks freely. No delusions yet noted. Feb 7/94. Was restless a good deal of

...elling) history. Acts on —
...ot been in hospital before.
...wife wishes to poison
...no rational intervals
...cried his wife,
... way" he
...lo has at-
...de-
..."-

1894
Feby cont'd
" 9 last night (5 hours) and slept but 3 hours. Mk. One of his eyes is red & somewhat inflamed. (Probably caught cold). Feb 9/94. Patient has continued quiet and well-behaved. Has been neat & tidy and of good personal habits. Made no complaints. Has been quite free & pleasant in conversation. No delusions have been noted. And though he did not care, he said, to be here, yet, now that he was here, seemed perfectly contented to remain until he was deemed well enough to return home.
Was today visited by his brother & a friend, who took him home on trial.

— Crossed off the Records —

From 78.

Joseph Feiss

Feb 28/95. Patient is stupid and demented in behavior; filthy in habits; untidy in dress; Walks with staggering, uncertain gait and stammers unintelligibly. Seems to be failing much
March 30/95. Condition of Patient remains about the same. Is still very dirty & filthy in habits.
Apl 10 Apl 10/95. Of late, patient is very demented; incessantly pulling at buttons on his clothing;
" 15 is almost helpless, in regard to dressing & undressing). Apl 15/95. Is growing more
" 23 helpless and demented, each day. Apl 23/95. Patient very demented; and, when compelled to go to meals, or to bed, he is stubborn & attempts to go in opposite direction. He cannot climb stairs, without assistance. Is growing very thin and weaker, day by day. —
" 24 Apl 24/95. Patient received a slight cut on nose by being struck with a broom in hands of one of the
" 30 others. Transferred to B3. Apl 30/95. Appetite poor; bowels apparently regular. Behavior quiet, but stubborn & will hang on to anything he gets hold of. Cannot move about very much as he is in a very feeble state &c. Habits are filthy. May 2/95. 10 Am. Was brought in Infirmary Ward,
May 2 from B3. Quite weak; was put to bed. Is on liquid diet; but refused dinner and supper.
" 3 May 3/95. Constipated: given enema of Castor oil; took 1 quart milk for breakfast but took no nourishment for dinner or supper. 3 Pm. Respiration very hard & rapid. Bowels moved copiously.
" 4 May 4/95. Has taken no nourishment, to-day. 1 30 Pm. Patient appears failing rapidly —
4 30 Pm. Respiration labored & "rattling" in throat. Is failing rapidly.
5 00 Pm. Died

— Died —

Omitted. May 1/95. Wt 134 lbs. May 2/95. Has not eaten for 2 days: fed with tube this morning.

Personal and Medical History of Bernhardt Evermann

LIBERTY, PUTNAM & CHAMBERS, DAVENPORT, IOWA

Whole No. 3628.
Residence, Town of Stillwater. Washington Co. Minn.
Date Admission, 17th January 1894 P.O. address. Stillwater Minn
Admitted by, Dr. Phelps Hour, 7 P.M.
How Sent, Rudolph Schmicker, Jof P. Washington Co.
Sex, Male
Age, 25.
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Laborer
Degree Education, Common School
Profession Religion, not a church member
Habits, Moderate user of intoxicants
Nativity, Peru South America. (Parents born in Germany)
Physicians Committing, B. J. Merrill & J. C. Clark
Correspondents, none given in papers
Family Physician B. J. Merrill Stillwater Minn

No. for Year, 198.
Insane Relatives, None
Cause Exciting, Influenza
Cause Predisposing, Previous attack.
Form,
Accompanying Bodily Disorder, Not mentioned.
Suicidal or Not, Not.
Date of this Attack, Janu 13th 1894
Duration, about 14 Days. —
No. of Attack, 2nd (one 4 years ago; kept at home)
No. of Admissions, 1st
Age First Attack, about 21 years
Time of Leaving, Mch 16' 95
Time in Hospital, 1 y 1 m 2 d.
Result, Rec.

EXAMINATION ON ADMISSION.

Exd by Dr. Ely - Feb 22/94.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, fair
Recent Events, Poor
Special Subjects,

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

REASONING POWER:
Ordinary Subjects, Poor
Own Mental State, None
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
The patient's conversation & behavior are peculiarly insolent.

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

DELUSIONS:
Systematized or Not, full of various unsystematized
Special Subjects, Delusions as of "Electricity playing
Transitory or Not, Jonhim" & being requested by Gov to the penitentiary &c" —

HALLUCINATIONS:

ILLUSIONS:

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

Personal and Medical History of Bernhardt Evermann

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, [illegible] WEIGHT, [illegible] NUTRITION, Quite good.
WOUNDS OR ABNORMALITIES, See "S. R." on next page.
TONGUE, Tremors, Fair Coatings, Slight Promptness Movement, Quite prompt
PUPILS, Equality, Equal Size, normal
Response Light, normal Accommodation, normal
SIGHT, Normal
HEARING, Slightly impaired
[illegible] tanong, eyes shut, good.

Bernhardt Evermann.
Vol. 27.
Case No. 3628.

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

FACIAL EXPRESSION, blank; depressed.
SENSIBILITY,
HEART, very rapid; no distinct murmur.
LUNGS, good. —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } no history obtainable.
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Bernhardt Evermann

HERBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3628.

Residence, Town of Stillwater Washington Co. Minn. P.O. address. Stillwater, Minn.

Date Admission, 17th January 1894

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

How Sent, Rudolph Schmicker, Jo. P. Washington Co.

Sex, Male

Age, 25.

Civil Condition, Single.

Children,

Age Youngest Child,

Occupation, Laborer

Degree Education, Common School

Profession Religion, not a church mem

Habits, Moderate user of intoxicants

Nativity, Peru, South America; Parents born

Physicians Committing, B. J. Merrill

Correspondents,

Family Physician B. J. Merrill Stillwater Minn

No. for Year, 198.

Insane Relatives, None

Cause Exciting, Influenza

Cause Predisposing, Previous attack.

Form,

Accompanying Bodily Disorder, None mentioned.

Suicidal or Not, Not.

Date of this Attack, Janu 13th 1894

Duration, about 14 Days. —

No. of Attack, 2nd (one 4 years ago. kept at home.)

EXAMINATION ON ADMISSION.

Seen by Dr. Ely - Feb 22/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, fair

Recent Events, poor

Special Subjects,

PERCEPTIVITY:

Alert or Dull, somewhat dulled

Correct or Illusive, Illusive

REASONING POWER:

Ordinary Subjects, poor

Own Mental State, none

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

The patient's conversation & behavior are peculiarly insolent.

EMOTIONAL STATE:

Normal, Calm,

Indifferent, yes

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, full of various unsystematized

Special Subjects, Delusions as of "Electricity playing

Transitory or Not, on him" "being requested by order of the penitentiary to"

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent

Voluble or Reticent, fairly voluble

Personal and Medical History of Bernhardt Evermann

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, has to be held & so can't be taken WEIGHT, unable to take these NUTRITION, Quite good.

WOUNDS OR ABNORMALITIES, See "S. R." on next page.

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

PUPILS, Equality, Equal Size, normal

Response Light, normal Accommodation, normal

SIGHT, Normal

HEARING, slightly impaired

COORDINATION, Arms, } Finger to nose, eyes shut, good; standing, eyes shut, good.

Legs, } unimpaired by usual tests.

TREMORS, Hands, slight Tongue, slight

Facial Muscles, no General, no

REFLEXES, Patellar, Equal — 10 — Dr. P's Scale

Other Reflexes, ankle clonus — well marked. —

ARTICULATION, Hesitating, no Slurred, no

FACIAL EXPRESSION, blank; depressed.

SENSIBILITY,

HEART, very rapid; no distinct murmur.

LUNGS, 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,") } no history obtainable.

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Bernhardt Evermann

1894

EARLEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Was brought here by Deputy Sheriff Geo. Green, attended by John Staggerty, with following history. As to consanguinity unknown; no nuisance relatives. This is, probably, the 2nd attack; had one 4 years ago, duration a week; was then treated at his home, with good result. First symptoms of this attack were manifested Jany 13th 1894, by acute mania. The disease appears to be increasing; is not variable; no rational intervals. Derangement now shown by delusions of acute mania. Patient is not disposed to injure others, nor suicidal, nor of filthy or destructive habits. No peculiarities of disposition were previously shown. Patient is a moderate user of intoxicants. He has had no severe disease or head injury, nor has he been restrained or confined. Supposed cause of the disease is influenza. Has not been under medical treatment. On personal examination, patient was naked; conversation incoherent, with maniacal delusions. Bruises on right knee & right arm due to injury by a falling log, 4 weeks ago. He said nothing rational. Appearance & manner, that of acute mania.

Jan 17 On Admission, the patient is in fair physical condition. Much excited. Has put on 6[4] (J.R.) Was in too wild excited a condition to take his height & weight. Complexion dark; hair black; eyes blue; Condition of skin bad; has pimples & eruptions all over his body. Bodily condition dirty. Was very much excited when put on the ward, also. Struck at attendant (Bert Block) when giving him a bath).

" 18 Jan 18/94. Was restless and slept but 6 hours last night. AM. Pulse 82. R 24. Appetite fair; has had no movement of bowels since admission. No cough noticed. Is very badly behaved. Restless & excited. Will not sit still, or remain quiet. Talks constantly and incoherently. Is too much excited to make any complaints. Jan 19/94. Was very excited, restless & disturbed last night; slept but 3 hours. Appetite poor. Bowels have moved freely. AM. Pulse 110. R 28. Is, again, very badly behaved

" 20 today. Restless & excited. Talks very incoherently. Jan 20/94. Restless, though sleeping 6 hours, last night. AM. Pulse 92. R 28. Appetite fair; bowels regular; no cough noticed. Is still very badly behaved, by day. Talks incessantly on all subjects, without any connection. Has not enough intelligence

" 21 to make complaints. Jan 21/94. Restless & excited. Sleeping only 5 hours last night. AM. Pulse 90.

" 22 R 24. Conduct & behavior, by day, about as above describes. Jan 22/94. Rested & slept somewhat better, 7 hours, last night. AM. Pulse 72. Appetite fair; bowels free: no cough observed. Patient is almost constantly in motion; jumping and hunting. Tears up his clothes. Talks quite incoherently.

" 23 He is not capable of making complaints. Jan 23/94. Slept quite well (8 hours) last night. Am. P 82.

" 24 R 24. Appetite fair; bowels free. Conduct & behavior do not change any. Jan 24/94. Slept well, 9 hours, last night; was quiet. AM. Pulse 80. R 24. Is not so restless today, though he is talking

" 25 incessantly & very incoherently. Jan 25/94. AM. Pulse 88. R 24. Behavior is improving. Is not

" 26 so restless now. Jan 26/94. AM. Pulse 82. R 22. Still somewhat restless. Talks incoherently.

" 27 Jan 27/94. AM. Pulse 90. R 24. Is quieting down & is not so excited now. but still talks in a random,

" 28 wandering manner. Jan 28/94. AM. Pulse 92. Behavior continues to improve, but he still talks in

" 29 a rapid, excited & rambling manner. Jan 29/94. AM. Pulse 78. Behavior is not so good as

" 30 yesterday; is more restless. Talks very incoherently. Jan 30/94. AM. Pulse 72. Patient seems to be again quieting down & appears to be considerably improved. Does not, today, talk so much but still wanders in his speech. Jan 31/94. AM. Pulse 72. Behavior of patient is still improving. He talks a good deal, but not so much as at first. Complains that he does not get enough of food. Appetite good; bowels regular.

Personal and Medical History of Bernhardt Evermann

1894

Feby 1 Feb 1/94. During past week, patient has been quiet & restful at night, sleeping uniformly 8 to 9 hours on each (except on night of Jany 28th when he was quite restless & slept but 4 hours). Pulse, shortly after admission, upward of 100 has now become 72. Appetite, at first fair to medium, has during past week become very good & he complains now that he cannot get enough to eat. The patient (Attendant notes) has greatly improved both physically & mentally since admission to the ward. When received he was suffering from acute mania, and now, he has become so quiet as to require no more attention than an ordinary patient. Bowels are regular.

" 17 Wt, today, 159 pds. Pulse 96. Feb 17/94. Appetite good; bowels regular. Patient seems to be getting worse the last couple of days. Struck attendant (N. C. Nelson) this morning & was very wild for a while, but was soon got under control. Is very dirty, at times; soils his clothes and requires baths quite often.

" 21 Keeps a little on the ward. Feb 21/94. Had a "spell of crying" this Pm. When asked "why he was crying" replied "because he was in prison". About 4 Pm. feeling unwell, he went to bed.

" 26 Appetite good; bowels regular. Behavior is very restless. Feb 26/94. Vaccinated by Dr. Herzog.

" 28 Feb 28/94. Is still very restless and nervous, but seems somewhat better than he has been. Does not talk much, but will answer questions. Occasionally works a little on the ward. Complains some of headache.

Mar 1 March 1/94. Wt 172 pds (a gain of 13 pds in past month). Pulse 100. Patient seems, however,

" 3 to be growing weaker. Has to be fed by the spoon, at every meal. Mar 3/94. Tried to choke a

" 9 fellow patient (Charles Ehnberg) during the night. Mar 9/94. Is worse in his behavior; noisy

" 13 day and night; dirty in habits; destructive to clothing. Mar 13/94. Has been so dirty & des-

" 17 tructive of late, that he was, today, put in a straight suit (this morning). Mar 17/94. Patient was allowed to put on his clothes, this morning, but he tore them up in afternoon; straight suit again put on.

" 18 Mar 18/94. Continues very dirty and troublesome. Has to be given frequent baths. Also destructive.

" 21 Mar 21/94. This patient was committed here, under the "Law of '93" recently declared unconstitutional. He was, today, Taken Out and Returned under "new warrant" from Chas Ed & Co.

" 31 Mar 31/94. Appetite good; bowels regular. Is quite hard to get along with; very restless in ward & somewhat noisy, during the day; talks quite rationally, at times, but, most of the time, is in his "spell". Is also very destructive to clothes & bedding. Habits are dirty. —"—

Apl 7/15 Apl 7/94. Wt 168 pds. Pulse 108. Apl 15/94. Patient is quite noisy, all the time. He has a habit

" 30 of destroying every thing he lays his hands on. Appetite keeps good. Habits very dirty; Apl 30/94. Behavior does not improve any; he is quite violent at times; is kept on 6[3] ward, in daytime. Continues very destructive; wears mitts at night. Habits continue very dirty. —

May 1/30 May 1/94. Wt 163 pds. Pulse 96. May 31/94. Does not change much, if any. Is noisy & quarrelsome and, at times, violent. Has to be kept on 6[3] in daytime. Is noisy & restless, at night. Dirty in his habits. Has required quite frequent restraint & was in restraint 30 hours, during May. —

June 1/30 June 1/94. Wt 169 pds. Pulse 92. June 30/94. No change from last month's report. Restless, noisy & violent a good deal of the time. Destructive. Has required 125 hours restraint during this month.

July 1/14 July 1/94. Wt 170 pds. Pulse 88. July 14/94. Still has to be kept on 6[3] in daytime, on account of behavior. Is much quieter & less destructive, than last reported as he is not now kept in restraint. Habits fair.

" 16/24 July 16/94. Transferred to 6[3]. July 22/94. Had an ugly spell today & struck Att'd Olson in the face. —

" 31 July 31/94. Appetite very good; bowels regular. Physical condition apparently good;

(Carried to page 180)

Personal and Medical History of Rudolph C. Kritzins

HERBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3629.
Residence, Aitken, Minnesota
Date Admission, 18th January 1894.
Admitted by, Dr. Phelps Hour, 7 PM.
How Sent, John A. Steele Jof C, Hennepin County
Sex, Male.
Age, about 30 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Tailor
Degree Education, none.
Profession Religion, not a church member
Habits, probably not good
Nativity, Austria, (Parents also born there).
Physicians Committing, Chas. E. Rogers & E. J. Hart
Correspondents, none given in papers

No. for Year, 199.
Insane Relatives, mother; father drunkard
Cause Exciting, not known except hereditary
Cause Predisposing, Heredity
Form,
Accompanying Bodily Disorder, none known
Suicidal or Not, said he has tried to kill himself with chloroform
Date of this Attack, probably recent
Duration, probably short.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 30 (?)
Time of Leaving, Apr. 10' 95-
Time in Hospital, 1 yr 2 mo 22 da
Result, Rec.

EXAMINATION ON ADMISSION.

Exd by Dr. Ely, April 10/94. MENTAL CHARACTERISTICS.

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

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

GENERAL DESCRIPTIVE REMARKS:

Patient, at time of examination, was in a more quiet condition than when he came. On admission, he was a quite typical case of acute mania; he was very active but now he is quieter; still, we cannot get much out of him. He would do as he was told, but is very incoherent in his talk. He seems to have been rather feeble-minded to converse with.

Personal and Medical History of Rudolph C. Kritzins

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 119 lbs. NUTRITION, Quite fair now.
WOUNDS OR ABNORMALITIES, See 'S. R.' on next page. —
TONGUE, Tremors, no tremors Coatings, slight Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, — Accommodation, Responds.

Case No. 3629. R.C. Kritzins. Vol. 27.

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

Facial Muscles, ✓ General, none
REFLEXES, Patellar, Equal; about 6. —
Other Reflexes,
ARTICULATION, Hesitating, ✓ Slurred,
FACIAL EXPRESSION, Idiotic
SENSIBILITY,
HEART, Good
LUNGS, 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,

EGBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3829.
Residence, Aitken, Minnesota
Date Admission, 18th January 1894.
Admitted by, Dr. Phelps Hour, 7 PM.
How Sent, John A. Steele Jof P, Hennepin County
Sex, Male.
Age, about 30 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Tailor
Degree Education, none.
Profession Religion, not a church member
Habits, probably not good.
Nativity, Austria; (Parents also born there).
Physicians Committing, Chas. C. Rogers & E. J. Hart
Correspondents, None given in papers

No. for Year, 199.
Insane Relatives, mother; father drunkard
Cause Exciting, not known except heredity.
Cause Predisposing, Heredity
Form,
Concurring Bodily Disorder, none known.

Age First Attack, about 30 y.
Time of Leaving, Apr. 10' 95
Time in Hospital, 1 yr. 2 m. 2 d.
Result, Rec.

EXAMINATION ON ADMISSION.

Exd by Dr. Eby, April 10/94. MENTAL CHARACTERISTICS.

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

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

GENERAL DESCRIPTIVE REMARKS:
Patient, at time of examination, was in a more quiet condition than when he came. On admission, he was a quite typical case of acute mania; he was very active: but now he is quieter; still, we cannot get much out of him. He would do as he was told, but is very incoherent in his talk. He seems to have been rather feeble-minded to converse with.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 119 lbs. NUTRITION, Quite fair now.
WOUNDS OR ABNORMALITIES, See "S. R." on next page. —
TONGUE, Tremors, no tremors Coatings, slight Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, respond Accommodation, Respond.
SIGHT, Good
HEARING, Good.
COORDINATION, Arms, Fair; fingers to nose, Eyes shut, Good,
Legs, Staggering, Eyes shut, Considerable swaying.
TREMORS, Hands, Tongue, no tremors.
Facial Muscles, General, None
REFLEXES, Patellar, Equal; about 6. —
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION, Idiotic
SENSIBILITY,
HEART, Good
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,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Rudolph C. Kritzius

1894

Was brought here by Deputy Sheriff A. Peterson, attended by P. E. Laughlin, with the following history. As to consanguinity, not known; patient says "his mother was crazy & his father was a drunkard"; this is 1st attack; probably recent, as form is acute, at present time. He appears rational at intervals; then becomes violent. He now says "his body is dead, only his spirit remaining on earth". Is disposed to injure others. Says that he has tried to kill himself with chloroform. No propensity is not active now. Is of filthy & destructive habits. As to any severe disease or injury he has had, not known. Patient has not been restrained or confined nor under medical treatment. Causes of the disease not known except heredity. On personal examination, his talk is rambling and incoherent. Runs off on various subjects. Sees all kinds of imaginary forms about him. His appearance and manner were those of an insane person.

Jan 18 — On admission, was brought here in wristlets. Was put on B³. (S.R. Complexion light; hair dark brown; eyebrows; condition of skin good. Bodily condition dirty). While in office, patient was quiet and fairly well-behaved; but, after being on the ward a short time, he became noisy, excited & violent. —

" 19 — Was given hypodermic at 10.15 P.M. Jan 19/94. Was given hypodermic & slept 7 hours, last night. A.M. Is very noisy & excited; too much so to permit taking of Pulse & Temperature. Continued noisy

" 20 — and restless during the day; and was taken to C³. Jan 20/94. Was restless for 6 hours, sleeping last

" 21 — 3 hours, last night. A.M. Pulse 80. Appetite fair. Jan 21/94. Given hypodermic last evening and

" 22 — then slept 8 hours. A.M. Pulse 78. Jan 22/94. Again given a hypodermic & slept 7 hours, last night.

" 23 — Appetite fairly good. Is on extra diet. Is noisily behaved & restless by day. Jan 23/94. A.M. Pulse 66.

" 24 — Appetite good. Jan 24/94. Appetite continues good; bowels regular. Habits are filthy. ——

" 25/26 — Jan 25/94. A.M. Pulse 72. Appetite fairly good. Bowels seem normal. Jan 26/94. Has been given a hypodermic nightly and has slept 7 to 8 hours, on each of past 3 nights. Appetite fairly good.

" 27 — Jan 27/94. Was noisy for 4 hours, sleeping but 5 hours, last night. A.M. Pulse 68. Bowels regular.

" 28 — Jan 28/94. Slept 6 hours; was quite noisy for 3 hours, last night. A.M. " 90. Appetite fairly good. Does not seem to have any control over his urinary organs; attendant has to change his (patient's) clothing quite often. Jan 29/94. Slept but 4 hours, was noisy for 5 hours, last night.

" 29 — A.M. Pulse 80. Appetite good; bowels regular. He was placed in restraint this morning, as he was

" 30 — scratching his face all up. Jan 30/94. Again passed a poor night, sleeping only 4 hours; was noisy

" 31 — for 5 hours, keeping the other patients awake. A.M. Pulse 80. Jan 31/94. Was more restful & slept 7 hours, last night. A.M. Pulse 78. Appetite good. Bowels regular.

Feb 1 — Feb 1/94. Was given sleeping dose & slept 7 hours, last night. A.M. Pulse 76. Appetite fairly good. Is still noisy & restless. Remains steadily in restraint. Habits are filthy. He does not seem

" 2 — to have any control over his urine, wetting his clothing quite frequently. Feb 2/94. Slept 7 hours,

" 19 — last night. Weight 114 lbs. (in underclothes.) Feb 19/94. On 5 of the past 13 nights, has been noisy

" 22 — for 5 hours, in each, and has slept but 4 hours, nightly. Feb 22/94. Appetite fairly good. Bowels are irregular. Behavior is very noisy, both day & night. Habits filthy; wets his clothing quite frequently

" 23 — every day. Talks in-coherently. Feb 23/94. Has been in restraint 147 hours. (from 1st of July to Feb 7th).

" 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.

" 28 — Feb 28/94. No material change to note, at this date. —

Personal and Medical History of Rudolph C. Kritzius

1894

March 1/31 — March 1/94. Wt 112 lbs. Pulse 88. March 31/94. Appetite good; bowels irregular; behavior noisy and restless. Talks incoherently & has hallucinations. Habits are filthy. Patient has to be kept in C³. Was 21 days dirty, during this month, but has not been in restraint. —

April 1/30 — April 2/94. Wt 118½ lbs (a gain of 6½ lbs. in past month). Pulse 82. April 25/94 Restless 5 hours, and slept but 4 hours, last night. April 30/94. Appetite good; bowels, apparently regular. Is restless & noisy most of the time. Talks incoherently. Habits clean, of late, though he is untidy about his clothing. —

May 1/31 — May 1/94. Wt 125½ lbs (Continues to gain in flesh). Pulse 72. May 31/94. Apparently rests & sleeps well, at night. Appetite good; bowels regular. Behavior rather restless & wild, at times, but, in this respect, he has improved considerably, of late. Habits clean. Physical condition good. Insolent & does no work. ——

June 2/30 — June 2/94. Wt 129 lbs (a further gain in flesh). Pulse 76. June 30/94. Patient continues to improve. He is well-behaved. Talks quite rationally. Habits are clean and neat. Transferred to B¹ today.

July 1/16/31 — July 1/94. Wt 135 lbs. Pulse 68. July 15/94. Continues quiet & well behaved & is still improving. — July 16/94. Was today, transferred to H. East. July 31/94. Uniformly quiet & well-behaved. He sleeps a good deal, during the day. Has had no "spells". Is somewhat inclined to be alone. Talks freely; no delusions now noted. Takes part in games but is not inclined to work any. Habits are cleanly.

Aug 1/31 — Aug 2/94. Wt 143 lbs (a gain of 8 lbs in past month). Pulse 84. Aug 31/94. Patient continues to improve.

Sept 1/30 — Sept 1/94. Wt 147 " (another slight gain in flesh). Pulse 66. Sept 30/94. Appetite good; bowels regular. Behavior is somewhat wild, at times, but he can be checked & reminded what is said to him. Talks freely & sensibly. Works in dining-room, also some in the kitchen. Seems happy & contented here & says "he does not care to go home until Spring". Attends entertainments. Habits are clean & neat.

Oct 1/31 — Oct 2/94. Wt 149½ lbs. Pulse 82. Oct 31/94. Continues quiet & well behaved & improvement keeps up.

Nov 1/30 — Nov 1/94. Wt 149½ " " 74. Nov 30/94. Has been working with the Tailor, since 25th inst: very willing & obliging; acts somewhat silly & childish. Physical health is very good. —

Dec 3/31 — Dec 3/94. Wt 145 lbs. Pulse 80. Dec 5/94. Keeps about the same. Transferred to A¹⁴ (new ward) today.

" 28 — Dec 28/94. Has continued to improve. Works steadily in Tailor Shop. Health good. Transferred to C² today.

Jan 4/31 — Jan 4/95. Wt 148 lbs. Pulse 75. Jan 31/95. Much improved. Has a "limited parole". Works daily & faithfully in the Tailor Shop. Seems a little boyish at times. Is in very good health.

Feb 1 — Feb 1/95. Wt 135 lbs. (Has lost some in flesh, without known cause). Pulse 77. —

" 28 — Feb 28/95. No change noticeable. Works in Tailor Shop, daily. Is civil & obliging

March 1/31 — March 1/95. Wt 135 lbs. Pulse 88. March 31/95. Quiet & well-behaved, appetite good. Has been given a "limited parole" for some time. Makes no complaints. Works in Tailor Shop. Is on hall only, at meals & at bed time. Is trying to secure work in some outside town.

April 4/9 — April 4/95. Wt 135 lbs. Pulse 80. April 9/95. Uniformly quiet, well-behaved; pleasant, civil & obliging in manner. Talks freely & sensibly; shows no delusions &c. Works steadily & willingly in Tailor-Shop, also does other odd work in this line. —

Patient had been in correspondence with his mother & also with a tailor at New Prague, in this State, in regard to procuring a position in said Tailor's Shop. Succeeding in securing such, he was, today, allowed & leave for that place

" 10 — Discharged —

Personal and Medical History of Michael Sullivan #2

Whole No. 3631.

Residence, Minnesota - State - Prison, Stillwater.

Date Admission, 19th January 1894

Admitted by, Dr. Phelps — Hour, 2 P.M.

How Sent, Rudolph Lehmicke. Jg. P. Washington Co.

Sex, Male.

Age, 37

Civil Condition, married

Children, none

Age Youngest Child, —

Occupation, Common Laborer.

Degree Education, very limited; can just read & write.

Profession Religion, not a church-member

Habits, not intemperate.

Nativity, Tuamawada, Ky; (Parents born in Ireland).

Physicians Committing, B. J. Merrill and H. C. Rhodes

Correspondents, C. M. Johnson Detroit Minn. Atty - at - Law

Treated by Prison Physician -

No. for Year, 201.

Insane Relatives, not known

Cause Exciting, unknown.

Cause Predisposing, unknown.

Form,

Accompanying Bodily Disorder, None known

Suicidal or Not, not.

Date of this Attack, about 2 years ago

Duration, about 2 years.

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 35.

Time of Leaving, Febry 9 94

Time in Hospital, 20 days

Result, Impr.

Crossed off from Absconders Sept 1st, 1894 because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog, Jany 23/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, fairly clear

Quick or Sluggish, fairly quick

MEMORY:

Past Events, } fair, Considering the Circumstances

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, faulty

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, somewhat.

DELUSIONS:

Systematized or Not, See note

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Answers questions fairly freely & even volunteers some information -

GENERAL DESCRIPTIVE REMARKS:

Patient has, according to his own admission, been in jails & workhouses quite frequently since between ages of 25 & 30. Claims that about 1 yr & 11 mos ago he was troubled with electric currents running through him, affecting his brain; also says that he is being drugged here. "Effect of drug is to cut a man to pieces". He does not know how the drug is given to him. The electricity he says, has been working on him also ever since he left the State Prison & is still working on him. Admits having drunk, at times, to excess. Denies having had any venereal disease - Says he has had Typhoid fever. The patient's manner & appearance show the effect of the years discipline.

Henry Hoffer, Warden.
F. H. Lemon, Deputy.
E. A. O'Brien, Clerk.
H. E. Benner, Steward.

WARDEN'S OFFICE
MINNESOTA STATE PRISON,
Stillwater, Minn., January 19th, 1894.

Hon. A. F. Kilbourne,
Medical Superintendent,
Insane Hospital,
Rochester, Minn.

My Dear Sir:-

We send you three insane patients, who have been regularly examined and committed to your institution. I am well aware that insane criminals are a class of patients very undesirable in your institution, and that the State ought to provide some safe place where they can be properly and safely treated apart from the ordinary insane patients; but until the State provides such a place, will have to look to you for help.

The men sent to you to-day, are all more or less dangerous. Mr. Lemon, my Deputy, will fully explain their several charactistics, among which are the following:

James Marsch, whose time expires the 24th of this month, has spells of dementia, and I do not believe that he is fully conscious of his acts; he has made several assaults upon officers of this institution, and I do not consider him a safe man to turn at large until he has recovered, or until such time as an expert like yourself may decide that it would be reasonably safe to trust him at large. This is his second term here; he had been discharged from his first term only a few days when he assaulted Thad Jones, of St. Paul, in a most murderous way, with a knife.

Charles Baker, has something less than a year yet to serve; is of a melancholy disposition; has attempted to commit suicide two different

LENGTH OF INVASION, About 2½ years 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 attained —

HUBBELL, FOLSOM & CHAMBERS, DAVENPORT, IOWA

Whole N

Resi

C

Treatedly

Exd by Dr Herzog

N.

MENTAL ACTIVITY.

Clear or Confused,

Quick or Sluggish, fairly

MEMORY:

Past Events, } fair, Considin,

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, faulty

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

FATE:

alm,

erent,

xalted,

Depressed, somewhat.

DELUSIONS:

Systematized or Not, See note

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Answers questions fairly freely

seem volunteers some information —

Patient has, according to his own admission, been in jails & workhouses quite frequently since between ages of 25 & 30. Claims that about 1 yr & 11 mos ago he was troubled with electric currents running through him, affecting his brain; also says that he is being drugged here. "Effect of drug is to cut a man to pieces". He does not know how this drug is given to him. The electricity he says, has been working on him also ever since he left the State Prison & still working when. Admits having drunk, at times, to excess. Denies having had any venereal disease - Says he has had Typhoid fever. The patient's manners & appearance show the effect of the fun in discipline.

Henry Wolfer, Warden.
F. H. Lemon, Deputy.
E. A. O'Brien, Clerk.
H. E. Bremer, Steward.

WARDEN'S OFFICE
MINNESOTA STATE PRISON,
Stillwater, Minn.

-2-

times, in a way, and under conditions, that plainly indicate that he was of unbalanced mind; both times he was very near death's door, and was saved only by the very best medical treatment. I think he may recover under your able treatment; and if he does, as soon as you think him safe enough to go to his people who live in Chicago, if you will notify me of the fact I will make application to the Governor for his pardon. I fed confident the Governor will willingly grant it.

The case of Michael Sullivan is something of a mystery to me; he has been, as you will find him now, for over a year and a half. For a long time we thought he was feigning, but after a thorough examination our regular physician, and others who participated in the examination, pronounced him of unsound mind. He has some time yet to serve, as you will notice by commitment papers; and I think both he and Marsch will require very close watching; I think that either one or both of them will readily take advantage and escape, if placed in a position to do so.

A certified bill for the expense of returning convict Brennan, from New Orleans, to this place, will be forwarded you under separate cover, in a few days. Trusting that you and yours are well, and that you will bear resignedly the hardship inflicted upon you by sending you these patients, I am,

Very Truly Yours,

Henry Wolfer
Warden.

LENGTH OF INVASION, about 2½ years 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 attained —

Cor

Treatedly

Exd by Dr Herzog

ISSION.

MENTAL ACTIVITY:

Clear or Confused,

Quick or Sluggish, fairly

MEMORY:

Past Events, } fair, Correct ...umstances

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, faulty

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient has, according to his own admission, been fairly steady workhouses quite frequently been between ages of 25 & 30. Claims that about 1 yr & 11 mos ago he was troubled with electric currents running through him, affecting his brain; also says that he is being drugged here. "Effect of drug is to cut a man to pieces". He does not know how this drug is given to him. The electricity he says, has been working on him also ever since he left the State prison he still working on him. Admits having drunk, attimes, to excess. Denies having had any venereal diseases. Says he has had Typhoid fever. The patient's manner & appearance show the effect of the past in discipline.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, somewhat.

DELUSIONS:

Systematized or Not, See note

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Answers questions fairly freely & even volunteers some information —

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11¼ WEIGHT, 153 lbs. NUTRITION, poor, anaemic - fingers cold. circulation poor —

WOUNDS OR ABNORMALITIES, See S.R. last page Scar on left side of tongue; scar on left temple & on left side of nose in 1887. Inoculated from blow for 10 minutes ago.

TONGUE, Tremors, quite marked Coatings, some Promptness Movement, somewhat slow

PUPILS, Equality, Equal — Shifting Size, normal

Response Light, normal Accommodation, normal -

SIGHT, Good

HEARING, Seems normal

COORDINATION, Arms, does not seem to be impaired - finger nose, eyes shut, quite accurate.

Legs, very slightly impaired - Standing a foot, fairly good - Standing, eyes shut, sways slightly

TREMORS, Hands, none Tongue, quite marked

Facial Muscles, slight of eyelids General, none

REFLEXES, Patellar, equal — q - Dr P's scale

Other Reflexes, slight ankle clonus -

ARTICULATION, Hesitating, somewhat - Slurred,

FACIAL EXPRESSION, stolid

SENSIBILITY, —

HEART, slight roughness of 1st sound at apex

LUNGS, Slight evidence of consolidation at right apex.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 80.	RESP.,	TEMP.,

Record kept

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, about 2½ years 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 insanity attained —

Personal and Medical History of Michael Sullivan #2

1894

ROBERT, FIELER & CHAMBERS, DAVENPORT, IOWA.

This man, a Convict in the Minnesota State-Prison at Stillwater, was brought here by the Deputy-Warden, H. H. Lennon, attended by B. Cayon, with the following history of his case. A certified Copy of the original "Committment Papers" also accompanied patient. As to Consanguinity or heredity, nothing known. This is 1st attack. He has been in the Minnesota State Prison Hospital; no results from treatment. First symptoms of this attack were manifested about 2 years ago. Had delusions that he was being drugged in his food, and that there was a current of air pouring into his brain at night; and other vagaries. The disease seems stationary and continuous. Derangement now shown by delusions as above mentioned. Patient has shown no disposition to injure others. Is not suicidal: propensity not active. Is not filthy or destructive. — Previous to accession of the disease, was moody & melancholy. There is no history of intemperance & to any severe disease &c or injury to head, not known. Has been 3½ years in above Prison. Cause of the disease is unknown. Has received general & symptomatic treatment, without good effect; no improvement. On personal examination, nothing brought out, except as outlined above. He also expressed delusions, as above. Was quiet. Appearance & manner, moody & melancholy.

Jan 19 On admisson, is in fair physical Condition. Was put on C^3 (S.R. Complexion dark, hair dark gray; eyebrows; condition of skin clean; End of first finger of left hand off; has eruptions on back & legs. Bodily Condition Clean - Behavior good. (See letter of Warden, State-Prison, attached to page 50) — Pulse 99. R 20. Appetite good. Bowels regular. Behavior, onward, very good. Talks very little. Shows
" 20 delusions in regard to electricity. No cough noticed. Jan 20/94. Was quiet & slept 6 hours, last night. AM. Pulse 106. R 17. Appetite very good. Bowels regular. Is quietly behaved. Complains
" 21 of drugs in the food & electric batteries playing on him". Jan 21/94. Slept well (8 hours) last night.
" 22 AM. Pulse 90. R 18. Continues quiet & well-behaved. Jan 22/94. AM. Pulse 92. Still shows his
" 23 delusions. Today Complains "of electric batteries playing on his nose". Jan 23/94. AM. Pulse 92. Though he is reported by night-nurse as always sleeping well at night, yet he complains of
" 24 not being able to sleep by reason of poison in the food & electricity. Jan 24/94. AM. Pulse 88. —
" 25 Today Complains of being doped, drugged, & of electricity. Jan 25/94. AM. Pulse 90. Appetite good; bowels regular. Continues quiet and well-behaved. Refuses medicine now, claiming "he is
" 26 drugged enough". Jan 26/94. Complains, pertly, today, of a current of electricity blowing up his
" 27 nose; of drugs in the food &c. Jan 27/94. "Hears the voice of one of the State-Prison officials,
" 28 who is the man that works the electric current, that troubles him so much." Jan 28/94. Still
" 31 annoyed by drugs & electricity". Jan 31/94. Still manifests these delusions daily.

Feb 1 Feb 1/94. Since last noted, patient has continued to rest & sleep well (8 hours) each night. Pulse, the past week, has been normal. Appetite good. Bowels regular. He has been uniformly quiet and well-behaved. Clean, tidy & of good personal habits. Still manifests delusions as mentioned above.
" 4 Wt. today, 161 pds. (Has gained 8 pds. in past 2 weeks). Feb 4/94. Again complains of
" 5 a stream of electricity blowing up his nose. Feb 5/94. Complains, today, of drugs in the food.
" 9 Feb 9/94. Sleeps well, at night; appetite fair; bowels regular. Will answer questions promptly, except when they turn upon his ideas of electricity, poison &c; still holds to these delusions & makes quite frequent complaints in this connection. No improvement noticed in his mental condition. Habits are neat & patient is in good physical condition. Was taken back to State-Prison this day

— Crossed off the Records —

Personal and Medical History of Wm. Olzikoski alias Wm. Olschenefski

Room 24 —

July 1/31 July 1/94. Wt 151½ pds; (a gain of 9½ pds in last month); Pulse 85. July 31/94. Patient has been quietly behaved, during the month. Very reticent; talks none, though he appears to understand questions &c. Habits fairly clean. Is liable to vomit - eat & has still to be fed in the hall - No noticeable improvement in the case. —

Aug 1/31 Aug 1/94. Wt 148 pds. Pulse 68. Aug 31/94. No special change. Sleeps well. Is quiet during day. Still has to be fed in hall. Will chew on towels, rugs, mat &c. Physical condition good, but mental condition does not improve. Talks not, except to himself. Habits are fair. Sept 1/94. Wt 148 pds. Pulse 76. Sept 30/95. No change.

Sept 1/30 Oct 1/31 Oct 1/94. Wt 148 pds. Pulse 60. Oct 31/94. No change to note, except that he does not now eat rags, dirt &c. Habits fair.

Nov 1/30 Nov 1/94. Wt 154½ pds. Pulse 76. Nov 30/94. Is quiet. Works a little, in the ward, each day. —

Dec 1/31 Dec 1/94. Wt 158 pds. " 78. Has been gaining in flesh. Dec 31/94. No change noticed. Works a little in the ward.

1895 Jan 1/31 Jan 1/95. Wt 162 pds " 74. Jan 4/95. Foot toe inflamed; received treatment. Jan 15/95. Toe is better.
" 31 Jan 31/95. Eats & sleeps well - He is quiet & well-behaved. Habits clean. Physical condition is good. —

Feb 1/28 Feb 1/95. Wt 160 pds. Pulse 66. Feb 28/95. Behavior & physical condition good. Mentally, no change noted.

Mar 1/31 Mar 1/95. Wt 160 " " 80. Mar 31/95. Eats & sleeps well: bowels regular; talks quite rationally; is anxious to leave here. Reads some; attends patients' entertainments; is industrious & well behaved.

Apl 1/10 Physical condition apparently good. Apl 1/95. Wt 153 pds. Pulse 105 - Apl 10/95. No change; has been
" 20/30 working with upholsterer, for several days. Apl 20/95: About same - Apl 30/95: Opiate has been working in laundry. Behavior very good; talks quite rationally - Head: attends entertainments, neat & tidy.

May 1/14 May 1/95. Wt 149 pds. Pulse 98. (Perhaps outside-work has caused the loss of flesh). May 1/95: Has been quiet & well-behaved; worked steadily at the Laundry; seems much improved. Physical condition good.
" 19/31 May 19/95. Transferred to B2. May 31/95. Behaves well; talks freely & rationally; no delusions noted.

June 1/30 Works regularly at Laundry. Is in good physical condition - June 1/95. Wt 170 pds. Pulse 89.
" 30 June 30/95. Keeps on improving; talks freely & sensibly. Works intelligently at the laundry.

July 1/15 July 1/95. Wt 151 pds. Pulse 88. July 1/95. Complains of some headache. (Given a dose of medicine)
" 16/31 July 16/95. Transferred to C^2 East (the "open ward"). July 31/95. Eats & sleeps well. Bowels regular. Behavior very good: he is very industrious & works intelligently, daily, at the laundry. Habits neat. He talks rationally & sensibly: no delusions noticed: & mental condition seems to be good. —

Aug 1 Physical condition very good. Patient has a "limited parole". Aug 1/95. Wt 137½ pds P. 78.
" 3 Aug 3/95. Allowed to go home to-day, alone.

Discharged

Personal and Medical History of Charles Baker

Resays Brennen right name 1/6/94

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3632.

Residence, Minnesota State-Prison, Stillwater

Date Admission, 19th January 1894.

Admitted by, D. Phelps. Hour, 2 PM.

How Sent, Rudolph Lehmicke, Jof P, Washington Co's.

Sex, Male.

Age, 27 years

Civil Condition, single

Children, —

Age Youngest Child, —

Occupation, Laborer

Degree Education, Common School

Profession Religion, Catholic.

Habits, not known if he had been intemperate

Nativity, Chicago, Ills; father born in Ireland; not known, if married

Physicians Committing, S. J. Merrill & W. C. Rhodes.

Correspondents, Hugh Brennan 683 So Canal St. Chicago (father)

Treated by Prison-Physician —

No. for Year, 202.

Insane Relatives, not known.

Cause Exciting, Unknown

Cause Predisposing, Unknown.

Form,

Accompanying Bodily Disorder, None mentioned

Suicidal or Not, Once attempted suicide: Propensity active.

Date of this Attack, Oct 3d 1893.

Duration, about 3½ months.

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 27

Time of Leaving, Feb 9th 94

Time in Hospital, 21 ds.

Result, Unimproved.

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

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Herzog - Jany 20th 94.

MENTAL ACTIVITY:

Clear or Confused, Clear, at present.

Quick or Sluggish, fairly quick

MEMORY:

Past Events, } Doesn't seem to be impaired

Recent Events, }

Special Subjects, }

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, seems good

Own Mental State, realizes his condition

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, slightly

DELUSIONS:

Systematized ~~or Not~~ of persecution

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS: none noted

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Fairly free.

GENERAL DESCRIPTIVE REMARKS:

Admits having made 2 attempts at suicide (as detailed in history); gives dates &c & a seemingly accurate account of how he felt before each attempt; also admits having had delusions of poison in food &c. Says he is a moderate drinker. Denies ever having had any venereal disease, fits &c or head injury. — For past 2 years or so, previous to Commitment to prison was a "sporting man" following races &c. States at time of 2d attempt at suicide, his bowels moved involuntarily.

Personal and Medical History of Charles Baker

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10 3/4 - WEIGHT, 150½ lbs (usual wt 175 lbs) NUTRITION, Poor; pale & distinctly anaemic

WOUNDS OR ABNORMALITIES, (See S. R. next page)

TONGUE, Tremors, somewhat tremulous Coatings, grayish yellow, attrs Promptness Movement, prompt

PUPILS, Equality, Equal Size, dilated

Response Light, normal Accommodation, excessive

SIGHT, Normal

HEARING, Seems normal

COORDINATION, Arms, } slightly impaired; finger to nose, eyes shut, slightly inaccurate; standing comfort —

Legs, } somewhat unsteady; standing, eyes shut, sways slightly.

TREMORS, Hands, slight Tongue, some slight

Facial Muscles, none General, none

REFLEXES, Patellar, equal; absent, except on reinforcement; then, only slight.

Other Reflexes,

ARTICULATION, Hesitating, no Slurred, no — normal.

FACIAL EXPRESSION, somewhat depressed

SENSIBILITY, ✓

HEART, 5 actions forcible; no murmurs. —

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, 4 PM. 120. —	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See history ONSET GRADUAL OR SUDDEN, See history

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

Mother or Mat. Relations, }

Father or Pat. Relations, } No history of any heredity brought out —

Brothers or Sisters, }

1894

This man, a convict in the Minnesota State-Prison at Stillwater was brought here by the Deputy-Warden H. H. Linnow, attended by D. Cayon, with the following history of his case. A certified copy of the original "Committment Papers", also accompanied patient. There is no history of consanguinity; as to any heredity, not known. This is 1st attack; first symptoms was manifested October 3rd 1893; he made a desperate attempt at suicide, by plunging a sharpened file into abdomen. Again, December 5th 1893, stabbed himself in neck requiring ligation of left Common carotid artery. The disease seems to be increasing. It is variable. Has been rational between 1st and 2nd attempt at suicide; also rational at present time. Derangement is now shown by melancholia and ideas of persecution. Has shown no disposition to injure others. Is suicidal (as outlined above), and propensity is now active. Is not of filthy or destructive habits. Nothing except "spells" of melancholy, was previously observed. If of intemperate habits, unknown. There is no history of any severe disease &c or injury to head. Has been an Inmate of above named Prison for 1½ years. Supposed cause of the disease is unknown. Has been under treatment in the Prison-Hospital, with nothing especially, except nerve sedatives & tonics; results negative.

On Personal examination, nothing further brought out than that noted above. He manifested delusions of persecution. Did nothing of importance. Appearance & manner quiet & rational

Jan 19 On Admission, is in fair physical condition. Has pediculous B^y. (S.B. Complexion dark; Hair black; Eyebrows; Condition of Skin good; Tattoo "C.M.B" on right arm and anchor on left hand. Has some scars; on knees; one between shoulders; also a cut on throat. Bodily condition clean. Is well-behaved. Patient is very weak). ® See letter of Warden, State-Prison, attached to page 50).

" 20 Pulse 120. R 20. T(e) 100. Jan 20/94. Was restless for an hour or so, but slept 7 hours, last night. AM P 118 " 20 " 99.8. Appetite good: bowels seem regular. Is quiet & well-behaved. Walks leisurely about the hall; reads some; seems contented. Talks freely; no delusions noted. PM. Pulse 116. T(e) 100.

" 21 Coughs some; probably from having a cold. No complaints or injuries to note. Jan 21/94. Again passed a quiet & fairly restful night, last night. AM. Pulse 120 R 20 Te 99.6. PM. Pulse 118 R — : Te) 99.8.

" 22 Jan 22/94. Quiet and slept 8 hours, last night. AM. Pulse 100. T(e) 99.8. Talks freely. Walks about hall some; plays games. Goes out walking with the rest of his ward. PM. Pulse 106. Te 99.6.

" 23 Jan 23/94. AM. Pulse 104. Conduct and behavior, by day, about as usual. Personal habits good.

" 24 Jan 24/94. AM. " 100. Talks freely & sensibly. Makes no complaints. Seems quite contented here.

" 25/26 Jan 25/94. AM " 98. Jan 26/94. Has continued to rest & sleep well, (8 hours), each night. AM. Pulse 100. Appetite good. Is always quiet & well-behaved - Reads some. Plays games &c.

" 27 Talks freely; makes no complaints. Goes out walking, with the rest. Jan 27/94. AM Pulse 110

28/29/30 Jany 28/94. AM. Pulse 104. Jany 29/94. AM. Pulse 108. — Jany 30/94. AM. Pulse 104.

" 30 Jan 30/94. 4.30 PM. Was taken with a severe pain in chest; vomited some; pain however, soon passed away & he became better. Jan 31/94. During the past week patient has continued quiet & restful, sleeping uniformly 8 hours each night. Pulse this Am, 100. He has been quiet and well behaved, at all times; free in conversation. Plays cards & games. Reads some. Seems to be contented here & is in good spirits. No delusions have been noted. Habits are good.

Feb 1 Feb 1/94. AM. Pulse 96. Slept well, last night. Aff today, 102 pds. (again off 1½ pds since coming)

" 2 Feb 2/94. Again rested & slept well, last night. AM. Pulse 98. Appetite good. Bowels seem regular.

1894

Feby 2 cont'd Says he is much better now. Reads, plays games & seems to be in good spirits. Feb 6/94. Hearing that there was a probability of his being sent back to State-Prison, he made threats of suicide should they take him back to the "Pen" (as he termed it). Tried to break down the door today. — The Deputy Warden of the State-Prison arrived here today and took this patient and another, (Michael Sullivan #2) back with him to the State-Prison. They left with him quietly, as they had the idea they would soon be returned here again.

— Crossed off the Records —

John Scanlon Jr (or no 2.)

From 300.

May 3 May 3/95. Complains of severe pain in head & groans, at times. Slept only 3 hours, during night, but rested quietly, when awake. Is still given frequent Sponge baths. Medicines continued every 3 hours. Is obliged to diet.

" 14 May 14/95. Slept 3 hours, last night. Complained of pain, when awake - Bowels move fairly, regularly —

" 15 May 15/95. Patient has been very quiet all day: sleeping most of the time - Appearance better, this evening.

" 17 May 17/95. Patient resting quite well, at night, tho' still complains of pain & groans some, at times.

" 19/ Is now on regular diet & extra - May 19/95. Complains of headache, this Am. May 20/95. Up, in roller chair.

" 22/ 2 hours, this Am. Appetite fair; bowels regular. May 21/95. Has very quietly in bed. May 22/95. Patient

27 has improved, mentally, very much, during last few weeks - Sleeps & eats well, at night. Appetite good.

" 31 May 31/95. 10. Am. Up in ward, dressed. Is still on medicine; 3 times, daily. ——

June June 2/95. Was visited today by his brother & another relative, who desired to take him down town, for Church. He was also permitted to return home with them, this evening, on trial. — (See attached nurses' record). A special nurse (J. S. Miller) accompanied them; arrangements being made that he should take care of patient, while on out trial.

1895

July 18 Memorandum: Under this date, special nurse, J. S. Miller, sends in detailed report as to patient's conduct, behavior, actions &c while under his care — Report covers from July 4th to July 18th inclusive, and from it, the following summary is made by him. — "Among some of the symptoms, noticed, at times, with Mr. Scanlon, are, the closing of one or both eyes, and pressing them with fingers; he will also close one eye & stare at any object. "If given a chance, will hide things away; laughs & talks to himself & at times, finds fault with the things he eats; also has a desire to play in water. Is incoherent in speech: shows delusions; "power of attention poor & power of reasoning impaired; these are all very noticeable, at times. "At times & for short intervals, he is quite rational, but these periods are of short duration. Memory "is good; appetite good & health apparently good. Makes no complaints, Especially. —

Aug 31 Report of Private Nurse Miller, (Aug 1 — 31), may be summarized as follows; Patient has been eating & sleeping well: Behavior has been uniformly good: says no harm of any one; worked in harvest-field, the greater portion of the time. Has been from time to time somewhat anxious to get home to his family. Went to Church & Sunday-School on Sundays. Was sociable & friendly to acquaintances he met with, on his trips, driving through portions of Dakota & Minnesota, also going some times by rail.

(carried to Aug 1896

Personal and Medical History of James Marsch (Marsch)

GIBERT, FOLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3633.

Residence, Minnesota State - Prison, Stillwater

Date Admission, 19th January 1894.

Admitted by, D. Phelps Hour, 2 PM.

How Sent, Rudolph Lehmicke, Jof P. Washington Co.

Sex, Male.

Age, 25

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Cigar - maker

Degree Education, Limited

Profession Religion, not a church member

Habits, not known -

Nativity, Bohemia; (parents also born there).

Physicians Committing, H. Rhodes & D. P. Merrill.

Correspondents, Mike Marsch 745 - W - 7th St. Paul (brother).

Treated by Prison - Physician -

No. for Year, 203.

Insane Relatives, not known

Cause Exciting, Mental defect from birth

Cause Predisposing, probably this cause.

Form,

Accompanying Bodily Disorder, Nothing special.

Suicidal or Not, attempted it - (propensity active)

Date of this Attack, about June 1890

Duration, about 3½ years

No. of Attack, 1st (Continuous)

No. of Admissions, 1st

Age First Attack, about 21 years

Time of Leaving, Feb. 16 '94

Time in Hospital, 28 d.

Result, Imp

Crossed off from commitment Jan'y 1st, 1894 because illegally committed.

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog - Jany 23/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Fairly clear

Quick or Sluggish, Slow

MEMORY:

Past Events, } Seems quite good.

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Quite alert

Correct or Illusive, Seemingly Correct

REASONING POWER:

Ordinary Subjects, not very good

Own Mental State, faulty

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent, Quite so.

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, — see note —

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, quite free

GENERAL DESCRIPTIVE REMARKS:

Admits 1st attempt was for the purpose of committing suicide. "He felt much better, after letting off this blood; could work better." 2d & 3d attempts were for the purpose of making him thin, feel better. This is his 2d term, he says. Admits having been drunk, many times. His only delusion noticed is that he believed, at the time of this suicidal attempt, that his blood was too thick & did not circulate well, consequently he was unable to do his work properly, as this faulty circulation impaired his mental strength. His acts of violence are apparently due to an irresistible impulse. He gives quite a long history of crimes & misdemeanors with evident memory & apparently belongs to that class of defectives which supplies our most incorrigible criminals. —

Personal and Medical History of James Marsch

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11 in. WEIGHT, 151½ lbs NUTRITION, where blood has settled — poor; deep hollows under eyes;

WOUNDS OR ABNORMALITIES, (See I. R. next page). 2 of scars on head are linear, 1½ inches in length on occiput; 1st 1 in. to the left of the latter, over the ear. Date of these scars July 1893. patient reasons inaccessible —

TONGUE, Tremors, fibrillary twitching Coatings, brownish at base Promptness Movement, Slow

PUPILS, Equality, Equal Size, Dilated

Response Light, rapid Accommodation, somewhat sluggish.

SIGHT, Good

HEARING, Seems good.

COORDINATION, Arms, } Legs, } Is unimpaired, by usual tests.

TREMORS, Hands, Slight Tongue, Slight

Facial Muscles, none General, none

REFLEXES, Patellar, equal; about 10, Dr. P's scale.

Other Reflexes, slight ankle - clonus

ARTICULATION, Hesitating, no Slurred, no

FACIAL EXPRESSION, Stolid.

SENSIBILITY,

HEART, Slight roughness of 1st sound at apex.

LUNGS, Good, so far as known.

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, some 3½ years ONSET GRADUAL OR SUDDEN, Probably gradual

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

Mother or Mat. Relations, —

Father or Pat. Relations, —

Brothers or Sisters, 1 Brother inebriate

Personal and Medical History of James Marsch

1894

TABEST, FIDLER & CHAMBERS, DAVENPORT, IOWA

This man, a Convict in the Minnesota State-Prison, at Stillwater, was brought here by the Deputy-Warden, Mr. St. Lemon, with the following history of his case. A certified Copy of the original "Committment Papers" also accompanied patient. As to Consanguinity &heredity, unknown. This is the 1st attack; it has been continuous about 3½ years. First symptoms of this attack were manifested soon after he was received at Prison. Made an attempt to commit Suicide at 3 different times; assaulting prisoners for imaginary grievances &c. The disease seems about stationery: is variable; irregular intervals of clearness. Derangement is now shown in no particular way from what is mentioned as above. Patient is disposed to injure others. Is suicidal cutting himself with sharp instruments. Propensity now active. Is not filthy or destructive. Previous to accession of the disease, was often moved & very excitable. As to being of intemperate habits, not known + as to Venereal disease &c, nothing Venereal. Has occasionally, as a Convict, been restrained and confined. Supposed cause of disease is a mental defect from birth. He has been given such general treatment in Prison-Hospital, as occasion required; but no particular improvement made. On personal examination, there is nothing apparent, except as outlined above. He said nothing of importance. Was quiet and rational + answered questions to the best of his ability. — " — " —

Jan 19 Jan 19/94. On admission, is in fair physical condition. Has pustule C.[3] (S.R. Complexion dark; hair black; eyes brown; condition of skin good; has several moles on breast + a brown spot on right leg, just back of the knee; small scar on right side; 3 small scars on right arm; 2 small scars on right hip and 3 scars on head. Bodily condition clean. Behavior good). (See letter of the Warden, State-Prison, attached to page 50.) Pulse 110 (Irr). R 19. Appetite good. (Eaten noon). Bowels have moved; no cough noticed. Behavior is very good. Talks only when spoken to; hesitates
" 20 and repeats the same thing over. No complaints or injuries to report. Jan 20/94. Was somewhat restless, but slept 6 hours, last night. AM. Pulse 106. R 20. Appetite good. Is quiet and well-behaved.
" 21 Jan 21/94. Again, slept but 6 hours last night; was somewhat restless. AM. Pulse 102. R 19. Appetite
" 22 good; bowels regular. Jan 22/94. Slept fairly well (7 hours) last night. AM. " 100. Quietly behaved.
" 23 Talks only when addressed + then hesitates. Jan 23/94. Slept 7 hours, last night. AM. Pulse 100.
" 24 Talks, apparently, quite rationally. Jan 24/94. Slept much better (8 hours) last night. AM. " 90
" 25 complains today, of a sour stomach. Is on medicine. Jan 25/94. Slept 8 hours, last night.
" 26 AM. Pulse 96. Appetite good. Bowels regular. Patient is quiet + well behaved. Jan 26/94. Was quiet and restful, last night, sleeping 8 hours. AM. Pulse 76. Seems restless today. Walks to and fro + wants to be put to work. Worries considerably about his sentence, and Board of Prison-Managers &c. —
" 27 Jan 27/94. Was restless for 2 hours, sleeping but 6 hours, last night. AM. Pulse 90. Appetite Good. —
" 28 Bowels regular. More quietly behaved today. Talks none. Jan 28/94. Slept but 4 hours, last night; was very restless for 5 hours or so. AM. Pulse 92. Conduct + behavior about as usual. —
" 29 Jan 29/94. Was more restful last night, sleeping 7 hours. Restless about 2 hours. AM. Pulse 98. —
Appetite poor, today. Complains some of a sore throat. Is on medicine. Behavior is quiet.
" 30/31 Jan 30/94. AM. Pulse 84. Jany 31/94. AM. Pulse 90. Has slept 7 hours each of past 2 nights. Appetite good. Bowels regular. Is quietly behaved. Talks only when spoken to. Is quite rational, at times, + then, again, is bewildered + hesitates. Habits are clean.

Personal and Medical History of James Marsch

1894

Feb 1 Feb 1/94. Patient Continues to sleep well, at night. AM. Pulse 92. Appetite good. Bowels normal. Continues quiet and well behaved. Is clean and tidy and of good personal habits. Off, today,
" 5 14 & 15 months. Feb 5/94. Sick, in bed, today; Erysipelas of face; Pulse 90. Was noisy, during early
" 15 part of the evening: Appetite is good; bowels regular. Feb 15/94. Has been in room + in bed, during
" 16 this attack, until today, when he was got up. Was not very sick. Feb 16/94. Patient has been very well-behaved, on the whole; does not talk much, but answers questions in a rational manner. Reads the papers. Sleeps + eats well. Has not received any injuries, nor been in seclusion while here, in Hospital. Physical condition apparently good. Is usually dull in manner, a half-witted, yet answers fairly well. Habits have been clean —

Was taken out today, by brother-in-law.

Crossed off the records —

Edward Meyer

1895 From 1894.

Feb 12/13 Feb 4/96. Wt 153 lbs. P 90. Feb 6/96. Ruled this Am. Complains of sickness in stomach; ate no breakfast. P 64 R 20 T 97½. Feb 13/96. Off today: Worked in kitchen. Mar 2/96. Wt 150 lbs. P 90. Mar 31/96. Appetite good: bowels
Mar 2/31 in good condition. Patient is quiet + well-behaved: habits neat + clean. Apl 1/96. Wt 148 lbs. P 72. Apl 29/96. Patient
Apl 1/29 has improved considerable, of late. Talks rationally, at all times. Works in kitchen, every day. Apl 30/96. Discharge.
May 1/16 May 1/96. Keeps in about his usual flesh + physical condition. May 16/96. Became quite noisy, during
" 30 night (about 3 Am). May 30/96. Physical condition good: works in kitchen every day. Is rational, when conversing. When he is alone, he will rave + pull his hair + become very "frenzied" at some party, who, he says, sent him here. June 1/96. Wt 147 lbs. P 80. June 30/96. Not special change.
June 1/30 July 1/96. Wt 144 lbs. P 84. July 10/96. Is about the same. Works in kitchen, every day.
July 1/12 July 12/96. Eloped from the kitchen today.

Discharged

Whole No. 3631.
Residence, + 903 James St. St Paul, Ramsey Co. Minn
Date Admission, 19th January 1894.
Admitted by, Dr. Rice
How Sent, By order
Sex, Male
Age, + 35.
Civil Condition, + Mr
Children, + 8
Age Youngest Child,
Occupation, + Car
Degree Education, + L
Profession Religion, +
Habits, + Moderat
Nativity, + Switz
Physicians Committing
Correspondents,
+ Particulars from pati

No. for Year, 204.
Insane Relatives, (Father's brother)
Cause Exciting, Suicide

Examination tried by Dr. Herzog
Ed by Dr Eby May 2/94

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish,
MEMORY:
Past Events, Ja
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPT

Re examination of William Haenggi, made by Dr. C. B. Eby, on May 2/94.

Patient states he has not as much power in left arm and leg as in right.

Says "when tried to suicide, had more trouble in his heart than in his head" — Describes treatment while at gaol, and hospital in St Paul. Says, he was knocked around at the gaol and spit on &c, but was treated well at the hospital.

States that his wife did not stay at home and did not do any work at home; was out all night & slept day time; would not allow the children to eat at the table with them.

States that he is now in far better mental condition than when he came, but is apt, if it is a rainy or a dull day, to feel bad — "

May 3rd. Patient, this morning said he had not told me quite correctly about his family history. He said he thought his father must be "off", as he would, at times, talk loud & abusively —

Patient was brought down for examination on Jany 19/94 but it was almost impossible to get any information from him & an interpreter was not at hand. He, however, denied the charge of having killed his wife & anyone else. —

Note.
The attached slip contains the particulars brought out in Dr. Eby's examination of May 2/94.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8½ in WEIGHT, 164 lbs. NUTRITION, Good, now (May 2/94)
WOUNDS OR ABNORMALITIES, (see Supervisor's report on next page) —
TONGUE, Tremors, very little Coatings, none Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes.
SIGHT, Good
HEARING, Good
COORDINATION, Arms, of left arm, slight incoordination; of right, good
Legs, Standing, eyes shut, stands firmly —
TREMORS, Hands, Yes Tongue, slight
Facial Muscles, none General, none —
REFLEXES, Patellar, 8 & q — about equal — left somewhat more exaggerated than right
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred, some foreign accent
FACIAL EXPRESSION, Good.
SENSIBILITY, normal
HEART, Sounds good —
LUNGS, Sounds good —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Read / 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 — healthy —
Father or Pat. Relations, Father living — healthy — not a drinker. Father's brother Insane.
Brothers or Sisters, 3 brothers; 2 sisters dead — both died young.

Personal and Medical History of William Haenggi

HERBERT, FIELD & CHAMBERS, DAVENPORT, IOWA

Whole No. 3631.
Residence, + 903 James St. St Paul, Ramsey Co. Minn.
Date Admission, 19th January 1894.
Admitted by, Dr Kilbourne Hour, 6.30 PM
How Sent, By order of Judge, District Court.
Sex, Male
Age, + 35.
Civil Condition, + widower
Children, + 8 (oldest 15)
Age Youngest Child, —
Occupation, + Carpenter
Degree Education, + limited
Profession Religion, + Catholic
Habits, + moderate drinker
Nativity, + Switzerland
Physicians Committing,
Correspondents,
+ Particulars from patient

No. for Year, 204.
Insane Relatives, (Father's brother)
Cause Exciting,
Cause Predisposing,
Form,
Accompanying Bodily Disorder,
Suicidal or Not,
Date of this Attack,
Duration,
No. of Attack,
No. of Admissions,
Age First Attack,
Time of Leaving,
Time in Hospital,
Result,

no further particulars obtainable
France given as homicidal

Examination tried by Dr Herzog Jan 19/94
Ed by Dr Eby May 2/94

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

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

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

PERCEPTIVITY:
Alert or Dull, alert —
Correct or Illusive, correct

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

EMOTIONAL STATE:
Normal, Calm, normal & calm
Indifferent,
Exalted,
Depressed,

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

HALLUCINATIONS:

ILLUSIONS:

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

GENERAL DESCRIPTIVE REMARKS:

Patient was brought down for examination on Jany 20/94 but it was almost impossible to get any information from him + an interpreter was not at hand. He, however, denied the charge of having killed his wife or anyone else. —

Note.
The attached slip contains the particulars brought out on Dr Eby's examination of May 2/94.

Personal and Medical History of William Haenggi

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8½ in. WEIGHT, 164 lbs. NUTRITION, Good, now (May 2/94)

WOUNDS OR ABNORMALITIES, (for Lupus)

PUPILS, Equality, Equal

Response Light,

SIGHT, Good

HEARING,

COORDINATION, Arms,

TREMORS, Hands,

Facial Muscles,

ARTICULATION, Hesitating,

FACIAL EXPRESSION,

GAIT,

STATE OF NUTRITION,

SKIN,

LUNGS,

HEART,

ABDOMEN,

SPINE,

GENITALS, Penis,

SCROTUM,

TESTICLES,

HANDS, Dirty,

BOWELS, Normal,

APPETITE,

SLEEP, Good,

PULSE,

CRANIAL MEASUREMENTS,

Movement, prompt

Good

more exaggerated than right.

Swiss accent

Speechless,
Irregular,
Poor,
Irregular,
TEMP.,

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother living — healthy —

Father or Pat. Relations, father living — healthy — not a drinker. Father's brother Insane.

Brothers or Sisters, 3 brothers; 2 sisters dead — both died young.

Personal and Medical History of William Haenggi.

1894

This man was brought here by Deputy Sheriff Paul G. Chapel, attended by Adolph Pamperin. No history, except that below mentioned, accompanied the patient. The case is that of "State of Minnesota -vs- William Haenggi" (as per certified minutes of Commitment attached to order), who is charged by the Grand Jury of said County with the crime of Murder in the First Degree; the said (Grand) Jury return their verdict that said William Haenggi, is insane & by reason of insanity is incapable of understanding any proceedings in the matter, and pursuant to said verdict, Hon. John. H. Willis, one of the Judges of the District Court, orders that said Wm. Haenggi be committed to this Hospital.

Jan 19 On admission, was put on B^r. (S.R. Complexion light; hair light; blue eyes; condition of skin good. Some scars on throat; eruptions on back. Bodily condition (thin). Pulse 96. R 20. T@ 99.6. —

" 20 Jan 20/94. Was restless & noisy for 3 hours last night, sleeping but 5 hours. A.M. Pulse 94 R 18 T@ 99.4. Appetite good. Walks about hall some; offers no violence; talks but little. No cough noticed. P.M. P 96 R 17 T@ 99.2. No complaints or injuries to report. Jan 21/94. Was restless & noisy 3 hours and slept only 5 hours, last night. A.M. Pulse 90 R 16 T@ 99.6. Appetite good. Walks some about the

" 22 ward. Talks to himself. Makes no complaints. P.M. Pulse 92 T@ 99.8. Jan 22/94. Again passed a poor night, Restless 3 hours, sleeping but 5 hours. P.M. Has been rather restless during the day.

" 23 Talks but little - no complaints made. Pulse 96. T@ 99.6. Jan 23/94. Again rested & slept poorly last night; (about as in the one preceding). A.M. Pulse 90. Appetite good. He talks but little.

" 24 Jan 24/94. Was restless for 4 hours, sleeping but 4 hours, last night. A.M. Pulse 88. Walks about

" 25 hall; talks to himself, at times. Jan 25/94. Restless 3 hours, Sleeping 5 hours, last night. —

" 26 A.M. Pulse 96. Conduct & behavior, by day, about as usual. Jan 26/94. Passed a restless night, sleeping only 5 hours or so, last night. A.M. Pulse 104. Complains of pains in abdomen &c.

" 27 Appetite is good. Talks some. Jan 27/94. Sleeping 5 hours, restless 3 hours, last night. A.M. P 96.

" 28 Is working some in the ward, today. Jan 28/94. Slept fairly well, 7 hours, last night. A.M. P 116.

" 29 Is well behaved; talks but little. Works in hall. Jan 29/94. Slept but 3 hours; was restless for 5 hours,

" 30 last night. A.M. Pulse 124. Conduct & behavior, as above described. Jan 30/94. Restless for 4 hours, sleeping but 4 hours, last night. A.M. Pulse 120. Appetite good. Bowels probably constipated, as he complains of pain in them. Is well-behaved. Cannot talk much English. Works some in ward.

" 31 Jan 31/94. Slept but 5 hours, restless for 3 hours, last night. A.M. Pulse 114. Complains of pain; (probably imaginary, to some extent); "dont want to go back to St. Paul". —

Feb 1 Feb 1/94. Slept better (7 hours), last night. A.M. Pulse 110. Conduct & behavior about as usual.

" 2 Wt. today, 174 lbs. (a gain of 10 pounds, since coming). Feb 2/94. Was restless for 2 hours, but slept 5 hours, last night. A.M. Pulse 106. Appetite fairly good. Is depressed. Neck is swollen below the cut; sore on inside; given a gargle & salve. Feb 3/94. Slept 5 hours; was restless 3 hours, last night.

" 5/7 Feb 5/94. Restless 3 hours, Sleeping but 5 hours, last night. Feb 7/94. Slept but 3 hours; restless 5 hours, last night.

" 11/18 Feb 11/94. Restless today, walking the hall; has a wild look in his eyes. Feb 18/94. During last half of month, has been quite frequently restless at night, for from 4 to 6 hours, sleeping only 3 or 4 hours, nightly. Behavior, by day, has been good. Talks some. Goes out walking. Works some in the ward.

Mar 1/15 March 1/94. Wt 178 lbs. (a further gain in flesh). March 15/94. Wants attendants to tie his hands behind him. Says "he is off"; "has been feeling all right the past 2 or 3 weeks, but realizes he is "off" now". —

Personal and Medical History of William Haenggi

1894

Mar 15/19 Would not let himself be shaved today; says "he will wait until he is better". Mar 19/94. Has been

" 20 restless for 4 hours or so in each of past 2 nights, sleeping only 4 hours, in each. Mar 20/94. Wanted to

" 21 talk with the Dr.; is restless & excited today. Mar 31/94. Has, apparently, been sleeping somewhat better, of late. Appetite good. Is very restless, at times, by day. Talks freely. Laughs and talks to himself, at times. Works willingly, at the ward. —

Apr 2/15 Apl 2/94. Wt 178 lbs. Pulse 92. Apl 15/94. Behavior is good; works well in the ward. —

" 30 Apl 30/94. Apparently rests and sleeps well. Appetite good. Talks freely. Physical condition seems good, [illegible] on flanks & hairs in lower left side of abdomen. Patient is in fair mental condition, but is subject [illegible] at the ward. Habits are clean. —

[illegible] day. See "Remarks" in same. May 3/94. No further remarks.

[illegible] ed of not feeling well this morning; ate no breakfast. [illegible] walking with the rest. Works in ward. Is on medicine. [illegible] talks fairly freely & sensibly. Habits are cleanly. —

[illegible] Continues about as described in last months general note. [illegible] to work outside today, with the carpenter. Is very willing. [illegible] talks fairly & sensibly. Does not express any delusions. [illegible] is Department. Habits neat & clean. Takes medicine.

[illegible] 31/94. Always quiet & well-behaved. Pleasant and [illegible] ional appearance. Makes no complaints. Works [illegible] a very good workman in his line. Health is good. [illegible] No special change to note. Behaves well. Talks [illegible] nes &c. Works with Carpenter. Is on medicine. —

[illegible] Oct 7/94. Has worked steadily with the Carpenter [illegible] Complains some of pains & says "he is weak". Appearance [illegible] behaved; pleasant in manner. Talks freely & sensibly. [illegible] him were unavailing. Mother in St Paul & [illegible] advised by telegram of patients escape. —

[illegible] evening. He had gone to St. Paul, to the Sheriffs office [illegible] his trial. They however, deemed it best to send him back on, [illegible] from his long walk. Oct 31/94. Behaves well. [illegible] Keeps with work in the ward. Habits clean & tidy. [illegible] working with Carpenter. Complains of Emissions - [illegible] does not eat, it isnt so bad". Nov 30/94. Works in ward, occasionally. Complains of pains in legs, arms &c.; "thick, caused by Emissions" - Appetite changeable.

Dec 1/31 Dec 1/94. Wt 174 lbs. Pulse 82. Dec 31/94. Behaves well - Talks freely; Works in ward. Still complains, as above -

Jan 1/95 Jan 1/95. Wt 182 " " 84 - (In spite bright appearing, at present, though there is found mental

" 16/31 weakness. D.P.) Jan 16/95. Has been refusing his medicine, from time to time. Jan 31/95. Appetite good; bowels regular. Behaves well - Reads Bible - Talks freely & generally sensibly - Physical condition good.

Feb 1/15/28 Feb 1/95. Wt 182 1/2 lbs. P. 80. Feb 15/95. Dr. H. passed some words with him. Feb 28/95. Works in ward some. Does not complain as much as usual. Behaves well. Reads Bible. Talks freely when addressed. Clean & tidy in habits — Health seems good.

(to 115)

Rochester Minn. Mar. 22 / 95

Dr. —

I am troubled with the same sickness all the time. Im the place of getting a little better I get a little worse. I have a sore eye now. I have a sore throat for the last four or five years. I have this expanding on the peanuts they hant clean as they were before. there is a drop I never tell the Dr. of any other sickness since I have been here. Your class of Dr. dont understand the sickness like I [illegible] have got.

[illegible] all the Emissions [illegible] cont

LOBLEY, FOLAN & CHAMBERS, DAVENPORT, IOWA.

1894

This man was brought here by Deputy Sheriff Paul G. Chapel, attended by Adolph Ramperin. No history, except that below mentioned, accompanied the patient. The case is that of "State of Minnesota -vs- William Haenggi" (as per certified minutes of Commitment attached to order), who is charged by the Grand Jury of said County with the crime of Murder in the First Degree; the said (Grand) Jury return their verdict that said William Haenggi, is insane & by reason of insanity is incapable of understanding any proceedings in the matter, and pursuant to said verdict, Hon. John. H. Willis, one of the Judges of the District Court, orders that said Wm Haenggi be committed to the [illegible]

Jany On admission, was pulse 80. T. [illegible]. Complexion [illegible] some sears on throat; eruptions on back. Bodily condi[illegible]

" 20 Jan 20/94. Was restless & noisy for 3 hours last night. Appetite good. Walks about hall some; offers no viol[illegible]

" 21 R 17 Jan 21/94. No complaints or injuries to report. Slept only 5 hours, last night. AM. Pulse 90 R [illegible] ward. Talks to himself. Makes no complaints. PM. [illegible] poor night, restless 3 hours, sleeping but 5 hours [illegible]

" 23 Talks but little - no complaints made. Pulse 96 [illegible] fairly last night (about as at the one preceding). AM. [illegible]

" 24 Jan 24/94. Was restless for 4 hours, sleeping but [illegible] hall; talks to himself, at times. Jan 25/94. Res[illegible]

" 26 AM. Pulse 96. Conduct & behavior, by day, about as [illegible] sleeping only 5 hours or so, last night. AM. Pulse [illegible] Appetite is good. Talks some. Jan 27/94. Sleepe[illegible]

" 27 " 28 Is working some on the ward, today. Jan 28/94.

" 29 Is well behaved; talks but little. Works on hall. Jany [illegible]

" 30 last night. AM. Pulse 124. Conduct & behavior, as [illegible] sleeping but 4 hours, last night. AM. Pulse 120. [illegible] he complains of pain in them. Is well-behaved. C[illegible]

" 31 Jan 31/94. Slept but 5 hours, restless for 3 hours, la[illegible] (probably in a quiet way, to some extent); "don't wan[illegible]

Feb 1 Feb 1/94. Slept better (7 hours), last night. AM.

" 2 Wt. today, 174 lbs. (a gain of 10 pounds, since Comm[illegible] Slept 8 hours, last night. AM. Pulse 106. Appetite fa[illegible]

" 3 the cut; sore on inside; given a gargle & salve. Feb 3/94. Slept 5 hours; was restless 3 hours, last night.

" 5/7 Feb 5/94. Restless 3 hours, sleeping but 5 hours, last night. Feb 7/94. Slept but 3 hours; restless 5 hours, last night.

" 11/94 Feb 11/94. Restless today, walking the hall; has a wild look in his eyes. Feb 28/94. During last half of month, has been quite frequently restless at night, for from 4 to 6 hours, sleeping only 3 or 4 hours, nightly. Behavior, by day, has been good. Talks some. Goes out walking. Works some on the ward.

Mar 9/15 March 1/94. Wt 178 lbs. (a further gain in flesh). March 15/94. Wants attendants to tie his hands behind him. Says "he is off"; "has been feeling all right the past 2 or 3 weeks, but realizes he is "off" now" —

I am here over fourteen months now and I have a sickness that could be cured in two months.

I could not see that it is of use to stay any longer.

I like to use a special Dr. I have eight children and some body else has got to support them and I get fooled around here with my sickness.

I be thankful to god that I save my children from such a sickness so I am not sorry for what I have done but for the shot which I have done.

Two weeks by Dr. Walder specialist done me more good than all the treatment there.

I had three days medicine I had no pain in my back and not in my leg.

and I could work pretty good.

Here when I work a day the next day I can hardly move my leg.

I am sorry for what I offered to you so as I could not do the work on those man-tle pieces.

I get mad when I go to the shop and see the nice lumber and more mad when I see the one that is finished.

I hope that you tend to it so as I get a better treatment so as I fill my offer.

You can prove yourself that the treatments since I have been here has done me no good.

I had Dr. in St Paul they looked at me like a dummey when I said I was

1894

Mar 15/19 Cont'd Would not let himself be shaved today; says "he will wait until he is better". Mar 19/94. Has been restless for 4 hours or so in each of last 2 nights, sleeping only 4 hours, in each. Mar 20/94. Wanted to talk with the Dr.; is restless & excited today. Mar 21/94. Has, apparently, been sleeping somewhat better, of late. Appetite good. Is very restless, at times, by day. Talks freely. Laughs and talks to himself, at times. Works willingly, on the ward.

Apr 2/5 Apr 2/94. Wt 178 lbs. Pulse 92. Apr 15/94. Behavior is good; works well on the ward. —

" 20 Apr 20/94. Apparently rests and sleeps well. Appetite good. Talks freely. Physical condition seems good, [illegible] size of abdomen. Patient is in fair mental condition, but is subject [illegible] on the ward. Habits are clean. —

[illegible] day. See "Remarks" on same. May 3/94. No further remarks.

[illegible] of not feeling well this morning; ate no breakfast. [illegible] walking with the rest. Works on ward. Is on medicine. [illegible] talks fairly freely & sensibly. Habits are cleanly. — [illegible] continues about as described in last months general note. [illegible] to work out side today, with the carpenter. Is very willing. [illegible] talks freely & sensibly. Does not express any delusions. [illegible] department. Habits neat & clean. Takes medicine. [illegible] 94. Always quiet & well-behaved. Pleasant and [illegible] normal appearance. Makes no complaints. Works [illegible] a very good workman in his line. Health is good. [illegible] a special chair & note. Behaves well. Talks [illegible] as ever. Works with Carpenter. Is on medicine —

Oct 17/94. Has worked steadily with the Carpenter [illegible] complains some of Emissions & says "he is weak". Af-[illegible] behaved; pleasant in manner. Talks freely & sensibly - [illegible] voice prevailing. Brother in St Paul & [illegible] advised by telegram, of patients escape. — [illegible] morning. He had gone to St Paul, to the Sheriffs office [illegible] his trial. They however, deemed it best to send him back here, [illegible] from his long walk. Oct 31/94. Behaves well. [illegible] Helps with work on the ward. Habits clean & tidy. [illegible] working with Carpenter. Complains of Emissions - [illegible] cannot eat, it isn't so bad". Nov 30/94. Works on ward, [illegible] occasionally. Complains of pains in legs, arms &c; "think, caused by Emissions" - Appetite changeable.

Dec 1/31 Dec 1/94. Wt 174 lbs. Pulse 82. Dec 31/94. Behaves well - Talks freely; Works on ward. Still complains, as above.

Jan 1/95 Jan 1/95. Wt 182 " " 84 - (In quite bright appearing, at present, though there is found mental

" 16/31 weakness. D.P.) Jan 16/95. Has been receiving his medicine from time to time. Jan 31/95. Appe-tite good; bowels regular. Behaves well - Reads Bible - Talks freely & generally sensibly - Physical condition good.

Feb 1/15/28 Feb 1/95. Wt 182½ lbs. P. 80. Feb 15/95. Dr. H. - pleurisy found on him. Feb 28/95. Works on ward some. Does not complain as much as usual. Behaves well. Reads Bible. Talks freely when addressed. Clean & tidy in habits — Health seems good.

(to 115)

1894

This man was brought here by Deputy Sheriff Paul G. Chapel, attended by Adolph Pamperin. No history, except that below mentioned, accompanied the patient. The case is that of "State of Minnesota - vs - William Haenggi" (as per certified minutes of Committment attached to order), who is charged by the Grand Jury of said County with the crime of Murder in the First Degree; the said (Grand) Jury return their verdict that said William Haenggi, is insane & by reason of insanity is incapable of understanding any proceedings in the matter, and pursuant to said verdict, Hon. John W. Willis, one of the Judges of the District Court, orders that said Wm Haenggi be committed

Jan 19 On admission was put on B[d]. (S.R. Complex
some years in throat; eruptions at back. Bodily
" 20 Jan 20/94. Was restless & noisy for 3 hours la
Appetite good. Walks about hall some; offers n
" 21 R 17 T (a) 99.2. No complaints or injuries to r
slept only 5 hours, last night. AM. Pulse
" 22 ward. Talks to himself. Makes no complaints.
poor night, Restless 3 hours, Sleeping but 5
" 23 Talks but little - no complaints made. Pa
poorly last night; (about as at the one preceding).
" 24 Jan 24/94. Was restless for 4 hours, sleeping
hall; talks to himself, at times. Jan 25/94
" 26 AM. Pulse 96. Conduct & behavior, by day, abo
sleeping only 5 hours or so, last night. AM. C
" 27 Appetite is good. Talks some. Jan 27/94.
" 28 Is working some on the ward, today. Jan
" 29 Is well behaved; talk but little. Works in hall.
" 30 last night. AM. Pulse 124. Conduct & behavio
sleeping but 4 hours, last night. AM. Pulse
he complains of pain in them. Is well - beha
" 31 Jan 31/94. Slept but 5 hours, restless for 3 hou
(probably imaginary, to some extent); "don

Feb 1 Feb 1/94. Slept better (7 hours), last night.
" 2 24, today, 174 lbs. (a gain of 10 pounds, since
slept 5 hours, last night. AM. Pulse 106. Appetit fairly good - Is depressed. Right is swollen below
the cut; sore on inside; given a gargle & salve. Feb 3/94. Slept 5 hours; was restless 3 hours, last night.
" 5/7 Feb 5/94. Restless 3 hours, sleeping but 5 hours, last night. Feb 7/94. Slept but 3 hours; restless 4 hours, last night.
" 11/12 Feb 11/94. Restless today, walking the hall; has a wild look in his eyes. Feb 28/94. During last half of
month, has been quite frequently restless at night, for from 4 to 6 hours, sleeping only 3 or 4 hours,
nightly. Behavior, by day, has been good. Talks some. Goes out walking. Works some on the ward.

Mar 7/15 March 7/94. Wt 178 lbs. (a further gain in flesh). March 15/94. Wants attendants to tie his hands behind
them. Says "he is off"; "has been feeling all right the past 2 or 3 weeks, but realizes he is "off" now." —

Dr Tilbourn.

sick then I get a dose of
salse I get a little better
Waldo was different when
I told him of my pain
in my leg and back he
looked at my peanuts and
sore throat and sore eye
and then I get medicin
five drops every hour.
Sweney the Billy Grand
Kinky they saw so as I had
sore throat and eye so I get
sent here your class of Dr.
dont care for such a sione
I hope you do the best
you can. William Hoenig

1894

Mar 15/19 Contd Would not let himself be shaved today; Says "he will wait until he is better". Mar 19/94. Has been
" 20 restless for 4 hours or so in each of last 2 nights, sleeping only 4 hours, on each. Mar 20/94. Wanted to
" 21 talk with the Dr.; is restless & excited today. Mar 31/94. Has, apparently, been sleeping somewhat
better, of late. Appetite good. Is very restless, at times, by day. Talks freely. Laughs and talks to
himself, at times. Works willingly, at the ward. — " —

Apl 2/15 Apl 2/94. Wt 178 lbs. Pulse 92. Apl 15/94. Behavior is good; works well in the ward. —
" 30 Apl 30/94. Apparently rests and sleeps well. Appetite good. Talks freely. Physical condition seems good,
but he complains of pain in lower left side of abdomen. Patient is in fair mental condition, but is subject
to periods of depression. Works well & willingly at the ward. Habits are clean. —

May 2/15 May 2/94. Patient was examined again today. See "Remarks" in same. May 3/94. No further remarks.
" 31 Wt 177½ lbs. Pulse 96. May 31/94. Complained of not feeling well this morning; ate no breakfast.
Is uniformly quiet & well - behaved. Goes out walking with the rest. Works in ward. Is on medicine.
Mental condition seems to be improving. Retails fairly freely & sensibly. Habits are cleanly. —

June 2/30 June 2/94. Wt 178 lbs. Pulse 90. June 30/94. Continues about as described in last months general note.

July 2/31 July 2/94. Wt 175 lbs. July 3/94. Commenced to work outside today, with the carpenter. Is very willing.
" 31 July 31/94. Always quiet & well - behaved. Talks freely & sensibly. Does not express any delusions.
Works daily & intelligently in the carpenters department. Habits neat & clean. Takes medicine.

Aug 2/31 Aug 2/94. Wt 174½ lbs. Pulses 82. Aug 31/94. Always quiet & well - behaved. Pleasant and
agreeable in manner. Neat & tidy in personal appearance. Makes no complaints. Works
outside daily with the Carpenter and is a very good workman in his line. Health is good.

Sep 1/30 Sep 1/94. Wt 172 lbs. Pulse 98. Sep 30/94. No special change to note. Behaves well. Talks
freely and sensibly; reads some; plays games &c. Works with Carpenter. Is on medicine —

Oct 1/17 Oct 1/94. Physical health good. Pulse 92. Oct 17/94. Has worked steadily with the Carpenter
up to today, when he stopped working. Complains some of insomnia & says "he is weak". Ap-
petite is poor. Continues quiet & well behaved; pleasant in manner. Talks freely & sensibly -
" 18 Oct 18/94. Eloped today. Efforts to find him were unavailing. Brother in St Paul &
also Sheriff of Ramsay County were advised by telegram, of patients escape. —
" 20 Oct 20/94. Patient was brought back this evening. He had gone to St Paul, to the Sheriff's office
to give himself up, so that he could stand his trial. The Governor, deemed it best to send him back here.
" 31 He was put back on B[d]. Is slightly lame, from his long walk. Oct 31/94. Behaves well.
Sleeps well. Talks freely. Reads some. Helps with work on the ward. Habits clean & tidy.

Nov 2/15 Nov 2/94. Wt 178 lbs. Pulse 98 - Nov 10/94. Quit working with Carpenter. Complains of Emissions -
" 18/30 Nov 18/94. Appetite poor. Says "that when he does not eat, it isn't so bad". Nov 30/94. Works in ward,
occasionally. Complains of pains in legs, arms &c; "think, caused by Emissions" - Appetite changeable.

Dec 1/31 Dec 1/94. Wt 174 lbs. Pulse 82. Dec 31/94. Behaves well - Talks freely; Works in ward. Still complains, as above -
Jan 1/95 Jan 1/95. Wt 182 " " 84 - (In quite bright appearing, at present, though there is some mental
" 16/31 weakness. D.P.) Jan 16/95. Has been refusing his medicine, from time to time. Jan 31/95. Appe-
tite good; bowels regular. Behaves well - Reads Bible - Talks freely & generally sensibly - Physical condition good.

Feb 1/15/28 Feb 1/95. Wt 182½ lbs. P. 80. Feb 15/95. Dr. H. passed sound on him. Feb 28/95. Works in ward & some.
Does not complain as much as usual. Behaves well. Reads Bible. Talks freely when addressed.
Clean & tidy in habits — Health seems good. (to 115)

ROBERT, FIELD & CHAMBERS, DAVENPORT, IOWA

Whole No. 3635.

Residence, St. Paul, Minn. 399 Western Ave

Date Admission, 20th January 1894

Admitted by, D. Phelps Hour, 7 P.

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

Sex, Male.

Age, 43.

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Laborer

Degree Education, Common School

Profession Religion, Catholic

Habits, use liquor & tobacco to excess

Nativity, Ireland (Parents also born there) —

Physicians Committing, Jas. C. Markoe & Talbot Jones.

Correspondents, Friends { Oliver Dunn 399 Western Ave St Paul
J. J. Murray 399 Fuller St St Paul.

No family physician.



205.

es, None.

, possibly a commencing softening of brain

sing, probably intemperance

Bodily Disorder, None mentioned

, No.

ack, One year ago

one year.

1st

No. of Admissions, 1st

Age First Attack, about 42.

Time of Leaving, 1st July 1894

Time in Hospital, 5 months & 11 days.

Result, Died; Epilepsy & General paresis.

EXAMINATION ON ADMISSION.

Entered Dr. Herzog, March 15/94. — MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

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

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Illusive

REASONING POWER:

Ordinary Subjects, }
Own Mental State, } Much impaired
Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Patient is a typical G. P. — Does not even know his age

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS:

Systematized or Not, unsystematized "of grandeur"

Special Subjects,

Transitory or Not,

HALLUCINATIONS: ✓

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent

Voluble or Reticent, Answers questions, fairly

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 11in WEIGHT, 182½ pds NUTRITION, Quite Good.

WOUNDS OR ABNORMALITIES, see "S. R." next page; suspicious looking scars on right leg.

TONGUE, Tremors, Fibrillary tremor, Coatings, none Promptness Movement, slow

PUPILS, Equality, unequal, right dilated Size, left normal size, very slight ptosis of left eye.

Case No. 3635. Thomas O'Brien. Vol. 27.

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

backward, poorly done; standing, quickly, fear. —

TREMORS, Hands, Marked Tongue, Fibrillary

Facial Muscles, Slight (when talking) General, Slight. —

REFLEXES, Patellar, equal; abdominal exception reinforcement; knee slight. —

Other Reflexes,

ARTICULATION, Hesitating, Yes Slurred, Yes — paretic drawl. —

FACIAL EXPRESSION, Dull.

SENSIBILITY,

HEART, Slight roughness of 1st sound at apex, but no distinct murmurs. —

LUNGS, Seem good —

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, one year (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 Thomas O'Brien

HERBERT, FIELDS & CHAMBERS, DAVENPORT, IOWA



Whole No. 3635. 205.

Residence, St. Paul, Minn. 399 Western Ave

Date Admission, 20th January 1894

Admitted by, Dr. Phelps Hour, 7 P

How Sent, John B. Oliver, Jof P. Ra

Sex, Male.

Age, 43.

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Laborer

Degree Education, Common School

Profession Religion, Catholic

Habits, use liquor & tobacco to excess

Nativity, Ireland (Parents also born there) —

Physicians Committing, Jas. C. Markoe and Talbot Jones.

Correspondents, Friends: Denis Dunn 399 Western Ave St Paul; T. J. Murray 399 Fuller St St Paul.

No family physician.

s, None.

, possibly a commencing softening of brain

sing, probably intemperance

Bodily Disorder, None mentioned

Age First Attack, about 42

Time of Leaving, 1st July 1894

Time in Hospital, 5 months & 11 Days.

Result, Died; Aphasia & General Paresis.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exby Dr Herzog, Mar 15/94. —

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, } very much impaired

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Illusive

REASONING POWER:

Ordinary Subjects, }

Own Mental State, } much impaired

Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Patient is a typical G. P. — Does not even know his age.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS:

Systematized or Not, unsystematized "of grandeur"

Special Subjects,

Transitory or Not,

HALLUCINATIONS: ✓

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent

Voluble or Reticent, Answers questions, fairly

Personal and Medical History of Thomas O'Brien

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 in. WEIGHT, 182½ pds NUTRITION, Quite good

WOUNDS OR ABNORMALITIES, see "S. R." next page; suspicious looking scars on right leg.

TONGUE, Tremors, fibrillary tremor Coatings, none Promptness Movement, slow

PUPILS, Equality, unequal, right dilated Size, left normal size; very slight ptosis of left eye.

Response Light, sluggish Accommodation, sluggish

SIGHT, Seems quite good

HEARING, Seems good

COORDINATION, Arms, } much impaired; standing unsteady, can do this; walking backward, poorly done; standing,

Legs, } Eyes shut, quite marked swaying; turning quickly, poor. —

TREMORS, Hands, Marked Tongue, fibrillary

Facial Muscles, Slight (when talking) General, Slight. —

REFLEXES, Patellar, equal; absent except on reinforcement; then slight. —

Other Reflexes,

ARTICULATION, Hesitating, Yes Slurred, Yes — paretic drawl. —

FACIAL EXPRESSION, Dull

SENSIBILITY,

HEART, slight roughness of 1st Sound at apex, intra Dietick Murmurs. —

LUNGS, Seem good —

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, one year (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,

1894

BERGET, FIDLAR & CRAWBERS, DAVENPORT, IOWA

Was brought here by Deputy-Sheriff P.C. Haas, with the following history. There is no history of either heredity or consanguinity. This is the 1st attack; has never been in hospital. First symptoms of this attack were manifested one year ago; showed loss of memory; wanders aimlessly about; has various delusions. The disease seems to be increasing. Of variable or rational intervals, not known. Derangement is now shown by delusions as to his residence & as to his age; claims he was born long after his mother was dead. Denies the use of liquor & tobacco, while he uses much of both. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. No previous peculiarities of were known. There is no history of any severe disease or injury to head. He has not been restrained or confined. Cause of the disease is possibly a commencing softening of the brain. He has had no medical treatment. —

Jan 20 — Jan 20/94. On admission, is in fair physical condition. Was put on B3. (S.R. complexion light; hair, dark gray; eyes blue; condition of skin good; has a "cross & shamrock" tattooed on right arm & imitation of ring on 3d finger of right hand; also 2 scars on right leg, below the knee. Bodily condition clean. Behavior good).

" 21 — Jan 21/94. Was quiet & slept 7 hours, last night. AM. Pulse 84 R. 20 T. 99.6. Appetite fairly good.

" 22 — Is well-behaved. Jan 22/94. Probably slept fairly well, last night. AM. Pulse 96. T. 99.2. —

" 23 — Appetite good; bowels regular. Is restless to-day and bewildered. Jan 23/94. Slept 7 hours,

" 24 — last night. AM. Pulse 78. T. 99.8. Jan 24/93. Quiet and restful, sleeping 7 hours, last night.

" 25 — AM. Pulse 92. T. 99.4. Jan 25/94. Slept 8 hours, last night. AM. Pulse 100. T. 99. —

" 26 — Jan 26/94. Last night, slept 7 hours; was quiet. Appetite has continued good; bowels regular.

" 27/28 — Jan 27/94. Slept 8 hours last night. AM. Pulse 75. T. 99.4. Jan 28/94. AM. Pulse 88. T. 99.4. Does not seem to realize where he is, or what place this is. Seems bewildered and "lost." —

" 29/30/31 — Jan 29/94. AM. Pulse 100. T. 99.4. Jan 30/94. AM. Pulse 80. T. 100. Jan 31/94 AM. Pulse. T. 99.2. Appetite Good. Bowels regular. — — —

Feb 1/2 — Feb 1/94. AM. Pulse 96. T. 99.2. Weight, today, 184½ lbs. Feb 2/94. AM. Pulse 96. T. 100.

" 3 — Feb 3/94. During the first part of this past week, patient was quiet at night, sleeping 6 hours each night; he is now sleeping better (7 hours) each night. Appetite has continued Good and bowels regular. Still seems bewildered & "lost"; does not realize where he is. Speech is still

" 24 — incoherent. Is quiet & well-behaved. Habits are clean. Feb 24/94. Appetite good; bowels regular. Is well-behaved. Speech is incoherent, showing delusions. In fairly good physical condition.

" 25 — Feb 23/94. This 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 Olmsted County. Feby 28/94. No noticeable change. —

Mar 1/31 — March 1/94. Appt 184 lbs. - Pulse 76. March 31/94. Apparently rests and sleeps well, at night. Appetite good; bowels regular. Is well-behaved. Talks incoherently & still shows delusions. Habits clean. Does no work.

Apl 1/30 — Apl 2/94. Wt 184 lbs; Pulse 78. Apl 30/94. Seems to rest and sleep well, at night. Appetite is

1894

Cont'd

Apl 30 — good; bowels apparently regular. Is restless, by day. Appears lost & confused. Incoherent in speech. Still shows delusions. Memory is very poor. Habits are clean & tidy. —

May 1/31 — May 1/94. Wt 185½ lbs. Pulse 76. May 31/94. Appetite fairly good; bowels regular. Wanders aimlessly about; seems lost & bewildered; does not seem to realize anything. Shows delusions; talks incoherently; (was 2 Days dirty, during the month). — — — — — "

June 2/19 — June 2/94. Weight 140 lbs (a considerable loss of flesh during the past month). Pulse 78. June 19/94. During the past 2 weeks, in 5 nights, he has been restless the greater part of each night & has slept very lowly.

" 21 — June 21/94. Was today transferred to B4. Attendant on B4 remarks that he had a severe contusion

" 25 — under the right eye, which was much discolored. June 25/94. During the past two days & today, he is very restless & does not apparently realize anything; talks incoherently. Appetite fair; bowels regular.

" 26 — Sleeps well; makes no complaints. June 26/94. Patient was seized with convulsions about 1 o'clock this morning; became unconscious & remained so for about an hour; on recovering from the state of stupor, he began throwing his arms around, accompanied by a "catching" of the breath; was

" 27 — apparently suffering great pain. June 27/94. Continues his "aimless" motion of the arms and hands, grasping the bed-clothes; catching his breath & running out his tongue at each respiration. He appears to be paralyzed on the left side, to some extent. Was restless all night,

" 30 — and is getting weaker. June 30/94. Patient continues to grow weaker & is failing otherwise.

July 1 — July 1/94. For past 3 days patient has been unable to swallow anything, even water & today he has taken milk freely. He is very weak and low this morning — Cannot live much longer. 1 P.M. Continued to fail rapidly & died at this hour.

— Died —

Personal and Medical History of Emery L. Obert

HERBERT, FICKLIN & CHAMBERS, DAVENPORT, IOWA



Whole No. 3638.
No. for Year, 208
Residence, Edina Mills, Minn
Insane Relatives, Grandfather had "fits" (previous history)
Date Admission, 23rd January 1894
Cause Exciting, not stated; (Masturbation?)
Admitted by, Dr Kilbourne Hour, 10 AM
Cause Predisposing, heredity & previous attack
How Sent, John K. Steele, Jof P. Hennepin County
Form,
Sex, Male
Accompanying Bodily Disorder, none mentioned
Age, 26 Years
Suicidal or Not, unknown
Civil Condition, single
Date of this Attack, about a month ago
Children, none
Duration, about a month.
Age Youngest Child, —
No. of Attack, 2nd (probably).
Occupation, Farmer
No. of Admissions, 2nd (here before 1884 5 yrs 0 ds)
Degree Education, is partially educated
Age First Attack, 17 years.
Profession Religion, not a Church member
Time of Leaving, Dec 25th 1900
Habits, not intemperate
Time in Hospital, 6 yrs: 11 mos: 2 Ds.
Nativity, St Joseph, Minnesota (father unknown; mother (Indiana)
Result, Died: Interstitial Tuberculosis
Physicians Committing, A.B. Sweitzer & A.A. Avery
remains were removed by father.
Correspondents, (father) Wm W. Obert, Edina Mills.
Has no family Physcn.

EXAMINATION ON ADMISSION.

Exd by Dr Herzog, Febr 3/94

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, fairly clear, at present
Quick or Sluggish, somewhat sluggish

MEMORY:
Past Events, fairly good
Recent Events, fairly good
Special Subjects, denies the assault on officer notes in Newspaper clipping

PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, In the main, correct.

REASONING POWER:
Ordinary Subjects, quite good
Own Mental State, poor.
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent, yes
Exalted, very slightly —
Depressed,

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

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, At times incoherent; but
Voluble or Reticent, In the main, coherent, fairly free.

Personal and Medical History of Emery L. Obert

TRIED TO SHOOT AND STAB

DEPUTY WALD'S EXPERIENCE

He Arrests a Crazy Man at Edina Mills After a Tough Struggle—Court Notes.

Deputy Sheriff John Wald had a very narrow escape from death this morning, and thought of a good many things when a revolver, with its chambers loaded, was shoved into his face, with the gleaming, excited eyes of a maniac shining revengefully behind it.

W. W. Obert, a farmer, living near Edina Mills, had filed a complaint against his son Emery, aged 26, and Wald was sent to make the arrest this morning. When he reached the house he had a talk with the father and was presently ushered into a room where the insane man was standing. He succeeded in getting the young fellow into a corner of the room, and then told him what he wanted. With an exclamation the insane man pulled out the revolver he had in his pocket, saying that he would not go. Quick as a flash Wald seized the uplifted hand and forced it down, taking the revolver away. Young Obert then drew his pocket knife and attempted to stab Wald with it. Foiled in this, he was finally induced to enter the cutter with Wald, and the two commenced a very exciting nine-mile ride, with the thermometer 6 below zero. It was after 11 o'clock when they reached the court house, Obert was at once examined in the probate court.

Obert's answers were very vague and unsatisfactory in his examination, he claiming to have been mixed up in tricks and politics, although he could not say how. He was ordered committed to the asylum at Rochester.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

WEIGHT, 131½ pds NUTRITION, rather poor.
...RMALITIES, Scar on left foot.
... quite marked Coatings, lightish, at base Promptness Movement, prompt
... Equal Size, somewhat dilated
...ght, Excessive Accommodation, Excessive
...od
... Normal
...ns, } not seemingly injured, by usual tests.
...s, }
... slight Tongue, quite marked
...cles, some of eyelids General, none
... Equal — about q — to light scale.
... ...us. —
... ... drawling.

No. 3638. Emery L. Obert. Vol. 27.

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

Minneapolis
Minn
In case of illness. July 8/99 (Father's address)

... Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 80 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; some history of scrofula in Aunts' Children.
Father or Pat. Relations, Father living — claims healthy.
Brothers or Sisters, 2 sisters died of Consumption —

ROBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA



Whole No. 3638.
Residence, Edina Mills, Minn
Date Admission, 23rd January 1899
Admitted by, Dr Kilbourne Hour, 10 AM.
How Sent, John A. Steele, Jof P. Hennepin County
Sex, Male
Age, 26 Years
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, Farmer
Degree Education, is partially educated
Profession Religion, not a church member
Habits, not intemperate
Nativity, St Joseph, Minnesota / father's unknown; mother's (Indiana)
Physicians Committing, H.B. Sweetzer & H.A. Avery
Correspondents, (Father) Wm W. Obert, Edina Mills.
Has no family Physician.

No. for Year, 208
Insane Relatives, Grandfather had fits
Cause Exciting, not stated; (Masturb
Cause Predisposing, heredity & previ
Form,
Accompanying Bodily Disorder, none
Suicidal or Not, unknown
Date of this Attack, about a month
Duration, about a mo
No. of Attack, 2nd (probable
No. of Admissions, 2nd (
Age First Attack, 17 years
Time of Leaving, Dec
Time in Hospital, 6 y
Result, Died.
remains were remo



WON'T SHE?
have some sugar in your tea.

providing work on the streets, for under
e charter this is taken care of by the Aldermen
nds, that are controlled by the Aldermen
d street commissioners. Nor is it
ossible to do any public work
the way of any general improvements.
n account of the deep frost. Public work
being done in New York, in Chicago, in
uffalo and in cities to the south, because
ground is in condition to be worked.
ith a frost line now almost five
et deep the mayor doubts whether
ould be possible to undertake any
ublic work, even were the city treasury in
onditionto stand it. In Montreal about
,000 is spent every winter in cleaning
ow off the streets, but that work in Min-
apolis, for reasons already stated, comes
under the aldermen and street commis-
oners.

THE WEATHER OFFICE
Minneapolis Should Have the Best in the Northwest.

EXAMINATION ON ADMISSION.
Exd by Dr. Herzog, Febry 9th
MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, fairly clear, at present
Quick or Sluggish, somewhat sluggish
MEMORY:
Past Events, fairly good
Recent Events, fairly good
Special Subjects, denies the assault on officer noted in newspaper clipping
PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, In the main, correct.
REASONING POWER:
Ordinary Subjects, quite good
Own Mental State, poor.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent, yes
Exalted, very slightly —
Depressed,
DELUSIONS:
Systematized or Not, unsystematized
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, At times incoherent; but
Voluble or Reticent, In the main, coherent; fairly fee.

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

HEIGHT, 5ft 7in WEIGHT, 131 pds NUTRITION, rather poor.
WOUNDS OR ABNORMALITIES, Scar on left foot.
TONGUE, Tremors, quite marked Coatings, Lightish, at base Promptness Movement, prompt
PUPILS, Equality, Equal Size, somewhat dilated
Response Light, Excessive Accommodation, Excessive
SIGHT, Good
HEARING, Normal
COORDINATION, Arms, } Not seemingly impaired, by usual tests.
Legs, }
TREMORS, Hands, slight Tongue, quite marked
Facial Muscles, some of eyelids General, none
REFLEXES, Patellar, Equal — about 4 — on 6th scale.

Case No. 3638. Emery L. Obert. Vol. 27.

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

Minneapolis
Minn
In case of illness. July 8/99 (Father's address)

BOWELS, Normal, Clean, Careless,
Constipated, Irregular,
APPETITE, Good, Medium, Poor,
SLEEP, Good, Poor, Irregular,
PULSE, 80. 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; Some history of scrofula in Aunts' Children.
Father or Pat. Relations, Father living — claims healthy.
Brothers or Sisters, 2 sisters died of Consumption —

Personal and Medical History of Emery L. Obert

OBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3638.

No. for Year, 208

Residence, Edina Mills, Minn

Insane Relatives, Grandfather had "fits"

Date Admission, 23rd January 1899

Cause Exciting, not stated; (Master

Admitted by, Dr. Kilbourne Hour, 10 A.M.

Cause Predisposing, heredity & previ

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

Form,

Sex, Male

Accompanying Bodily Disorder, none

Age, 26 Years

Suicidal or Not, unknown

Civil Condition, single

Date of this Attack, about a week

Children, none

Duration, about a w

Age Youngest Child, —

No. of Attack, 2nd (probably

Occupation, Farmer

No. of Admissions, 2nd (

Degree Education, is partially educated

Age First Attack, 17 yea

Profession Religion, not a church member

Time of Leaving, Dec

Habits, not intemperate

Time in Hospital, 6 y

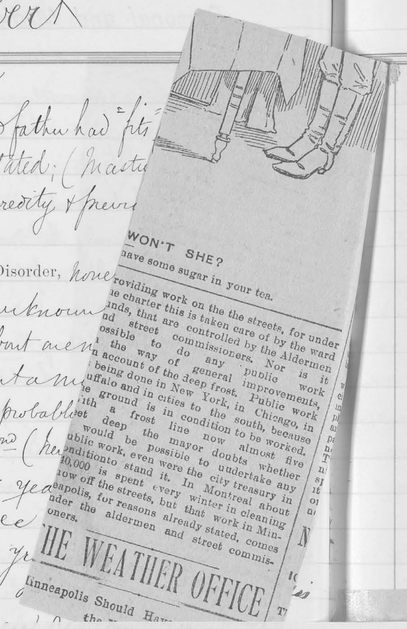
Nativity, St Joseph, Minnesota / father's nativity unknown; mother's (Bohemia)

Result, Died

Physicians Committing, A.B. Lewerenz & A.A. Arnes

Correspondents, (Father) Wm W. Obert, Edina M

Has no family Physician.



WON'T SHE?

have some sugar in your tea.

providing work on the streets, for under
is taken care of by the ward
charter this is controlled by the Aldermen
nds, that are controlled by the Aldermen
d street commissioners. Nor is it
the way of any public work
ossible to do any general improvements,
account of the deep frost. Public work
being done in New York, in Chicago, in
uffalo and in cities to the south, because
e ground is in condition to be worked.
ith a frost line now almost five
would be deep the mayor doubts whether
ublic work, even were the city treasury in
ondition to stand it. In Montreal about
10,000 is spent every winter in cleaning
ow off the streets, but their work in Min-
eapolis, for reasons already stated, comes
nder the aldermen and street commis-
oners.

THE WEATHER OFFICE

Minneapolis Should Hav

EXAMINATIO

Exd by Dr. Herzog, February 1899

MENTAL

MENTAL ACTIVITY:

Clear or Confused, fairly clear, at present

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, fairly good

Recent Events, fairly good

Special Subjects, denies the assault in office notes in newspaper clipping

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, In the main, correct.

REASONING POWER:

Ordinary Subjects, quite good

Own Mental State, poor.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

✓

EMOTIONAL STATE:

Normal, Calm,

Indifferent, yes

Exalted, very slightly —

Depressed,

DELUSIONS:

Systematized or Not, unsystematized

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, At times incoherent; but

Voluble or Reticent, In the main, coherent; fairly free.

Personal and Medical History of Emery L. Obert

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7in WEIGHT, 131½ lbs NUTRITION, rather poor.

WOUNDS OR ABNORMALITIES, Scar on left foot.

TONGUE, Tremors, quite marked Coatings, lightish, at base Promptness Movement, prompt

PUPILS, Equality, Equal Size, somewhat dilated

Response Light, Excessive Accommodation, Excessive

SIGHT, Good

HEARING, Normal

COORDINATION, Arms, } Not seemingly impaired, by usual tests.
Legs, }

TREMORS, Hands, slight Tongue, quite marked

Facial Muscles, some of eyelids General, none

REFLEXES, Patellar, Equal — about 9 — on 5th scale.

[illegible] Somewhat drawling.

[illegible] Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, 80 RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Present attack ONSET GRADUAL OR SUDDEN, —

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

Mother or Mat. Relations, Mother living; some history of neurotic in Aunts' Children.

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

Brothers or Sisters, 2 sisters died of Consumption —

Emery Obert's friends may
notified at
613 Nicollet Av.
Minneapolis
Minn
In case of illness. July 8/99 (Father's Address)

Personal and Medical History of Emery L. Obert

OBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3638.

Residence, Edina Mills, Minn

Date Admission, 23rd January 1892

Admitted by, Dr Kilbourne Hour, 10 AM.

How Sent, John N. Steele, Jef C, Hennepin County

Sex, Male.

Age, 26 Years

Civil Condition, single

Children, none

Age Youngest Child, —

Occupation, Farmer

Degree Education, is partially educated

Profession Religion, not a church member

Habits, not intemperate

Nativity, St Joseph, Minnesota / father unknown; mother (Indiana)

Physicians Committing, A.B. Sweetzer M.D.

Correspondents, (Father) Wm W. Obert, Ed

Has no family Physcn.

No. for Year, 208

Insane Relatives, Grandfather had fi

Cause Exciting, not stated; (Mas

Cause Predisposing, heredity & pre

Form,

Accompanying Bodily Disorder, h

Suicidal or Not, unknown

Date of this Attack, about a

Duration, about a

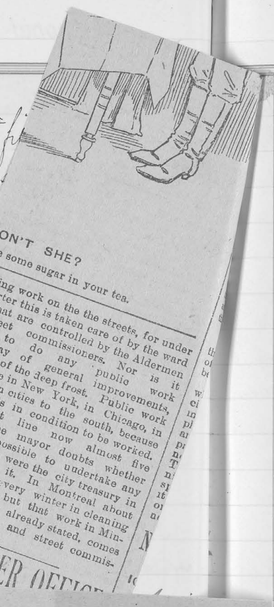
No. of Attack, 2nd (pro

No. of Admissions, 2nd

Age First Attack, 17

Time of Leaving, D

Time in Hospital,



EXAMINA

Exd by Dr. Herzog, February

MENTAL ACTIVITY:

Clear or Confused, fairly clear, at present

Quick or Sluggish, somewhat sluggish

MEMORY:

Past Events, fairly good

Recent Events, fairly good

Special Subjects, Denies the assault in office noted in Newspaper Clippings

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, In the main, correct.

REASONING POWER:

Ordinary Subjects, quite good

Own Mental State, poor.

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

DELUSIONS:

Systematized or Not, unsystematized

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, At times incoherent; but

Voluble or Reticent, In the main, Coherent, fairly fee.

Personal and Medical History of Emery L. Obert

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7in WEIGHT, 131½ pds NUTRITION, rather poor.

WOUNDS OR ABNORMALITIES, Scar on left foot.

TONGUE, Tremors, quite marked Coatings, lightish, at base Promptness Movement, prompt

PUPILS, Equality, Equal Size, somewhat dilated

Response Light, Excessive Accommodation, Excessive

SIGHT, Good

HEARING, normal

COORDINATION, Arms, } not seemingly impaired, by usual tests.
Legs, }

TREMORS, Hands, slight Tongue, quite marked

Facial Muscles, some of eyelids General, none

REFLEXES, Patellar, Equal — about q — 2nd 3rd scale.

Other Reflexes, Right ankle Clonus. —

ARTICULATION, Hesitating, Slurred, somewhat drawling.

FACIAL EXPRESSION, normal

SENSIBILITY, ✓

HEART, a little irregular; but no murmurs

LUNGS, seem good —

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,		Clean,	Careless,
BOWELS, Normal,		Constipated,	Irregular,
APPETITE, Good,	Poor	Medium,	Poor,
SLEEP, Good,	Poor	Poor,	Irregular,
PULSE, 80		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; some history of scrofula in Aunts' Children.

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

Brothers or Sisters, 7 sisters died of Consumption —

EGBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought up to this Hospital, this morning, by Mike Donahue, night Policeman of Rochester; (he having got away from the Deputy Sheriff of Hennepin County, while at the Depot the Evening previous); the following history accompanied patient. (see also Newspaper Clipping attached). Acts consanguinity unknown; grandfather is said to have had "fits". This is probably 2nd attack. one occurring about 5 years ago, when he was confined in this hospital for about one year. ① First symptoms of this attack were manifested about one month ago. The disease seems increasing. No information obtained as to rational intervals, or if any, how they occur. Derangement is now shown by sexual perversion. Patient has shown a disposition to injure others, if suicidal, unknown. He has no filthy or destructive habits. There is no history of intemperance nor of any severe disease &c or injury to head. On personal examination, patient talked incoherently, dwells on sexual matters: not excited, but thinks himself surrounded by electricity and is anxious, about, to visit houses of ill-repute. Was quite excited, at the end, and wished to leave. From other sources, it is learned that, at his village of residence, he accosted all women with lewd proposals &c.

Note ① Patient was here before from May 10/89 to May 12/90. During that stay, he adhered strongly to the delusion that "his nerves were undermined" and that he could not live long. Also held the delusion that tonics given for him were poisoned, so he refused them. About the 9th month of his stay, he seems to have given up these delusions "about dying" and "other foolish Ideas" he said he had. Began to improve and kept this up. Was, at all times, very neat and tidy: helped with the work, and, on going home, was in good physical condition. Mental state quite good. (Vol 17. f. 79. No 2059)

Jan 23 — Jan 23/94. On admission, was put on B.T. (S.R. Complexion light; hair dark; eyes gray; condition of skin good; some scars on left foot; bodily Condition dirty. Behavior good). Pulse 74. T(e) 99.6. R 16. PM. Pulse 76. T(e) 99.4. Jan 24/93. Was fairly restful, Sleeping 7 hours, last night. — AM Pulse 72. R 18. T(e) 99.8. Appetite medium; is restless, walking about hall, a good deal of the time. Talks freely. Is deluded to the extreme. "Wants to go home". PM Pulse 70. T(e) 99.4. No cough noted.

" 25 — Jan 25/94. Was restless for 2 hours, Slept 6 hours, last night. AM Pulse 70. R 17. T(e) 99.4. Appetite medium. Is restless by day; shows delusions. PM Pulse 68. T(e) 99.6. Says "he is going to run away, at the first opportunity. Jan 26/94. Slept well (8 hours) last night. AM Pulse 68. R 16. T(e) 98.8. No change in

" 26 — conduct or behavior, by day. PM Pulse 66. T(e) 99.4. Jan 27/94. Slept 7 hours, last night. AM. Pulse.

" 27 — Appetite good. Walks restlessly about ward. Is deluded. Jan 28/94. Slept 8 hours last night; was quiet.

" 28 — AM. Pulse 70. Jan 29/94. AM. Pulse 68. Jan 30/94. AM. Pulse 68. Still shows delusions.

" 29/30 — Katie is well-behaved. Jan 31/94. Since last noted, patient has been sleeping well (8 hours) each

" 31 — night. Is quite well behaved. Appetite is good. Walks about hall; reads some. Personal habits good.

Feb 1/2 — Feby 1/94. Wt today, 130 lbs. Feby 2/94. Would not have his photograph taken today, as "he was afraid it

" 6 — would hurt someone". Feb 6/94. During past week, sleep most at night have been good, he sleeping 7 to 8 hours, each. Pulse has been about normal. Appetite good. Is stubborn, at times; will not go out walking with the rest: does no work. Talks considerably, but makes no complaints. Still manifests delusions; says "he loves all the girls"; "wants to get married". Habits are good.

" 7/23 — Feb 7/94. Sleeps 3 hours, Sleeping only 5 hours, last night. Feb 23/94. Behavior generally good. Appetite good: bowels seem regular. Always wanting to go home. Still shows delusions.

" 24 — Feb 24/94. This patient was committed here under the "law of 1893" recently declared unconstitutional.

1894 Feb 24 — Feb 24/94. He was, today, Taken Out and Returned under "New Warrant" from Olmsted County. Feb 28/94. Appetite good; is well-behaved; Works some on the ward. Wants very much to go home. Still shows delusions. Writes occasional letters (see one attached)—

Mar 2/31 — March 2/94. Wt 128½ lbs. Pulse 64. March 31/94. No material change. Is very anxious to get out. Is in quite good physical condition. Habits are clean. Helps with ward-work.—

April 2/94. Wt 132 lbs. Pulse 64. April 5/94. Tried to run away today, but was not successful.

" 16 — April 16/94. Ag[illegible] he got away very far.—

" 20 — April 30/94. E[illegible] wants very badly to get away and has to be most c[illegible] times. Works some in the hall.

May 1/28 — May 1/94. Wt. 13[illegible] ge. Well-behaved. Very impatient; wants to go hom[illegible] nferred to VBI

" 30 — May 30/94. Whi[illegible] was caught after a short chase. Appetite poor; [illegible] says "that the people in Minneapolis are all dead" [illegible] physical health. Habits are cleanly.

June 1/30 — June 1/94. Wt 12[illegible] till very anxious to go & tries to escape.—

July 4/27 — July 4/94. Wt 12[illegible] shows delusions; "thinks the food is drugged"—[illegible] en mean & obstinate disposition.—

Aug 1/31 — Aug 1/94. Wt 12[illegible] v. Behaves well. Appetite fair. Breathes sluggish[illegible] ks of committing suicide, in

Sept 3 — different ways. [illegible] th). Pulse 74. Appetite is de-creasing. Behav[illegible] Suicide". Does a little work.

" 11 — Was, today, trans[illegible] sions. "Thinks some one is poisoning

" 12 — him". Has not [illegible] poor; drank some milk; is

" 14/18 — strongly deluded [illegible] 94. Has steadily & persistently refused meat, but [illegible] nally. Tried to escape, while

" 20/24 — out walking, fod[illegible] of days. Sept 24/94. Ate no breakfast or supper [illegible] uld not eat any dinner or supper. "Says there is poison in the food".

" 23 — Sept 24/94. Would [illegible] starve himself to death".—

" 25 — Sept 25/94. Ate no bre[illegible] ins. Wants to die or to go home".—

" 28 — Sept 28/94. Appetite [illegible] ed today. Oct 5/94. Feeding has

" 30 — been continued. Patient [illegible] wants quite lame. Eats, but very moderately.

Oct 1/5 — Oct 1/94. Wt 112 [illegible]

" 7 — Oct 7/94. Quit eating altogether today - "Wants to starve. Walks lame & complains of pains in back,

" 10 — & hips. Oct 11/94. Drank a cup of milk, for breakfast. Transferred to C[illegible]. Is much emaciated and

" 11 — runs down. Was put to bed. Is also very weak. Ate a light dinner & supper. Bowels act, 2x twice.—

" 12 — Oct 12/94. Ate a very light breakfast & dinner; no supper, at all: bowels costive; has severe pains in hips.—

" 13/14 — Oct 13/94. Bowels still costive; appetite very poor; patient appears very weak. Oct 14/94. Slept only 3 hours, last night. Complains of hip being very painful. Eats very sparingly: Is on extra Diet. Says "he wants to starve".

" 18 — Oct 18/94. Has been sleeping 4 to 5 hours, nightly. Has also been eating fairly well. Bowels have been

" 19 — moved by aid of Cascara. Patient has "crying spells" quite frequently. Oct 19/94. Has eaten poorly

(Carried to page 130)

Miss Cute Craik
Edna Mills
Minn
and being scared to death everything I ate and drank with poison in it & asked your father different times if he wanted me to stop coming there to the store so often and he gave me no answer he silently has done wrong with me and ever body around there they surly have told him that is not so about me I hope you will look and think this matter over and see that you have done wrong by sending me here and send for me to come home at once I will not let tricks deceive me against will not go by them for my mind is only in plain spoken words I never dreampt of being sent here against please send at once for me to come home I hope this will find you all well as I am and once how is my folks now I will close for this time Love to all Emery Obert
distant Rochester Olmsted

1894

This patient was brought up to this Hospital, this morning, by Mike Donahue, night Policeman of Rochester; (he having got away from the Deputy Sheriff of Hennepin County, while at the Depot the Evening previous); the following history accompanied patient. (see also Newspaper "Clipping" attached). As to consanguinity not known; grandfather is said to have had "fits". This is probably 2nd attack. ⊕ First one occurring about 5 years ago, when he was confined in this hospital for about one year. First symptoms of this attack were manifested about one month ago. The disease seems increasing. No information obtained as to rational intervals, or if any, how they occur. Derangement is now shown by sexual perversion. Patient has shown a dis... He has no filthy or destructive habits. There is no hi... or injury to head. On personal examinat... sexual matters: not excited, but thinks himself ... resort houses of ill-repute. Was quite excited, at ... it is learned that, at his village of residence, he acc...

Note ⊕ Patient was here before from May 10/89 to May 12/... the delusion that "his nerves were undermined" and ... that tonics given for him were poisoned, so he refu... seems to have given up these delusions about Dyn... Began to improve and kept this up. Was, at all ti... and, on going home, was in good physical condit...

Jan 23 Jan 23/94. On admission, was put on B.T. {S.R. ... of skin good; some sears on left foot; bodily condition ...
" 24 A.M. R 16. P.M. Pulse 76. T(e) 99.4. Jan 24/93. Has fa... A.M. Pulse 72. R 18. T(e) 99.8. Appetite medium; is ... time. Talks freely. Is deluded as to the absence. "Wants ...
" 25 Jan 25/94. Was restless for 2 hours, slept 6 hours, last night. Is restless by day; shows delusions. P.M. Pulse 68. T...
" 26 opportunity. Jan 26/94. Slept well (8 hours) last ...
" 27 conduct & behavior, by day. P.M. Pulse 66. T(e) 99.
" 28 Appetite good. Walks restlessly about ward. Is deluded.
" 29/30 A.M. Pulse 70. Jan 29/94. P.M. Pulse 68. Jan ...
" 31 Patient is well-behaved. Jan 31/94. Since last noted ... night. Is quite well behaved. Appetite is good. Was ...
Feb 1/ Feb 1/94. Wt. today, 130 pds. Feb 2/94. Would rest have his photograph taken today, as he was afraid it
" 6 would hurt someone". Feb 6/94. During past week, sleep & rest at night have been good, he sleeping 7 to 8 hours, at each. Pulse has been about normal. Appetite good. Is stubborn, at times; will not go out walking with the rest; does no work. Talks considerably, but makes no complaints. Still manifests delusions; says "he loves all the girls"; "wants to get married". Habits are good.
" 7/13 Feb 7/94. Restless 3 hours, Sleeping only 5 hours, last night. Feb 23/94. Behavior generally good. Appetite good; bowels seem regular. Always wanting to go home. Still shows delusions.
" 24 Feb 24/94. This patient was committed here under the law of 1893 recently declared unconstitutional

and the other neighbors around there to keep me going out to the Mills and I should think you could see you hadn't done enough by ~~any~~ letting me come here as I was afraid of your being killed in some ~~any~~ way and I wanted to speak to you if I possible could while I lived anyway as times are now it was very uncertain of your being safe any where you went and I was worried all the time about you and your folks and my folks as my passion of love for you was so strong a weak and sobed heart is the worst kind of a disease by so much worring I dont ... me what ever took it in your hearts to let me come here my mind was as good as anybodys as far as doing ... of hurting any one was concerned but ... doing any harme whatever to anybody it was because I was forgetful and ... and nervous by so much worring and trouble and ~~Vapors~~ vapors of the braine you know very well I haven't attempted to do you any harme in any way I have always treated you with the greatest of respect and all of your folks and everybody around there I cant see any reason for your father and my folks sending me here whatever or anybody else cant tell that way if they take it in consideration as they should do why didnt you explane to me plainer what you ... sent by sending me here and try and prevent it it seemed to me that you loved to see me suffer I will change my opinion of the neighbors if they don't help me out of here for I can see that they are to blame for it any body ought to see that I am for you every thing will be all wright and safe do for mercy sake send for me to come home I cant stand this confinement and worring

1894 Feb 24 Feb 24/94. He was, today, Taken Out and Returned under "new Warrant" from Olmsted County. Feb 28/94. Appetite good; is well-behaved; Works some in the ward. Wants very much to go home. Still shows delusions. Writes occasional letter (see one attached).—
Mar 2/31 March 2/94. Wt 128½ lbs. Pulse 84. March 31/94. No material change. Is very anxious to get out. Is in quite good physical condition. Habits are clean. Helps with ward-work.—
Apl 2/15 April 2/94. Wt 132 lbs. Pulse 84. April 5/94. Tried to run away today, but was not successful. April 16/94. Again attempted to escape today, but was caught before he got away very far.— ... still shows delusions. Wants very badly to get away and ... seeking, as well as at other times. Works some in the hall. ... not much, if any, change. Well-behaved. Is very impatient; ... ing. Was today, transferred to V.B.t. ... to make his escape: was caught after a short chase. ... ral. Shows delusions; says that the people in Minneapolis ... Is in quite good physical health. Habits are cleanly. ... noticeable change. Is still very anxious to go & tries to escape— ... about the same. Still shows delusions; "thinks the food ... entrance. Is of a rather mean & obstinate disposition.— ... Pulse 92. Aug 31/94. Behaves well. Appetite fair. ... quite frequently. Talks of committing suicide in ... of 7 lbs, in past month). Pulse 74. Appetite is de- ... seeking of committing suicide". Does a little work. ... refuses to eat. Shows delusions. "Thinks some one is poisoning ... food. Sept 1/94. Appetite poor; drank some milk; is ... yesterday & today. Sept 9/94. Has steadily & persistently ... refuses some milk, occasionally. Tried to escape, while ... refusing food, for a number of days. Sept 22/94. Ate no ... milk in morning. Would not eat any dinner or supper. ... forced to take dinner & supper. "Says there is poison in the food." ... supper. Says "he wants to starve himself to death".— ... being coaxed. Full of delusions. "Wants to die & to go home".— ... (4th). Pulse 62. Had to be fed today. Oct 5/94. Feeding has ... become. Oct 7/94. Walks quite lame. Eats, but very moderately. ... refuses to starve. Walks lame & complains of pains in back, ... 10 Oct 10/94. Quit using abdominal sling.— Appetite poor.
" 11 & hips. Oct 11/94. Drank a cup of milk, for breakfast. Transferred to C². Is much emaciated and run-down. Was put to bed. Is also very weak. Ate a light dinner & supper. Bowels are active.—
" 12 Oct 12/94. Ate a very light breakfast & dinner; no supper, at all; bowels active; has severe pains in hips.—
" 13/14 Oct 13/94. Bowels still costive; appetite very poor; patient appears very weak. Oct 14/94. Slept only 3 hours, last night. Complains of hip being very painful. Eats very sparingly; does not take Diet, says "he wants to starve".
" 18 Oct 18/94. Has been sleeping 4 to 5 hours, nightly. Has also been eating fairly well. Bowels have been
" 19 moved by aid of Cascara. Patient has "crying spell" quite frequently. Oct 19/94. Has eaten poorly

(carried to page 130)

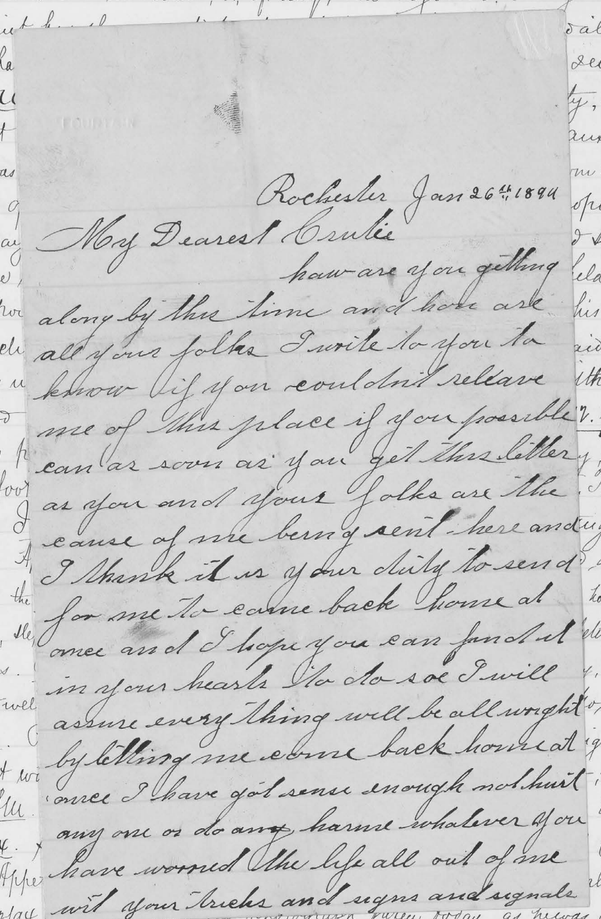
LOBERT, FICKAR & CHAMBERS, DAVENPORT, IOWA.

1894
April

This patient was brought up to this Hospital, this morning, by Mike Donahue, night Policeman of Rochester; (he having got away from the Deputy Sheriff of Hennepin County, while at the Depot the Evening previous); the following history accompanied patient. (see also Newspaper "Clipping" attached)
No consanguinity put now; grandfather is said to have had "fits". This is probably 2nd attack. one occurring about 5 years ago, when he was confined in this hospital for about one year. ⊛ First symptoms of this attack were manifested about one month ago. The disease seems increasing. No information obtained as to rational intervals, or if any, how they occur. Derangement is now shown by sexual perversion. Patient h[illegible] dal, inclium. He has no filthy or destructive ha[illegible] severe disease &c or injury to head. Otherwise [illegible] ty, dwells on sexual matters: not excited, but [illegible] ausions, Afraid, of evil houses of ill-repute. Was [illegible] on other sources, it is learned that, at his village o[illegible] sposals &c.

Note ⊛ Patient was here before from [illegible] strongly to the delusion that "his nerves were [illegible] held the delusion that tonics given for him were poi[illegible] his stay, he seems to have given up these delu[illegible] said he had. Began to improve and kept this u[illegible] with the work, and, on going home, was in good [illegible] (V. P. 79. No 2059)

Jan 23 — Jan 23/94. On admission, was f[illegible]; emotion of skin good; some fears me left foo[illegible] 99.6.
" 24 — R 16. PM. Pulse 76. T(e) 99.4. [illegible] AM Pulse 74. R 18. T(e) 99.8. A[illegible] time. Talks freely. Is deluded to th[illegible] deal of the
" 25 — Jan 25/94. Was restless for 2 hours, sle[illegible] to cough noticed. Is restless by day; shows delusions. [illegible] ete mucrin.
" 26 — opportunity. Jan 26/94. Slept well[illegible], at the first
" 27 — conduct or behavior, by day. PM. C[illegible] change in
" 28 — Appetite good. Walks restlessly about wi[illegible] ight. Ill. P65.
" 29/30 — AM. Pulse 70. Jan 29/94. Ill[illegible]; was quiet.
" 31 — Rests well-behaved. Jan 31/94. [illegible] delusions.
Feb 1 — Feb 1/94. Pt. today, 130 pds. Feb 2/94. [illegible] (8 hours) each night. Is quite well behaved. Appe[illegible] l habits good.
" 6 — owned hurt someone". Feb 6/94. During past week, sleep & rest at night have been good, he sleeping 7 to 8 hours, ea each. Pulse has been about normal. Appetite good. Is stubborn, at times; will not go out walking with the rest; does no work. Talks considerably, but makes no complaints. Still manifests delusions; says "he loves all the girls"; "wants to get married" - Habits are good.
" 7/13 — Feb 7/94. Rested 3 hours, sleeping only 2 hours, last night. Feb 23/94. Behavior generally good. Appetite good; bowels seem regular. Always wanting to go home. Still shows delusions.
" 24 — Feb 24/94. This patient was committed here under the law of 1893 recently declared unconstitutional.



Rochester Jan 26th 1894

My Dearest Emilie

how are you getting along by this time and how are all of you folks. I write to you to know if you could not release me of this place if you possible can as soon as you get this letter as you and your folks are the cause of me being sent here and right. — I think it is your duty to send for me to come back home at once and I hope you can find it in your hearts to do so. I will assure every thing will be all right by letting me come back home at once I have got sense enough not hurt any one or do any harme whatever if you have worried the life all out of me with your tricks and signs and signals

1894
Feb 28 Cont'd

Feb 28/94. He was, today, Taken Out and Returned under "new Warrant" from Olmsted County. Feb 28/94. Appetite good; is well-behaved; Works some in the ward. Wants very much to go home. Still shows delusions. Writes occasional letter (see one attached) —
Mar 2/31 — March 2/94. Wt 128½ pds. Pulse 84. March 31/94. No material change. Is very anxious to get out. Is in quite good physical condition. Habits are clean. Keeps with ward-work. —
Apl 2/5 — April 2/94. Wt 132 pds. Pulse 84. April 5/94. Tried to run away today, but was not successful.
" 16 — April 16/94. Again attempted to escape today, but was caught before he got away very far. —
" 30 — April 30/94. Appetite good. Talks freely, but still shows delusions. Wants very badly to get away and has to be most carefully watched while out walking, as well as at other times. Works some in the hall.
May 1/8 — May 1/94. Wt. 132½ pds. Pulse 74. May 18/94. Not much, if any, change. Well-behaved. Is very impatient; wants to go home. Requires constant watching. Was today, transferred to B3 —
" 30 — May 30/94. While out walking, today, he tried to make his escape: was caught after a short chase. Appetite poor; bowels regular. Is quite forgetful. Shows delusions; says "that the people in Minneapolis are all dead" — Works some in dining room. Is in quite good physical health. Habits are cleanly.
June 1/30 — June 1/94. Wt 132 pds. Pulse 63. June 30/94. No noticeable change. Is still very anxious to go & tries to escape. —
July 4/31 — July 4/94. Wt 128 pds. Pulse 66. July 31/94. About the same. Still shows delusions; "thinks the food is drugged" - Requires close watching while outside. Is of a rather mean & obstinate disposition. —
Aug 1/31 — Aug 1/94. Wt 124 pds (Still losing gradually in flesh). Pulse 92. Aug 31/94. Behaves well. Appetite fair. Is rather sluggish in his ways; requests poisan quite frequently. Talks of committing suicide in different ways. Sep 3/94. Wt 116½ pds (a loss of 7½ pds, in past month). Pulse 74. Appetite is decreasing. Behavior is good. Still frequently talking of committing suicide". Does a little work.
" 11 — Was, today, transferred to B3. Sep 11/94. Refuses to eat. Shows delusions. "Thinks some one is poisoning him". Has not eaten anything now for 3 days. Sep 13/94. Appetite poor; drank some milk; is extremely deluded. Sep 14/94. No change, Yesterday & today. Sep 15/94. Has steadily & persistently refused food, but after considerable urging, drinks some milk, occasionally. Tried to escape, while at walking, today. Sep 20/94 Has taken no solid food, for a number of days. Sep 22/94. Ate no
" 20/22 — breakfast or supper, today. Sep 23/94. Drank some milk in morning. Would not eat any dinner or supper.
" 23 — Sep 24/94. Would not eat any breakfast. Had to be fed & take dinner & supper. "Says there is poison in the food".
" 24 — Sept 25/94. Ate no breakfast; was fed at dinner & supper. Says "he wants to starve himself to death." — —
" 28 — Sep 30/94. Appetite still poor. Will not eat, without being coaxed. Full of delusions. "Wants to die & go home".
Oct 1/5 — Oct 1/94. Wt 112½ pds (lost at 4 pds in past month). Pulse 62. Had to be fed today. Oct 5/94. Feeding has been continued. Patient seems to be very weak & lame. Oct 7/94. Walks quite lame. Eats, but very moderately.
" 10 — Oct 10/94. Quit eating altogether today - "Wants to starve". Walks lame & complains of pains in back & hips. Oct 11/94. Took a cup of milk, for breakfast. Transferred to C3. Is much emaciated and run-down. Was put to bed. Is also very weak. Ate a light dinner & supper. Bowels are costive. -
" 11 — Oct 12/94. Ate a very light breakfast & dinner; no supper, at all: bowels costive; has severe pains in hips. -
" 12/13 — Oct 13/94. Bowels still costive; appetite very poor; patient appears very weak. Oct 14/94. Slept only 3 hours, last night. Complains of his being very painful. Eats very sparingly: Has extra diet. Says "he wants to starve".
" 18 — Oct 18/94. Has been sleeping 4 to 5 hours, nightly. Has also been eating fairly well. Bowels have been moved by aid of Cascara. Patient has "crying spell" quite frequently. Oct 19/94. Has eaten poorly

(carried to page 136)

GIBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3641.
Residence, Municapolis, Minn. –
Date Admission, 25th January 1894.
Admitted by, D. Phelps Hour, 7 P.M. –
How Sent, John H. Steele, Jof P. Hennepin County.
Sex, Male –
Age, 29.
Civil Condition, married
Children, None
Age Youngest Child, —
Occupation, Physician.
Degree Education, Classical Education.
Profession Religion, Catholic –
Habits, addicted to excessive use of Morphine.
Nativity, Baden-Baden, Germany (Parents born in Germany)
Physicians Committing, Chas H. Hunter and C. G. Weston.
Correspondents, (Brother). C. F. Merkle 546 Vine St. Cincinnati, Ohio
Mrs. M. Merkle (Asst Nurses) City Hospital, Minneapolis Minn

No. for Year, 211.
Insane Relatives, None.
Cause Exciting, Morphine
Cause Predisposing, Peritonitis
Form,
Accompanying Bodily Disorder, Chr
Suicidal or Not, not. –
Date of this Attack, Continuous
Duration, Some 9 years
No. of Attack, Many (last tak
No. of Admissions, 1st
Age First Attack, about
Time of Leaving, Apr 2"
Time in Hospital, 2m
Result, Improved

A MORPHINE FIEND.

Dr. Merkle Sent to the Workhouse for Ninety Days.

Dr. George F. Merkle, an opium smoker and morphine fiend, well known to the police and to the people who habituate the slums, was arrested by Patrolmen Merrick and Weld, and yesterday morning they arraigned him before the judge of the police court. He was charged with vagrancy, and, being unable to show cause why he should not be sentenced, the judge sent him to the workhouse for ninety days. Merkle has figured in the police court several times of late. The last time he appeared before the judge was when he stole some article from Webster & Churchill, the druggists. He was allowed to go to the city hospital, but when he came out he became addicted worse than before to the slavish drugs. Some time ago his wife secured a divorce from him. For several years he has been going to the dogs very rapidly. There is scarcely a spot on his body that is not punctured by the little hypodermic syringe which he uses when he desires to imbibe his beloved morphine. At one time the doctor was well off, so far as the world's goods and a practice were concerned. Now he sleeps in alleys and has his office under his hat.

Date Nov 3 1893

EXAMINATION ON ADMISSION.

Ex'd by Dr. Herzog, March 28/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear at present
Quick or Sluggish, Quick
MEMORY:
Past Events, Recent Events, Special Subjects, } Good, now
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Own Mental State, Special Subjects, } Good

GENERAL DESCRIPTIVE REMARKS:
Patient is a well-educated man, but his statements are not to be depended upon.

EMOTIONAL STATE:
Normal, Calm, Yes
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, no delusions noted
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, 5 feet 10 in WEIGHT, 144 pds NUTRITION, Quite fair; very slightly anaemic
WOUNDS OR ABNORMALITIES, See "S. R." on next page.
TONGUE, Tremors, slight Coatings, none Promptness Movement, prompt
PUPILS, Equality, Equal Size, somewhat dilated
Response Light, prompt Accommodation, fairly good.
SIGHT, normal
HEARING, normal
COORDINATION, Arms, Good, by usual tests
Legs, Good " "
TREMORS, Hands, slight Tongue, slight
Facial Muscles, some of Eyelids General, none
REFLEXES, Patellar, Equal – about 8 – Dr. S. scale

Case No. 3641. Chas. F. Mearkle. Vol. 27.

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

ng; no murmurs. –

EXAM. URINE.

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, See history 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 brought out.

Personal and Medical History of Charles F. Markle.

HERBERT, FICKAS & CHAMBERS, DAVENPORT, IOWA

Whole No. 3641.

Residence, Minneapolis, Minn.

Date Admission, 25th January 1894.

Admitted by, D. Phelps Hour, 1 P.M.

How Sent, John H. Steele, Jail, Hennepin County.

Sex, Male.

Age, 29.

Civil Condition, married

Children, None

Age Youngest Child,

Occupation, Physician.

Degree Education, Classical Education.

Profession Religion, Catholic

Habits, addicted to excessive use of Morph

Nativity, Baden-Baden, Germany (Parents born

Physicians Committing, Chas A. Hunter & C. G. U

Correspondents (Brother) C. F. Markle 526 Vine St

Mrs. M. Markle (Asst. Matron) City Hospital, Maple Minn. Cincinnati

No. for Year, 211.

Insane Relatives, None.

Cause Exciting, Morphine Habit.

Cause Predisposing, Peritonitis, 9 years ago

Form,

Accompanying Bodily Disorder, (Has had peritonitis).

Suicidal or Not, not.

Date of this Attack, Continuous, for years.

Duration, Some 9 years.

No. of Attack, Many (Has taken Morphine for years)

No. of Admissions, 1st

Age First Attack, about 20.

Time of Leaving, Apr 2nd 94

1 mo 7d

A statement has gone out that the fine engineers are likely to strike of sympathy for the so-called Pull- boycott, and that meetings looking this end have been held in this city. se statements are all absolutely ndless."

Injunction Against Debs.

NDIANAPOLIS, Ind., July 3.—Two usand men are out here tonight. ge Woods, of the United States rt, this evening issued an injunction nst Debs, the A. R. U., and forty l men who are prominent in the ce, warning them against all inter- nce with the roads entering here.

United States Troops Out.

HEYENNE, Wyo., July 3.—Two com- nies of the Seventeenth Infantry, U. A., stationed at Fort Russell, have n ordered out for duty in Colorado. y left for Denver on a special n this afternoon.

FOREIGN MARKETS.

ecretary Teisburg, of the state rail- l and warehouse commission, has ed the following weekly statement: tement showing the market value No. 1 hard wheat at Duluth, as mpared with actual sale of 8,000 ushels No. 1 hard, made May 11, 1894, Liverpool for London delivery lay or June shipment). Made by the ilroad and warehouse commission: Cents

EXAMINATION ON ADMISSION.

Ex'd by Dr. Herzog, March 28/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear at present

Quick or Sluggish, Quick

MEMORY:

Past Events, Recent Events, Special Subjects, } Good, now

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

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

GENERAL DESCRIPTIVE REMARKS:

Patient is a well-educated man, but his statements are not to be depended upon.

EMOTIONAL STATE:

Normal, Calm, Yes

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, No delusions noted

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Quite free

Personal and Medical History of Charles F. Markle

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

5 feet 10½ in. WEIGHT, 144 pds. NUTRITION, Quite fair; boy slightly anaemic

OR ABNORMALITIES, See "S.R." on next pages.

Tremors, slight Coatings, none Promptness Movement, prompt

quality, Equal Size, somewhat dilated

esponse Light, prompt Accommodation, fairly good.

Normal

Normal

TION, Arms, Good, by usual tests

Legs, Good " "

Hands, slight Tongue, slight

Facial Muscles, some of Eyelids General, none

, Patellar, Equal — about 8 — Dr. O's scale

Other Reflexes,

ARTICULATION, Hesitating, no Slurred, no

FACIAL EXPRESSION, normal now

SENSIBILITY,

HEART, beat somewhat accelerated; 1st sound somewhat too strong; no murmurs.

LUNGS, ✓

EXAM. URINE.

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, See history 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 brought out.

1894

Pe

Personal and Medical History of Charles F. Mearkle

27/73
3 54 1

DETAILED HISTORY OF SICKNESS OF MR. Chas. F. Mearkle
DIAGNOSIS.

1894 C. 2.

DATE	HOUR	PULSE	RESP.	TEMP	
Feby	AM. PM.	AM. PM.	AM. PM.	AM. PM.	
2	7 5	82 96			Very good appetite gr. ¼ of
3	7 5	84 102			gr. 1 "
4	7 5	88 92			gr. 1 "
5	7 5	82 118			gr. 3½ "
6	5	96			Upon ward to gr. 3½ "
7	7 5	100			Take an enem gr. 3 "
8	7 5	96 106			gr. 3 "
9	7 5	96 92			Is up ward p bed the balan Himself and gr. 2½ "
10	7 5	80 90			gr. 2 "
11	7 5	80 88			gr. 2 "
12	7 5	86 96			Slept more du a good deal by
13	7 5	96 98			Slept nightly on an average
14	7 5	82 100			gr. 1½ " Mo
15	7 5	84			Complains of h Rustled but gr. 1½ " Mo
16	7 5	86 96			
17	7 5	80 96			Is very trouble cares, cries and cross, also somewhat inclined to be stubborn. gr. 1 " gr. 1½ "
18	5	92			gr. ½ " Morphine taken to day
19	5	92			gr. ½ " " " "
20					Slept nightly from the 19th to the 26th inst. on an average of 14 hours. In bed part of the time and up on the ward the balance during day
21					
22					
23					
24					
25					
26					

27/73
3 54 1

DETAILED HISTOR

1894

DATE	HOUR	PULSE
Feb	AM. PM.	AM. PM.
26		104
27	5	96
Mar 1	5	100
2	5	86
5	5	106
6	5	90
7	5	112
8	5	104
9	5	80
10	5	112
11	5	112

Jan 25 Jan 29 Skin q
" 26 Pulse 8 Appeti and q of pain
" 27 Jan 2 Bowels
" 28 PM. night
" 29 PM. last of mo
" 30 Coug
" 31 Give Appe
Feb 1 Feb Bow
" 2 give days
" 3 Feb bow
" 4 PM Am of b
" 5 abou

Has bro tory of Never be is all p Patient accuse 9 year under Cannot Did no

quiet & restful night. Sleeping 7 hours. AM. Pulse 92 today, [illegible] it would be good for his bowels. PM. Pulse 128. Sat up for about 2 hours, today. Has been fairly quiet
6 all day. Received 4 grs. Morph, today. Feb 6/94. Slept 6 hours, last night. AM. Pulse 92. Complains of his bowels. Was given enema of soap suds & glycerine; bowels then moved freely. PM. P88. (4 grs today).

1894

Feb 7 Feb 7/94. Slept quite well (7 hours), last night. AM. Pulse 78. Appetite good, but bowels irregular. He talks a great deal; appears easily excited. Up & on ward about 2 hours today. PM. Pulse 80. Was given
8 4 grains of morphine today. Feb 8/94. In bed. Appetite good; bowels, as a rule, are constipated.
11/14 Feb 11/94. Is up & on ward today. Appetite very good. Feb 14/94. Is up & down from his bed. Talks a
18 great deal of himself & his troubles. Feb 18/94. Slept none, last night. Up on ward, disturbing the
23 other patients. Has slept on an average, 5 hours, in each of past 10 nights. Feb 23/94. Very cross and troublesome at times; also somewhat inclined to be stubborn. Continues to be up and down from his bed. Sleep, since last noted, has somewhat improved. (See attached record of nurse shows Pulses, taken morning & evening, daily; also the amount of morphine given patient)
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. Has continued to sleep fairly well, about 6 hours, each night.
28 Conduct & behavior, by day, about as above described. Is now very neat in his personal habits.
Mar 2/94 Mar 2/94. Wt 150 pds. (a gain of 6 pounds, since coming). March 6/94. Has taken out walking, today. Is always complaining of something or other. Is very troublesome on ward,
14 and quite noisy, at times. March 14/94. Has gone out walking daily, the past week, and seems much benefitted by it. Appetite very good; bowels fairly regular. Habits clean.
15 March 15/94 Lately, has shown a very mean, disposition and has been very abusive of the nurses. Does all in his power to make it unpleasant for them. Continually asking for whiskey & Complains of pains in his stomach. March 17/94. Of late, has not been sleeping so very well; only
17 from 3 to 6 hours, each night. Sleeps, however, a good deal during the day. Moved to 15. today.
31 March 31/94. Since coming on this ward, still complains of sleeping poorly, only about 4 hours, nights. Has been better behaved; is cheerful & happy. Though still very nervous & easily excited. Appetite good. Patient has liberty of the grounds, which he seems to enjoy much. Is quite talkative; talks
rationally: not so complaining or faultfinding of late. Is on medicine (see attached record of pulses).
Apl 2 April 2/94. Was allowed to go home, today.

Discharged

1894

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" 4 PM
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DETAILED HISTORY OF SICKNESS OF MR. Chas
DIAGNOSIS.

1894 O. 2.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM
Febry 8	7	5	82	96				
9	7	5	84	102				
10	7	5	88	92				
11	7	5	82	118				
12		5		96				
13	7	5		100				
14	7	5	76	106				
15	7	5	74	92				
16	7	5	80	70				
17	7	5	80	88				
18	7	5	86	96				
19	7	5	76	78				
20	7	5	82	100				
21	7	5	84					
22	7	5	86	96				
23	7	5	80	96				
24		5		92				
25		5		92				
26								

Try to get appetite good
gr. ¼ of Morphine taken today.
gr. ½ " " " " "
gr. 3/4 " " " " "
Upon ward to-day appetite improved.
gr. 3/4 " " " " "
Stated an enema of soap suds
gr. 3 " " " " "
Is on ward part of the time and drinks
both the balance talks a great deal of
Kinnard and his troubles gr. ¾
gr. 3/4 Morphine taken today
gr. ½ " " " " "
gr. ½ " " " " "
Slept none during night. Upon ward
and disturbing other patients gr. 1½
Slept nightly from the 8th to 18th inclusive
on an average of 4½ hours. gr. 1½
gr. 1½ Morphine taken today.
Complains of pain in stomach
Tasted but a few mouthfuls
gr. 1½ Morphine taken today.
Is very troublesome at times and
cross. Also somewhat inclined to
be stubborn. gr. 1 gr. 1½
gr. 5/8 Morphine taken today
gr. ½ " " " " "
Slept nightly from the 19th to the 26th inclusive, on an
average of 6 hours. In bed part of the
time and on the ward the balance
during day.

quiet & restful night. Sleeping 7 hours. AM. Pulse gr. today, [illegible]
it would be good for his bowels. PM. Pulse 128. Sat up for about ½ hours, today. Has been fairly quiet
all day. Received 4 grs. Morph, today. Feb 6/94. Slept 6 hours, last night. AM. Pulse gr. Complains of
his bowel. Was given enema of soap suds & glycerine; bowels then moved freely. PM. P.R. (4 grs today).

1894

Feb 7 Feb 7/94. Slept quite well (7 hours), last night. AM. Pulse 78. Appetite good, but bowels irregular. He talks a great deal; appears easily excited. Up & on ward about 2 hours today. PM. Pulse 80. Was given 4 grains of morphine today. Feb 8/94. In bed. Appetite good. bowels, as a rule are constipated.
" 11/14 Feb 11/94. Is up & on ward today. Appetite very good. Feb 14/94. Is up & down from his bed. Talks a
" 18 great deal of himself & his troubles. Feb 18/94. Slept none, last night. Up on ward, disturbing the
" 23 other patients. Has slept on an average, 5 hours, on each of past 10 nights. Feb 23/94. Very Cross and troublesome at times; also somewhat inclined to be stubborn. Continues to be up and down from his bed. Sleep, since last noted, has somewhat improved. (The attached record of Nurse shows Pulses, taken morning & evening, daily; also the amount of morphine given patient)
" 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. Has continued to sleep fairly well, about 6 hours, each night. Conduct & behavior, by day, about as above described. Is now regaining his personal habits.
Mar 2/8 Mar 2/94. Wt 150 pds. (a gain of 6 pounds, since coming). March 5/94. Has taken out walking, today. Is always complaining of something or other. Is very troublesome on ward,
" 14 and quite noisy, at times. March 14/94. Has gone out walking daily, the past week, and seems much benefitted by it. Appetite very good; bowels fairly regular. Habits clean.
" 15 March 15/94 Lately, has shown a very mean disposition and has been very abusive of the nurses. Does all in his power to make it unpleasant for them. Continually asking for whiskey & Com-
" 17 -plains of pains in his stomach. March 17/94. Of late, has not been sleeping so very well, only from 3 to 6 hours, each night. Sleeps, however, a good deal during the day. Missed to-day.
" 31 March 31/94. Since coming on this ward, still complains of sleeping poorly, only about 4 hours, nightly. Has been better behaved; is cheerful & happy, though still very nervous & easily excited. Appetite good. Patient has liberty of the grounds, which he seems to enjoy much. Is quite talkative; talks rationally: not so complaining or faultfinding of late. Is on medicine (see attached record of Nurse).
Apl 2 April 2/94. Was allowed to go home, today.

Discharged

Personal and Medical History of Charles F. Mearkle

1894

SIBLEY, FICLAS & CHAMBERS, DAVENPORT, IOWA.

Has brought here by Deputy Sheriff J. S. Kennedy, with the following history. There is no history of either consanguinity or heredity. This is not 1st attack. He has taken morphine for years. Never before sent to Hospital. This attack seems continuous; disease seems increasing. Patient is all right, when under the influence of drugs. Derangement is now shown by Mor. Phonmania. Patient shows no disposition to injure others. Is not suicidal, nor filthy nor destructive. Before accession of the disease no peculiarities of disposition are now shown. Patient had peritonitis 9 years ago, when present habit was formed. He has not been restrained or confined, nor been under medical treatment. On personal examination, patient is excitable when drug cannot be obtained. He said that he had used morphine for 9 years, in increasing quantities. Did nothing unusual. He is weak and unsteady: —

Jan 25 Jan 26/94. On admission, was put to Ct. (S.R. Complexion dark, hair black; eyes brown; condition of skin good; bodily condition clean; but clothing dirty). Has sound scars on body, from taking hypodermics.
" 26 Pulse 86. Is quietly behaved, in ward. Jan 26/94. Slept fairly well last night. AM. Pulse 70 R 22 T. 99. Appetite fairly good; bowels, as a rule, Costive. Coughs a little, at times. In the morning, Lewas well behaved and quiet, but in afternoon, was restless and noisy. Is continually asking for morphine. Complains of pains all over his body. PM. Pulse 68 R 22 T. 99.2. Was given 1/2 gr. of morphine, today. —
" 27 Jan 27/94. Was restless & disturbed, sleeping but 2 hours, last night. AM. Pulse 108 R. 20 T. 99. — Bowels are Constipated. Says "he has been taken 36 grs of morphine, daily; has had the habit for 10 years" —
" 28 PM. Pulse 92 R 20 T. 99. Was given 7 1/2 grs of morphine today. Jan 28/94. Slept but 4 hours, last night. AM. Pulse 88 R 22 T. 99. Bowels moved today, but very little. Has been fairly quiet today.
" 29 PM. Pulse 94. R 20. T. 99.4. Took 7 1/2 grs. morphine, today. Jan 29/94. Did not sleep very well, last night. AM. Pulse 80. Says "he had a convulsion during the night". PM. Pulse 84. Given 6 1/2 grs
" 30 of morphine, today. Jan 30/94. Slept during the night, 6 hours. AM. Pulse 70. Is very restless and "Complaining of pains all over his body", and asking for morphine. Was given hot bath. PM. P 84.
" 31 Given 6 grs. of morphine today. Jan 31/94. Slept but 5 hours, last night. AM. Pulse 94 R 24 T. 99.8. Appetite good, but bowels are Constipated. Complains, today, of pains in head. PM. Pulse 82; 6 grs. today.
Feb 1 Feb 1/94. Slept 6 hours, during the night. AM. Pulse 90. Was given enema of soapsuds & glycerine. Bowels moved but little. He has been restless, the greater part of the day. PM. Pulse 86. Was
" 2 given 5 grs. of morphine, today. Feb 2/94. Again, slept 6 hours, last night. AM. Pulse 100. Says "he feels better today, than he has for some time". PM. Pulse 86. Was given 5 grs morph. today. —
" 3 Feb 3/94. Rested somewhat better, last night, Sleeping 7 hours. AM. Pulse 86. Appetite good, but bowels are irregular. Says "that if he was shut off from morphine, he would kill himself" —
" 4 PM. Pulse 86. Given 5 grs. Morphine, today. Feb 4/94. Slept fairly well (7 hours) last night. —
AM. " 78. If he does not get morphine regularly he will commence to groan & complain of pains. PM. Pulse 80. Patient has been kept steadily in bed, since admission: Sat up, for
" 5 about 2 hours this afternoon. Was given 4 grains of morphine, today. Feb 5/94. Passed a fairly quiet & restful night, Sleeping 7 hours. AM. Pulse 92 today, is asking for beer; says "he thinks it would be good for his bowels". PM. Pulse 128. Sat up for about 2 hours, today. Has been fairly quiet
6 all day. Received 4 grs. Morph, today. Feb 6/94. Slept 6 hours, last night. AM. Pulse 92. Complains of his bowels. Was given enema of soapsuds & glycerine; bowels then moved freely. PM. P 88. (4 grs today).

" 24 C
" 28 Clu
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" 14 and quite
seems mu
" 15 Mar 15/94 La
Does all in his
" 17 -plains of pain
from 3 to 6 hours
" 31 March 31/94. Since
Has been better behaved
Patient has liberty of
rationally: not so comp
Apl 2 April 2/94. Was allo

Under Old Law

Personal and Medical History of Joseph Bernet (Barnet)

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3642.

Residence, Poor - House, La[illegible]

Date Admission, 27th January 1894.

Admitted by, T. Kilbourne Hour, 7 [illegible]

How Sent, John B. Oliver, Jof P.

Sex, Male.

Age, 64

Civil Condition, Widower

Children, Two

Age Youngest Child, —

Occupation, Gardener

Degree Education, not stated

Profession Religion, Catholic

Habits, Unknown. —

Nativity, Switzerland. —

Physicians Committing, E.W. Buckley & D.C. Jones

Correspondents, Has no relatives in this Country -

[illegible] Year, 212

[illegible] Relatives, unknown

[illegible] Exciting, unknown

[illegible] Predisposing, unknown.

[illegible]panying Bodily Disorder, None

[illegible]al or Not, not known

[illegible]f this Attack, Ever since confinement in Bonhomme

[illegible]ion, probably some time - a month or so -

[illegible] Attack, not known

No. of Admissions, 1st

Age First Attack, not known

Time of Leaving, 4th September 1895

Time in Hospital, 1 year: 7 mos: 8 Days -

Result, Died: Dilitation of heart secondarily oedema of lungs —

EXAMINATION ON ADMISSION.

Exd by Dr. Ely (Dr Herzog present) Feb 21/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, good

Recent Events, good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, somewhat dull

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, poor

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes, slightly -

Depressed,

DELUSIONS:

Systematized or Not, some brought out

Special Subjects,

Transitory or Not,

HALLUCINATIONS: "of hearing" at night.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, fairly voluble.

GENERAL DESCRIPTIVE REMARKS:

Patient is excessively timid & does not sleep well, at night, owing to certain noises and "voices" which he hears. The examination was conducted with considerable difficulty as the patient speaks only "Swiss." —

Personal and Medical History of Joseph Bernet.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet WEIGHT, 118 lbs. NUTRITION, Fair

WOUNDS OR ABNORMALITIES, See "S. H." on next page.

TONGUE, Tremors, Marked Coatings, Slight Promptness Movement, Yes

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Yes

SIGHT, Presbyopic —

HEARING, Somewhat impaired.

COORDINATION, Arms, Somewhat impaired, by usual tests

Legs, " " "

TREMORS, Hands, Yes Tongue, marked

Facial Muscles, No General, Slight —

REFLEXES, Patellar, Equal — 10. —

Other Reflexes, ankle-clonus more marked n left —

ARTICULATION, Hesitating, No Slurred, No

FACIAL EXPRESSION, worried

SENSIBILITY,

HEART, no murmurs

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, Probably long ONSET GRADUAL OR SUDDEN, Probably gradual

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

} no history obtainable.

LIBERTY, FICKAS & CHAMBERS, DAVENPORT, IOWA

1894

This patient was brought here by Deputy Sheriff Chapek, with the following history. This is very meagre. As to habits, insane relatives or any heredity, supposed cause of attack, number of attack, his tendency to injure others, suicidal propensities, if filthy or destructive, if any peculiarities previously shown, if subject to any bodily disease, fits &c, or if under medical treatment, nothing seems to be known. — Form of attack is depressed. Patient has been in this condition since confinement in Poor-house of Ramsey County, where he has been for past month. Insanity now manifested by his "hearing voices" at night, telling him to do certain things. These he obeys. Has no relatives in this County.

Jan 27 Jan 27/94. On admission, was put on Bd (J.R. Complexion dark; hair gray; eyes brown; condition of skin good. Both ears are slightly frozen. Bodily condition dirty. There is a "growth" on second toe of right foot. Is quiet and well behaved). Jan 28/94. Was quiet & slept 7 hours last night — AM. Pulse 90 (slightly irregular); R 28. Appetite fair; bowels have moved, this morning. No cough noticed. Is quiet & harmless; seems feeble-minded. Talk is not understood. No complaints or injuries to report.

" 29 Jan 29/94. Was restless last night, sleeping but 4 hours. AM. Pulse 86. R 23. Appetite fair. Bowels (?). Is well-behaved. Appears timid; "wishes to lie down in hall". Talks very little and a fellow-countryman of patient cannot understand what he says. Makes no complaints. —

" 30 Jan 30/94. Rested well, sleeping 8 hours, last night. AM. Pulse 90. R 22. No cough noticed. Is well-behaved; not so restless as yesterday; talk is unintelligible. Complaints, if any, cannot be ascertained. Jan 31/94. Was very restless & disturbed last night and slept but 2 hours. AM. Pulse 92 R 26. Is well-behaved; quiet; afraid of his fellow-patients. Talks a little. Is evidently weak & wandering in his mind. Appetite is poor. —

Feb 1 Feb 1/94. Slept quite well (8 hours), last night; was quiet. AM. Pulse 86. Appetite poor; bowels regular; — no cough observed. Seems very nervous & afraid of his surroundings. Talks a little, when spoken to, in a weak & wandering manner. Makes no complaints. Feby 2/94. Slept well (9 hours), last night. AM. 90.

" 3 Well-behaved. Is childish in manner. Feb 3/94. Slept well, again, last night. Appetite good; bowels

" 4 regular. AM. Pulse 84. Talks a little, but almost unintelligible. Feb 4/94. Slept 8 hours, last night. AM. Pulse 92. (Strong & regular). Bowels slightly constipated. Talks a little, but appears dull

" 5 & takes no interest in what is passing or around him. Feb 5/94. Was restless and slept but 5 hours, last night. AM. Pulse 100. Walks around & appears to be always uneasy. Talks little, but wishes the attendants to do something for him. Bowels free. No complaints, no injuries to report. —

" 6 Feb 6/94. Slept 8 hours, last night. AM. Pulse 104. Is quietly behaved. Wanders about without any

" 7 apparent purpose. Is weak-minded. Feb 7/94. Restless, sleeping only 5 hours, last night. Appetite fair; bowels slightly active. Frozen ears are improving very slowly. Conduct and

" 8 behavior do not change any. AM. Pulse 98. Feb 8/94. Slept fairly well (8 hours) last night.

" 9 AM. pulse 104. Feb 9/94. Restless, sleeping only 5 hours, last night. AM. Pulse 96. Appetite is

" 10 rather poor; bowels free. Feb 10/94. Slept well, last night. AM. Pulse 92. Appetite Poor; bowels inclined to be constipated. No cough observed. Is quiet & harmless. Talks little, and, with the exception of a few words, unintelligibly. This patient, since his admission, has apparently not improved much, either physically or mentally. He is weak; 54 years of age and broken down in health;

" 28 and is also feeble-minded. Feb 28/94. Appetite, rather poor the early part of the month, when he also refused extra diet, has much improved & he now eats fairly well: bowels, then constipated have become

1894

Feb 28 cont'd more nearly normal. No cough observed; was rather weak & tottering in his walk, but trend is more firm, though still not strong in his limbs. Is well-behaved; answers & work tho' he can do but little. Makes no complaints. Talks now, more distinctly & intelligibly. Is weak minded. Habits are cleanly. (Was vaccinated on the 25th inst). — ——————

Mar 1/26 March 1/94. Wt 121 pds. (a slight gain, twice coming). Pulse 84. Mar 26/94. Patient was sick on 24th - 25th

" 27/31 and today & confined to bed. March 27/94. Is up today & about as usual. March 31/94. Patient's behavior is quiet & inoffensive. Walks quietly about the hall & acts in a rational manner. He makes no complaints. Talks more reasonably than formerly & appears to be steadily improving. Is still, however, childish and simple in his conversation & manners. Physical condition has also shown a gradual & steady improvement. Is cleanly in his habits. ——

Apl 1/30 April 1/94. Wt 126 pds. (a further gain in flesh). Pulse 94. April 15/94. Appetite is much improved (is on extra diet & milk). Bowels free; no cough noticed; Appears to be weak & his walk is slow & he seems uncertain of his steps. Is quietly behaved; makes no complaints. Talks a little about his home in Wisconsin and the manufacture of cheese". Is childish & weak-minded. Is cleanly in his habits. Works a little on the ward, but is not able to do much. — Apl 30/94. No change to note.

May 1/31 May 1/94. Wt 128 pds. Pulse 82. May 31/94. Appetite is rather poor; is on extra diet: bowels irregular; no cough noticed. He does not seem so strong as he was; is weak in limbs & wishes to lie down in afternoons. Is quietly behaved and inoffensive; complains that "his head troubles him"; feels dizzy when he attempts to walk". He does not appear to realize what he is doing. Talks incoherently, in a frightened manner, & cannot be understood. —

June 1/30 June 1/94. Wt 128 pds. Pulse 82. June 30/94. No special change to note in patient's condition, except that he is gradually growing weaker, both in body & mind. Habits continue to be cleanly. ——

July 1/31 July 1/94. Wt 121 pds. Pulse 96. Is gradually losing in flesh. July 7/94. Patient appeared to be so

" 15 weak & sick this morning, that he was put to bed. Took no breakfast. July 15/94. He has been in bed since 7th inst, but as he is, apparently, a little better & it is with difficulty he is kept in bed, he was allowed up.

" 19 July 19/94. Patient remained up two wards the 17th & 18th - but he does not seem to improve any. Ordered back to bed.

" 31 July 31/94. Since 19th inst, patient has been kept in bed; is evidently growing weaker daily. Is restless & with difficulty kept in the bed. Mind seems entirely gone. Habits are cleanly. Pulse ranges from 100 to 116. R - 30 to 34 - Talks but very little & speech is incoherent & cannot be understood. ——

Aug 1 Aug 1/94. Wt 105 pds. (in underclothes). This shows a loss of flesh of about 8 pds, during the past month.

" 2/3 Pulse 94. R 19. Aug 2/94. Was allowed to get up today. Pulse 84. R 22. Aug 3/94. Pulse. R 19.

" 4/31 Aug 4/94. P 112. R 22. Aug 31/94. Appetite greatly improved; bowels regular. Still weak in limbs & complains of dizziness in head. Behaves well; answers & work. Is feeble minded & childish in his talk. Has senile paretic. Is cleanly in his habits. Sep 1/94. Wt 116 pds Pulse 90. Sep 30/94. No special change

Sep 1/30 Oct 1/94. Wt 125½ pds (a gain of 9½ pds in weight in past month). Pulse 90; has much improved

Oct " 31 in health & strength, lately. There is no change in his mental condition. Oct 31/94. About as last noted.

Nov 1/30 Nov 1/94. Wt 131 pds. Pulse 92. Nov 30/94. Appetite good; bowels regular. Physically, he appears to be gaining slightly in health. Behaves well. Makes no complaints. Talks in an incoherent manner. Is feeble-minded. Habits cleanly. Dec 1/94. Wt 132 pds. Pulse 89. Dec 31/94. No change noticeable.

Dec 1/31 1895 Jan 1/31 Jan 1/95. Wt 132 pds. Pulse 96. Jan 31/95 — Appears slightly weaker, since last report. Mental condition unchanged. (Is somewhat paretic; senile - Dementia Symptomatical. BH.) —

(carried to 15) —

Personal and Medical History of Erasmus D. Walden

SUBLETT, POLLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3644.
Residence, Minneapolis, Minn
Date Admission, 30th January 1894
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John H. Steele, Jof C, Hennepin County
Sex, Male
Age, 65 years
Civil Condition, widowed
Children, Eight (one living)
Age Youngest Child, —
Occupation, Mill-wright
Degree Education, probably good
Profession Religion, Not a church member
Habits, Intemperate
Nativity, New York, U.S.
Physicians Committing, A.P. Williamson and D.W. Fleming
Correspondents, E.E. Walden, Rochester, Minn

No. for Year, 214.
Insane Relatives, unknown
Cause Exciting, probably intemperance
Cause Predisposing, " " "
Form,
Accompanying Bodily Disorder, weak: rheumatic
Suicidal or Not, not; but thinks he would better get out of the way
Date of this Attack, about 2 or 3 years ago
Duration, 2 or 3 years
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 62 years
Time of Leaving, Feb 19 '94
Time in Hospital, 19 ds.
Result, Recovered

EXAMINATION ON ADMISSION.

Exd by Dr Herzog, 13th Feby 1894. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, quick
MEMORY:
Past Events,
Recent Events, good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, } Good
Own Mental State, }
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Since admission, the patient has shown no delusions & his behavior has been good. He states, however, that he had worried somewhat over domestic troubles & at times grew frightening his room mate. —

EMOTIONAL STATE:
Normal, Calm, Normal & Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS: None noticed
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: — —
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, fairly voluble

Personal and Medical History of Erasmus D. Walden

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9½ WEIGHT, 164½ lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, See "S.R." on next page.
TONGUE, Tremors, Slight Coatings, none Promptness Movement, prompt
PUPILS, Equality, Yes Size, normal
Response Light, normal Accommodation, "
SIGHT, slightly presbyopic
HEARING, good
COORDINATION, Arms, good, by usual tests
Legs, Good " "
TREMORS, Hands, no Tongue, slight
Facial Muscles, no General, no
REFLEXES, Patellar, Equal — & —
Other Reflexes,
ARTICULATION, ~~Hesitating~~, normal ~~Slurred~~,
FACIAL EXPRESSION, normal
SENSIBILITY,
HEART, Sounds weak; no murmurs.
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.,

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 Erasmus D. Walden

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1894

Was brought here by Deputy Sheriff Kennedy with the following history. As to heredity unknown. Cause of attack is probably intemperance; formerly alcohol. Patient is weak. First symptoms of the disease were manifested, probably, 2 or 3 years ago; began "hearing voices" talking to him and about him when there was no one in sight. Thinks there was a combination after him, threatening him & abusing him. This is 1st attack. Insanity is now manifested by great memory, hallucinations of hearing, delusions of persecution. Patient is not disposed to injure others. Has not attempted suicide, but has thought that if he was out of the way, it would be better for him. Has no filthy or destructive habits. Has had rheumatism but no epilepsy &c. Has not been restrained or confined, nor under medical treatment. There is a loss of appetite; stomach rebels against food, at times; Last night, was telephoning to his dead wife and daughter and others he never knew.

Jan 30 On admission, was put on B3. (S.R. Complexion light; hair light; eyes blue; condition of skin good; Has marks on left leg below the knee and one on right thumb & all the fingers of left hand have been broken;

" 31 Bodily condition clean. Behavior good; talks quite rationally). Pulse 76. T@ 99.2. Jan 31/93. Was quiet and slept 8 hours, last night. AM. Pulse 76. R. 18. T@ 99. Appetite fairly good. no cough noticed. Is well-behaved. Sits by himself, on a bench, most of the time. Seems depressed. Talks freely; no delusions noticed. PM. Pulse 74. T@ 99.2; no complaints or injuries to report.

Feb 1 Feb 1/94. Slept well (8 hours) last night. AM. Pulse 74 R. 18 T@ 98.8. Appetite fairly good. very quiet.

" 2 Walks about hall some. Talks but very little, unless addressed. PM. Pulse 76. T@ 98.6. Feb 2/94. No noticeable change. Sleeps well at night. Pulse. R. & T@ about normal. Went out walking

" 3 to-day, with his ward. Feb 3/94. Appetite good. Talks quite freely; reads some. Is on medicine.

" 6 Feb 6/94. Has continued to sleep uniformly well, each night. Pulse is about normal. Appetite is good. He is quiet & well-behaved, and is in somewhat better spirits than he was at time of coming.

" 13 Feby 13/94. During this, the 2nd week, patient has been somewhat restless at night, but has slept 8 hours, in each. Has been quiet & well-behaved. Talks freely; reads & sings. No delusions have been noted. He walks leisurely about the hall. Makes no complaints. Seems to be improving quite rapidly, since he came, and says "he feels a great deal better." Habits are good.

" 14/19 Feb 14/94. Was today visited by a relative, (E. Walden of Rochester, Minn). Feb 19/94. Rest and sleeps, at night, have apparently much improved. Patient has continued quiet & well-behaved: talking freely & pleasantly; showing no delusions; making no complaints. Is in fair condition.

Went home, to-day, with this relative.

— Discharged —

Personal and Medical History of George Wright (colored)

From 37.

July 7/ July 2/94. Wt 132 pds; (a further slight loss). Pulse 80. July 7/94. Had a fight with a fellow-patient,

" 31 (also Tait) this am: no marks visible. July 31/94. In general, is about the same for past few months. Still is in the "Spell" & persistently refuses food. Has to be fed daily, by the tube. Habits are clean.

Augs Aug 1/94. Wt 118 pounds. (a loss of 17 pds in the past month). (This is caused by his persistently refusing

" 28 food.). Pulse 117. Aug 28/94. Still refuses to eat when in hall, but will eat anything he can get when outside. Has steadily been fed by the tube, but has not been so fed for about 14 days. Ate a very good dinner, today,

" 29 but would not help himself, but had to be fed. Aug 29/94. Ate a very good dinner, today, himself; also breakfast.

" 31 Aug 31/94. Does not seem to improve much, if any. He will eat for a few meals & then stop for a few again. Talks sensibly. Is quietly behaved. Badly ever speaks unless spoken to. Habits clean, but he is untidy about his clothing. Does no work. Sept 3/94. Wt 121½ pds (has recovered 6½ pds of his last weight).

" 30 Pulse 80. Sept 30/94. Appetite very good. Will now eat everything "in sight". Otherwise no change. He soiled his clothes one day, during the month. Oct 1/94. Wt 140½ pds (a gain of 19 pounds in past month)

" 17 Pulse 88. Oct 17/94. Had some trouble with his room-mate (Mat. Bowles) during the night; struck him

" 31 on head with a spike, causing a small wound. Oct 31/94. Appetite keeps good; bowels regular. Behavior quiet. Stands in one place most of the time, while in ward. Has a mania for whistling, both out doors and in the hall. Otherwise he causes no trouble. Habits cleanly; but he is untidy about clothing.

Nov 1/ Nov 1/94. Wt 152 pds. (a further gain in flesh). Pulse 76. Nov 21/94. Struck Old Anderson #1 over left eye.

" 30 Nov 30/94. Appetite good; always whistling the same tune; inclined to be ugly towards his fellow-patients; habits

Dec 1/ clean; does not work. Dec 1/94. Wt 158 pds. Pulse 66. Dec 31/94. Appetite good: bowels regular. Is occasionally quarrelsome - but, most of the time, quiet; rarely speaking to anyone; of late, is always standing

1895 up, looking through window. Habits clean. Does not work. Jan 3/95. Wt 167 (a gain of 12 pds. in the

" 31 past month). Pulse 64. Jan 31/95. During the month, has been quite often restless at night, frequently out of bed, and has been sleeping poorly. Conduct & behavior, by day, do not change any. Physical condition good.

Feby 1/ Feby 1/95. Wt 167 pds. P 75. Feb 28/95. Appetite good: bowels regular; behavior fairly good; though very

" 28 restless, at times; most generally walking about hall or looking out of window. Does not work.

Mar 1/ March/95. Wt 156 pds. Pulse 66. (has lost in weight). Mar 31/95. Appetite very good; is noisy and

" 31 restless; walking the hall & talking to himself, incoherently; is pugnacious of late. Habits are clean.

April 1/ April 1/95. Wt 151 pds. (2 still losing in flesh). Pulse 70. April 25/95. Struck patient, Sam Olsen, over

" 30 the head, with a broom, raising a small bruise. April 30/95. Helps some in ward. Has hallucinations of hearing" & grandiose delusions. May 1/95. Wt 147 pds. P 76. May 15/95. Occasionally pugnacious,

May 1/ 15 boisterous & talking to himself; making threats if anyone speaks to him & requests him to keep quiet.

" 31 Occasionally striking anyone who get in his way; May 31/95. No special change: noisy, ugly & treacherous: quite frequently striking his fellow-patients. Talks incoherently. Habits clean. Works in ward.

June 1/ 30 June 1/95. Wt 140 pds. Pulse 72. June 30/95. No change in any way, conduct & behavior &c.

July 1/ 31 July 1/95. Wt 137 " " 82. (has lost 30 pounds in weight since Feb 1st acts). July 31/95. No change.

Aug 1/ 31 Aug 1/95. Wt 142 " " 78. Aug 31/95. Very quarrelsome & pugnacious, of late; has to be watched very closely, for fear he will do someone bodily harm: (had to be taken to C.H. on 29th). Is filthy & touchy in

Sept 1/ 16 dress. Condition shows no improvement. Sept 2/95. Wt 140 pds. Pulse. Sept 14/95. Struck patient

" 30 W. H. Thompson with a mop stick, cutting his head quite severely. Sept 30/95. No change to note.

Oct 1/ 31 Oct 1/95. Wt 142 pds. P 94. Oct 31/95. Condition about the same, from month to month —

(carried to page 104)

Personal and Medical History of *Cereal King*

EGBERT, FULLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 364 J.
Residence, Wolpho. Mower Co. Minn
Date Admission, 1st February 1894.
Admitted by, Dr. Phelps Hour, 12.30 PM.
How Sent, J. S. Washburn, Jof P, Mower County
Sex, Male.
Age, 50 years
Civil Condition, married
Children, Two
Age Youngest Child, —
Occupation, Farmer
Degree Education,
Profession Religion, not a church member
Habits, use liquor moderately.
Nativity, New York.
Physicians Committing, Dr Macdonald & E. A. Washburn
Correspondents, wife. at same address —
(Brother-in-law) O. J. Rhoades, Lansing Minn

No. for Year, 21 J.
Insane Relatives, brother
Cause Exciting, no known cause
Cause Predisposing, Heredity
Form,
Accompanying Bodily Disorder, no
Suicidal or Not, not
Date of this Attack, 10 days ago
Duration, 10 days —
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 50 years
Time of Leaving, Mch. 24' 94
Time in Hospital, 1m 23ds.
Result, Recovered

EXAMINATION ON ADMISSION.

Exam'd Dr. Herzog, March 14/94. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events,
Recent Events, } seems very good, at present.
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:
Patient gives a very good history of his illness & describes minutely his mental condition. The story being so connected, we have no reason to doubt it. He mentions hallucinations which he had before coming, and recognizes them as such. Seems now, to be in good health, but is of a nervous temperament & inclined to magnify his bodily ailments. —

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

DELUSIONS: Denies having any now;
Systematized or Not, admits having them at
Special Subjects, first Coming. —
Transitory or Not,

HALLUCINATIONS: None now
ILLUSIONS: none

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

Personal and Medical History of *Cereal King*

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 3in WEIGHT, 132 pds. NUTRITION, Fair
WOUNDS OR ABNORMALITIES, See "R" next page.
TONGUE, Tremors, slight Coatings, none Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, normal Accommodation, normal
SIGHT, says somewhat impaired; slightly presbyopic.
HEARING, Some impaired, especially in right ear. —
COORDINATION, Arms, good, by usual tests —
Legs, very slightly impaired. Romberg, eyes shut, slight swaying.
TREMORS, Hands, none Tongue, slight
Facial Muscles, none General, none.
REFLEXES, Patellar, Equal — about 6 — Dr P's scale.
Other Reflexes,
ARTICULATION, Hesitating, no Slurred, no; good.
FACIAL EXPRESSION, normal.
SENSIBILITY, ✓
HEART, Sounds are good; No murmurs.
LUNGS, Seem good, (on superficial examination). —
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,

Recent kept

HISTORICAL.

LENGTH OF INVASION, probably short ONSET GRADUAL OR SUDDEN, probably sudden.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} no history of heredity brought out. —

Personal and Medical History of Cereal King

1894

HERBERT, FICHLER & CHAMBERS, DAVENPORT, IOWA.

Was brought here by Sheriff's Deputies J.M. Galt and Edson Bassett, with following history.— Patient takes liquor moderately. There is history of heredity, mother being insane. There is no known cause for this attack; form is acute, depressed. No accompanying bodily disorder or disease etc. First symptoms were manifested 10 days ago; would complain of illness; go to bed in day time with boots and clothes on. Shows delusions. This is 1st attack. Is now, at times noisy, excitement & violent- marked muscular tremor noted. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive, nor has he been restrained or confined. Has been under medical treatment; no result.

Feb 1 Feb 1/94. On admission was put on B3. (S.R. Complexion, dark; hair dark gray; eyes blue; condition of skin good; has a blister on right side, from mustard plaster. Bodily condition clean. Behavior good. Talks
" 2 quite rationally; is emotional, crying). Pulse 76. T(o) 98.8. R 28. Feb 2/94. Slept well, last night;- AM. Pulse 88. T(o) 99.8. Appetite fairly good; no cough observed. Is quiet and well-behaved.
" 3/4 Feb 3/94. Appetite good; bowels regular. Is well-behaved - Talks rationally - Feb 4/94. Apparently rested well, last night. AM. Pulse 84. T(o) 99. Quiet, well-behaved. Walks some in the ward.
" 5 Complains of being very weak; "would like some medicine" - Feb 5/94. Slept fairly well, last night.
" 6 AM. Pulse 120. T(o) 99.2. Appetite good. Bowels regular. Feb 6/94. AM. Pulse 104. T(o) 98.8.— Quietly-behaved - Talks rationally; seems clear. Says "he remembers that there was something
" 7 the matter with him, but cannot remember the particulars" - Feb 7/94. Continues to sleep quite
" 8 well, each night. Appetite good; bowels regular. Pulse 72. T(o) 98.8. Feb 8/94. No material change.
" 15 Feb 15/94. Continues to rest and sleep well at night. Has been uniformly quiet & well-behaved,
" 28 Appetite good; bowels regular. Talks rationally & appears to be clear. Feb 28/94. Has continued to improve.
Mar 3/5 March 3/94. Transferred to B' East. March 15/94. A quiet and well behaved patient, at all times. When examined, recently, in office, admitted he had delusions at time of coming but emphatically denied having any now; had also hallucinations but now recognizes them as such. Gave a very good history of his illness & described minutely his mental condition. Plays games. Works on ward. Seems contented.
" 24 Mar 24/94. Was, this morning sent to his brother-in-law at Lansing, Mich.

— Discharged —

Personal and Medical History of Anthony Manley

From 36.

May 31 May 31/94. Occasionally restless, at night. Appetite is now good; bowels regular. Is still stupid, dull, and seemingly melancholy. Has not talked any since 7th inst. Habits are neat. Physical condition very good. On the whole, no improvement is noticeable in this case. —— " ——

June 1/20 June 1/94. Wt 154½ pds. Pulse 84. June 20/94. Oblate, talks some, when spoken to, but in a hesitating
" 30 manner. June 30/94. Patients' condition continues about as described in last months' general note.

July 1/5 July 1/94. Wt 164 pds. Pulse 80. July 15/94. Seems to have improved some, during past 5 days or so.
" 27 Reads some; talks when spoken to. Works a little on ward. July 27/94. This improvement seems to be
" 31 keeping up. July 31/94. Appetite very good; bowels regular. Talks quite rationally, but he is not very communicative. Is considered much better than last month. Habits neat. Physical condition very good.

Aug 1/11 Aug 1/94. Wt 164 pds. Pulse 80. Aug 11/94. Has had a "stupid 4 days spell" the past week or so; but
" 15/20 he is somewhat brighter, today. Aug 10/94. Is again in a "stupid spell". Aug 20/94. "Spell" continues.
" 20 Went home on trial, with his wife, today - At time of leaving, his mental condition had not improved; he was dull & slow to comprehend; would not talk; did not seem to take any notice of what was going on - Was quiet; not inclined to be ugly or contrary - Physical condition good.
" 23 Aug 23/94. His family being unable to get along with him, he was returned today (new commitment papers having been made out unnecessarily) - Particulars obtained at this new examination were, in substance, the same as those contained in the original commitment.
" 31 Patient was put on B3 - No apparent change in mental condition. Aug 31/94. Seems about the same condition he has shown for some months. Does not talk any. No improvement, mentally.

Sep 1/9 Sept 1/94. Wt 164 pds. Pulse 80. - Sept 9/94. Has continued in a dull, stupid, melancholy "spell" -
" 10/24 Sept 10/94. Seems brighter today & talks quite rationally. Sept 24/94. This improvement continues up to
" 30 the present date. Today, however, he is again stupid & dull; no appetite - Sept 30/94. Has continued in this last mentioned condition. Appetite, however, has improved; bowels are regular. Talks some, when in these "spells". There is considerable eruption noticed on limbs & body. Habits filthy last 3 days. No improvement.

Oct 1/5 Oct 1/94. Wt 160 pds. (Has lost 7 pounds in weight in past month). Pulse 84. Oct 5/94. Has again been in one of his "dull & stupid spells" the past 5 days. Is some brighter, today, & commenced to do a little work on ward.
" 15/16 Habits are neat. Oct 15/94. This temporary improvement lasted up to today. Oct 16/94. Is in another
" 31 dull, stupid & melancholy "spell". Oct 31/94. This "dull & stupid spell" continues, at this date. Eats talks very little; moves about very slowly; has no energy. Habit clean. No marked improvement.

Nov 1/20 Nov 1/94. Wt 163½ pds. Pulse 88. Nov 20/94. Since 1st inst, has been having one of his "spells". Eats & sleeps
" 26 well, but seems stupid; does not talk. Nov 26/94. Has been sullen & ugly, the last 5 days & has struck
" 30 2 or 3 patients quite severely - Nov 30/94. No change to note in behavior or condition, at this date.

Dec 1/5 Dec 1/94. Wt 165 pds. Pulse 78. Dec 5/94. Seems somewhat brighter. Dec 28/94. Has been some
" 31 brighter for about the past 2 weeks. Dec 31/94. Eats & sleeps well; bowels regular. Physical condition
1895 good - Is still subject to ugly, sullen "spells" & is dangerous. Habits are clean. ——
Jan 1/4 Jan 1/95. Wt 163 pds. Pulse 82. Jan 4/95. Has been quiet for some time. Transferred to B2 today.
" 31 Jan 31/95. Behavior is good - Appetite good; bowels free. He reads some; plays billiards; clean and tidy in habits. Works some on ward. Seems improving much of late. Feb 1/95. Wt 164 pds. P 82.
Feb 1 Feb 8/95. Talks quite freely, but seems rather melancholy. Works some on the ward. ——
" 18 Feb 25/95. Appetite good. Behaves well. Reads some. Plays games. Makes no complaints;
" 28

(carried to page 92)

Personal and Medical History of William Wilson

ROBERT, FICLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3648

Residence,

Date Admission, 5th February 1891

Admitted by, D Phelps Hour, 7 PM

How Sent, John N. Steele Jof P, Hemphin County

Sex, Male

Age,

Civil Condition,

Children,

Age Youngest Child,

Occupation,

Degree Education,

Profession Religion,

Habits,

Nativity,

Physicians Committing,

Correspondents,

No. for Year, 218

Insane Relatives,

Cause Exciting,

Cause Predisposing,

Form,

Accompanying Bodily Disorder,

Suicidal or Not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admissions,

Age First Attack,

Time of Leaving,

Time in Hospital,

Result,

Error / Inebriate

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:

Entered in Inebriate's Casebook

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 William Wilson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION,

WOUNDS OR ABNORMALITIES,

TONGUE, Tremors, Coatings, Promptness Movement,

PUPILS, Equality, Size,

Response Light, Accommodation,

SIGHT,

HEARING,

COORDINATION, Arms,

Legs,

TREMORS, Hands, Tongue,

Facial Muscles, General,

REFLEXES, Patellar,

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION,

SENSIBILITY,

HEART,

LUNGS,

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Medium, Poor,

SLEEP, Good, Poor, Irregular,

PULSE, RESP., TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of William Wilson

1894

This patient was brought here by Deputy Sheriff Kennedy, with the following history of case.

Carl Leverson

1894 From 728

Aug 18 Aug 18/94. 10 AM. Bowels moved freely. Bed sores are dressed daily; they remain about same
" 19/20 Aug 19/94. Bowels have moved fairly regularly. Aug no/94. 7:30 Bowels moved. Patient was given a Sponge-bath. He appears very stupid; also very weak. —
" 21 Aug 21/94. 6 AM. Respiration very labored. Patient is rapidly failing - Friends advised, presently, of patient's critical condition. 6:10 AM. Patient Died at this hour. Friends & Relatives were advised by telegram of his death. They came and removed the remains. — (See attached Nurse's record) —

— Died —

Emery L. Obert

1895 From 716.

Oct 31 Oct 31/95 (cont'd). Patient is continually wishing "to be killed": "roasting" preferred. There is still considerable
Nov 5 trouble, at times, in getting him to eat. He sleeps well: works on ward. Nov 5/95. Appetite not very good.
Refuses to eat, at times. Says "he wishes to Starve himself". Bowels regular: He works some on ward.
" 9/30 Nov 9/95. Wt 114½ pds. Nov 30/95. Condition remains about same, food much & much. Still has delusions.
Dec 12 Dec 12/95. Wt 114½ pds. Dec 31/95. No change in anyway. Appetite & physical health poor. Continually asking "to be killed."
1896 Jan 11/31 Jan 11/96. Wt 111½ pds. Jan 31/96. Physical Condition apparently poor: appetite quite good, but he does not wish to eat
says, "he ought to die", and is frequently "asking to be killed": bowels regular: habits very neat: behavior good: sleeps well,
Feb 10/29 (fairly). works on ward. Feb 10/96. Wt 112½ pds. (up & Dressed). Feb 29/96. Appetite seems better, of
late: Says "he ought to stop eating & die". Behavior good: bowels regular. Habits neat & tidy. Works.
Mar 6/31 Mar 6/96. Wt 108½ pds. Mar 31/96. Physical appearance not very good: appetite fair: bowels regular.
Sleeps fairly well. Works on ward. Habits clean. Still "frequently asks to be killed". Worries a great
deal about his folks. Apl 7/96. Wt 110½ pds. Apl 30/96. No change noticed. Quiet & well-behaved. Works on
Apl 30 ward: Continually "asking to be killed". May 8/96. Wt 111½ pds.
May 8
June 1/96 Summary Nurses Notes by Dr. Phelps. Patient kept upon Infirmary ward as he works some
to in a dull, melancholy way & is still somewhat reliable. At times thinks that poison
Aug 1/97 was put in his food. His delusions cause little trouble, however, & he works
along on ward every day. Continued by Dr. Herzog. Aug 1/97 Wt. 119. Appetite fairly good. Clean in habits.
Demented. Talks in simple, childish manner. Has delusions of persecution & of poison in food: At times quite noisy
moans as if in distress: Works on ward: Somewhat obstinate Nov 1 Wt. 127 Dec. 31 Escaped from window at 5:30 PM.
Found down town. Too demented to make effort to get out of town: Brought back & Trans. to 13.
June 16. much more confused & irrational & under influence of delusions of persecution Became

Personal and Medical History of Edward H. Gilbert

1894 From 108.

Apl 30 April 30/94. Complains of not resting or sleeping well, at night. Appetite is poor. Is well-behaved
but very restless. Somewhat inclined to be irritable. Habits clean & neat. Is on medicines. —
May 3/31 May 3/94. Wt 164 pds. (Has gained 8½ pounds in last month); pulse 84. May 15/94. Has now been
much better behaved for some time; less cranky & irritable; less complaining of things in general. Is however
quite restless, at times. Complains occasionally, of his left leg pains him.
" 16 May 16/94. Was permitted to leave today. —

Discharged

Anthony Manley

1894 From 88.

Feb 28 Feb 28 Is clean & tidy in habits; Works some on ward. Still seems depressed. Physical condition good.
Mar 2/31 March 2/95. Wt 163 pds. Pulse 84. Mar 10/95. Is quite depressed & remained in bed, part of the day.
" 11/31 March 11/95. Complains of headache; Given medicine for same - Mar 31/95. Appetite good; behavior
good; plays games: Talks freely & sensibly. Clean & tidy in habits; Works some on the ward. —
Apl 1/6 Apl 1/95. Wt 163 pds. Pulse 80. Apl 6/95. Visited by wife today: She took him home on trial.

— Discharged —

E. L. Obert Continued

Apr 1. angry & broke chair 31 Noisy: Feb 1. Very Noisy during night Frequently tries to escape.
Wt. 130 lbs. Still has delusions of persecution: Occasionally noisy: Frequently attempts to escape.
Complains of supposed ill treatment - June 4 Eloped from Infirmary. Brought back during
evening. 25 Wt. 125. Frequently attempts to elope on going into basement by picking
lock on screen. Jan 3 '99 Wt. 129½ lbs. No change in condition: Asks simple questions
Appetite fairly good. but has delusions of poison in food. Feb. 1 '98 Wt. 128 lbs. Has some delusions
Constantly attempts to escape. June 29 Complains of headache & dizziness: Trans. to
Infirmary. June 30 Temp 103-105. Complains of pain in abdomen. Is delirious
Given sponge baths. Bowels loose abdomen distended. Tongue coated. Bowels show symptoms
of Typhoid attack: on milk diet & eggnog. Continues to have many delusions. July 17 Complained of burning
up feeling & considerable pain in abdomen. Delirious at times: Course of disease continued thro July.
July 31 Much Improved: Put on light diet. In August developed rectal abscess which was opened & drained.
Patient improved. Aug 1. At times thinks food is drugged & refuses it: Does big said diet. Aug 18 Vomited after meals
Sept 2 up & drained. Still vomits after meals. Continually asking for something to eat & takes food from other patients Nov 1 Put to bed to be
treated for rectal fistula. Feb 1 1900 Wt. 113 lbs Up & around but frequently vomits after meals. March Operated upon for fistula: Improved.
Apr 18 up & dressed. Has to be kept on peptonized milk because of stomach trouble. Apr 25 Had fainting spell: fell to floor. Complained of
nausea. May 1. Wt. 95 lbs Looks emaciated, anaemic. Has delusions of persecution. July 6. Wt. 105 lbs Vaccinated - no result. Mental
condition unchanged. Case probably tuberculous.

Carried to Transfer Book A. 359

Personal and Medical History of Frank Peltzl

LUBURT, FISCAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3649.

No. for Year, 219.

Residence, 924 - 20th Ave So. Mpls. Minn.

Insane Relatives, unknown.

Date Admission, 7th February 1894.

Cause Exciting, Domestic grief; death of child 6 mos ago

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

...edisposing, not stated

How Sent, John H. Steele, Jof P, Hennepin

Sex, Male

...nying Bodily Disorder, None.

Age, 42 years

...or Not, Threatened it, a week ago.

Civil Condition, married

...his Attack, 6 months ago.

Children, nine living

..., about 6 months

Age Youngest Child,

...tack, 1st (so far as known)

Occupation, shoe-maker

...dmissions, 1st

Degree Education, probably fair

Age First Attack, 41st years

Profession Religion, Catholic by profession; not a ch. member

Time of Leaving, Jan. 24. 1899

Habits, Intemperate occasionally, but not for 2 mos past

Time in Hospital, 4 yr. 11 mo. 17 d.

Nativity, Austria

Result, Died. Tuberculosis Pulmonalis.

Physicians Committing, C.K. Bartlett — W.H. B Sweetzer

Correspondents, (wife) Annie Peltzl 10/19/97 1919 Crystal Lake Ave, Mpls.

~~1014 — 15th S. South Minneapolis~~ ~~924 — 20th Av So. Mpls Minn~~

Oct 20/97 moved

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog, March 15/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, slightly confused

Quick or Sluggish, Quick

MEMORY:

Past Events, } seems to be Good

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, fairly correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, somewhat defective

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, slightly

Depressed,

DELUSIONS:

Systematized or Not, none brought out

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None brought out.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent (slightly)

Voluble or Reticent, somewhat reticent.

GENERAL DESCRIPTIVE REMARKS:

Altho the patient manifested neither delusions hallucinations nor illusions, still it was evident from the tone of his conversation, that there was some "twist" in his mental faculties, as was manifested by his reticence & peculiar indirect allusions to various subjects.

Mrs. Annie Peltzl.
#1919 Crystal Lake av.
Minneapolis
Minn.

Correspondent for Frank Peltzl.

...SSION.—(Continued.)

...GS.

NUTRITION, only fair; somewhat anaemic.

Promptness Movement, prompt

...omewhat slightly contracted.

..., excessive

...COORDINATION, Arms, }

Legs, } seemingly not impaired, by usual tests.

TREMORS, Hands, none Tongue, none

Facial Muscles, none noted. General,

REFLEXES, Patellar, Equal — between 8 & 9. —

Other Reflexes,

ARTICULATION, Hesitating, No Slurred, no

FACIAL EXPRESSION, has a peculiar bulging forehead. —

SENSIBILITY, ✓

HEART, Impulse forcible; no murmurs.

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.,

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,

Father or Pat. Relations,

Brothers or Sisters,

} no history of heredity obtainable

Personal and Medical History of Frank Peltzl

EGBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA



Whole No. 3649.

Residence, 924 – 20th Ave So. Mpls. Minn.

Date Admission, 7th February 1899.

Admitted by, Dr. Theeks Hour, 1 PM.

How Sent, John H. Steele, Jo. P., Hennepin

Sex, Male

Age, 42 years

Civil Condition, married

Children, nine living

Age Youngest Child,

Occupation, shoe-maker

Degree Education, probably fair

Profession Religion, Catholic by profession; not a ch. member

Habits, Intemperate occasionally, but not for 2 mos past

Nativity, Austria

Physicians Committing, C. K. Bartlett and H. B. Sweetzer

Correspondents, (wife) Annie Peltzl 10/15/97 1919 Crystal Lake Av, Mpls.

Oct 30/97 now 2nd

~~404 – 20th St. South Minneapolis~~ ~~924 – 20th Av So. Mpls~~ ~~Minn~~

No. for Year, 219

Insane Relatives, unknown

Cause Exciting, Domestic grief; death

...edisposing, not stated

...nying Bodily Disorder, none.

...or Not, Threatened it, a week ago.

...his Attack, 6 months ago.

..., about 6 months

...tack, 1st (so far as known)

...dmissions, 1st

Age First Attack, 41+ years

Time of Leaving, Jan. 24. 1899.

Time in Hospital, 4 yr. 4 mo. 17 d.

Result, Died. Tuberculosis Tuberculosis.

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog, March 15/98.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, slightly confused

Quick or Sluggish, Quick

MEMORY:

Past Events, } seems to be good

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, fairly alert

Correct or Illusive, fairly correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, somewhat defective

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, slightly

Depressed,

DELUSIONS:

Systematized or Not, none brought out

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none brought out.

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent (slightly)

Voluble or Reticent, somewhat reticent.

GENERAL DESCRIPTIVE REMARKS:

Although the patient manifested neither delusions, hallucinations nor illusions, still it was evident from the tone of his conversation, that there was some "twist" in his mental faculties, as was manifested by his reticence & peculiar indirect allusions to various subjects.

Personal and Medical History of Frank Peltzl

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 7½ WEIGHT, 128 lbs. NUTRITION, only fair; somewhat anaemic

WOUNDS OR ABNORMALITIES, See "S. R." on next page.

TONGUE, Tremors, none Coatings, large; tooth-marked Promptness Movement, prompt

PUPILS, Equality, Equal Size, somewhat slightly contracted.

Response Light, Excessive Accommodation, Excessive

SIGHT, Seems good

HEARING, Seems slightly impaired.

COORDINATION, Arms, } Seemingly not impaired, by usual tests

Legs, }

TREMORS, Hands, none Tongue, none

Facial Muscles, none noted. General,

REFLEXES, Patellar, Equal – between 8 & 9. –

Other Reflexes,

ARTICULATION, Hesitating, no Slurred, no

FACIAL EXPRESSION, has a peculiar bulging forehead. –

SENSIBILITY, ✓

HEART, Impulse forcible; no murmurs.

LUNGS, Seem good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Kept	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good, Records	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, } no history of heredity obtainable.

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Frank Peltzl

1894

Was brought here by Deputy Sheriff C. A. Kennedy, with the following history. His habits are intemperate occasionally, but not for 2 months past; unknown if any insanity in family. Cause of this attack is domestic grief; death of a child 6 months ago: form is depressed, melancholic. There is no accompanying bodily disorder; health is apparently good. First symptoms of the disease were manifested 6 months ago, following burial of child; trying to find child and bring it back, and he wanders about all night in this quest. This is 1st attack, so far as known. Insanity is now manifested by delusions concerning children's death and supposed persecution by others. Has shown no disposition to injure others, but opposes wife & gets angry at her. Threatened to kill & injure himself one week ago. Has no filthy or destructive habits. No bodily disease, fits, injury to head &c mentioned. He has been in jail the past 2 days. Refused to submit to any medical treatment. Always has been industrious, kind and happy, prior to attack.

Feb 7 — On Admission, was put on B.3 (S.R. Complexion dark; hair black; Eyes blue; Condition of skin good; has 2 scars on left leg, just above ankle, and some scratches on back. Bodily condition, clean. Behavior is good. Talks, seemingly, rationally). Feb 8/94. Was quite restless, last night, and slept but 3 hours. — A.M. Pulse 76 R 20 T @ 98.6. Appetite fairly good. No cough noticed. Is quiet & well-behaved. —

" 9 — Feb 9/94. Slept but 3 hours, last night; was restless for about 6 hours. A.M. Pulse 76. T @ 98.8. Appetite and behavior are good.

" 10 — Feb 10/94. Restless 5 hours, sleeping 4 hours, last night. A.M. Pulse 76. T @ 98.6. Appetite good, but bowels are constipated.

" 11 — Feb 11/94. Urine passed as four night; slept only 4 hours. Restless 5 hours.

" 12 — Feb 12/94. Slept 4 hours, restless 5 hours, last night. Is quietly behaved. Shows

" 13 — delusions. "Thinks he knows most everybody".

" 14 — Feb 13/94. Slept 5 hours last night; was quite restless. Bowels are constipated.

" 21 — Feb 14/94. Slept 6 hours last night. Bowels move regular, today. — Feb 21/94. During this, the 2nd week of his stay, patient has been somewhat restless a few of the nights but has been sleeping 6 to 7 hours a night. Has been quiet & well-behaved by day. Appetite has been good; bowels regular. He also has illusions — Works in dining room. Habits neat & clean. (The above description outlines a chronic case of mild mania. D.P.).

" 25 — Feb 25/94. Complained of not feeling very well, and remained in bed part of the day, yesterday. Is up today, but still complains of headache.

" 28 — Feb 26/94. Appetite fairly good; bowels regular. He has been complaining some of a cold, of late. Manifests illusions. Works a little in dining room. Habits are clean. —

Mar 1 — March 1/94. Wt 130 pds. Pulse 76.

" 15 — March 15/94. No material change. Is quiet & well behaved

" 31 — March 31/94. Apparently rests and sleeps well, at night. Appetite good; bowels regular. Habits are clean and neat. Is inclined to be cranky and ugly, although he has never caused any trouble, as yet. Has illusions. Physical condition is good. Works a little in the ward.

Apl 2 — Apl 2/94. Wt 133½ pds. Pulse 76.

" 15 — Apl 15/94. Is quietly behaved, but very easily provoked. Always keeps by himself; stays in his room most of the time. Talks incoherently, at times. Manifests illusions & delusions. On the whole is a very well-conducted patient in the ward. Habits are neat & clean. Of late, has been helping a good deal with the work in the ward —

" 26 — Apl 26/94. Was very noisy, last evening. Said "Some one was talking to him through the window"

" 30 — Was given a hypodermic during the night. Apl 30/94. Appetite good; bowels regular. Is "cranky" and occasionally ugly; still manifests delusions & illusions. Habits neat & clean. Works in ward. —

May 1 — May 1/94. Wt 131 pds. Pulse 95.

" 4 — May 4/94. Patient was, today, visited by friends.

Personal and Medical History of Frank Peltzl

1894

May 31 — May 31/94. Last month's general note still holds good. He works well & willingly in the yard. —

June 30 — June 2/94. Wt 134 pds. Pulse 76. June 30/94. No noticeable change to report, at this date.

July 31 — July 1/94. Wt 135 " " 72. July 31/94. Apparently rests & sleeps well. Appetite good; bowels regular. Is quietly behaved. Generally remains in his room all day; does not care to go out walking. Is very cranky & easily provoked. Is indolent of late & does not keep with the work. Habits are clean. —

Aug 31 — Aug 1/94. Wt 134½ pds. Pulse 72. Aug 31/94. Appetite good; bowels regular. No special change to note.

Sept 30 — Sept 3/94. Wt 136 " " 72. Sept 30/94. Keeps about the same from day to day & month to month. —

Oct 1 — Oct 1/94. Wt 129 pds. (a loss of 7 pounds in flesh, during past month) without apparent cause. Pulse 72

" 6 — Oct 8/94. Appears to be growing worse of late. Will sit & laugh to himself & occasionally, when spoken to, will not answer; is very cranky & ugly & at times "shows fight". Appetite not very good, lately. Bowels seem regular. He has not taken any food, all day: acting stupid & contrary & does not want to speak. —

" 7/14 — Oct 7/94. Takes food, all right, today. Oct 11/94. Refused food all day. Oct 12/94. Eats regularly, today —

" 14 — Oct 14/94. Objects to going out walking & if asked to go out, gets angry & wont go unless made to —

" 31 — Oct 31/94. No special change to report: does not seem to change in any respect. Health quite fair

Nov 1 — Nov 1/94. Wt 130 pds. Pulse 110. Dec 1/94. Wt 134½ pds. Pulse 96. Jan 2/95. Wt 135 pounds. Pulse 82 —

Dec Jan 1895 — Jan 31/95. Appetite good; bowels regular. Behavior good, if he is not provoked, which is easily done; hardly speaks to anyone — In general is a very quiet patient — Habits are neat & clean — He does not work any. —

Feb 1/95 — Feb 1/95. Wt 136 pds. Pulse 76. Feb 28/95. Appetite good; bowels regular; behavior good; quiet; quick-tempered, but if let alone is all right. Has hallucinations & illusions. Habits clean: no work.

Mar 1/95 — Mar 1/95. Wt 136 pds. Pulse 79. March 9/95. Together with patient, a Fait, attacked Attendant Williams, when entering their room to trim their finger-nails; tore his clothing some and also scratched his face some. March 31/95: No special change noticeable in patients' condition.

Apl 1/95 — Apl 1/95. Wt 135½ pds. Pulse 78. Apl 30/95. About the same, from month to month.

May 1/95 — May 1/95. Wt 136 " " 80. May 31/95. Appetite good: bowels regular: behavior good: Still holds delusions: pt talks quite rationally: habits neat & clean: Does not work any.

June 1/95 — June 1/95. Wt 131 pds. Pulse 76. June 30/95. No change noticeable, in any way —

July 1/95 — July 1/95. Wt 130 " " 88. July 31/95. About the same, from month to month.

Aug 1/95 — Aug 1/95. Wt 131½ " " 72. Sept 1/95. Wt 132 pds. P 76. Oct 1/95. Wt 133½ pds. Pulse 86.

Sept Oct — Oct 31/95. Appetite good: bowels regular: behavior good: still has delusions. Talks rather rationally & neat & clean in his habits. Physical health apparently good. Not inclined to work much.

Nov 1 — Nov 1/95. Wt 136 pds. Pulse 80. Dec 2/95. Wt 135 pds. Pulse 74. Jany 1/96 Wt 135 pds. Pulse 74

Dec 2 1895 Jany 1/96 — Jan 2/96. Transferred to B1. (on account of General change of wards). Jan 31/96. No special change. Has been well behaved, tho' inclined to be cranky, at times. Has delusions, altho' have not heard him mention any of them of late: all pertaining to his family's life: will not read his wife's letters: or even open them. Habits clean: he does not work.

Feb 1/96 — Feb 1/96. Wt 135 pds. P 86. Feb 3/96. Complained of not feeling well & remained in bed, all day. Feb 4/96. Ordered 9 am. P 66 T 99. Feb 5/96. Still in bed: 9 Am. T 98⅘. 8 Pm P 68. T 99.2. Feb 6/96. Still in bed. 8:30 am T 98.6 Pm. Pm. P 82: T 99.2.

" 15/16 — Feb 7/96. Remains in bed. 8 am. P 78. T 99. Feb 8/96. Appetite poor. 8:30 am P. 76 T 98.6. Feb 9/96. 8:30 am P 72

" 17/18 — T 98⅘. Appetite poor. Feb 10/96. 8:30 am P 82. T 98⅖. Appetite poor. Feb 11/96. Still remains in bed: appetite poor:

" 19/20 — Bowels moving only by use of medicine: is inclined to be cranky & stubborn.

" 21/22 — Feb 12/96. Still remains in bed: appetite poor: bowels moving only by use of medicine: is inclined to be cranky & stubborn.

Carried to Transfer Book A. 257

Personal and Medical History of Jan. K. Kock

Whole No. 3650.
Residence, 135 W. 5th St. St. Paul, Minn
Date Admission, 7th February 1894.
Admitted by, Dr. Phelps — Hour, 7 P.M.
How Sent, John M. Olivier, Jo P. Ramsey County
Sex, Male
Age, 30
Civil Condition, single
Children, None
Age Youngest Child, —
Occupation, None.
Degree Education, Good probably (in own language)
Profession Religion, Dutch Reformed Church.
Habits, Good.
Nativity, Loo. Holland —
Physicians Committing, Arthur Sweeney & J.C. Nelson
Correspondents, none given in papers

No. for Year, 220.
Insane Relatives, (Father's brother died of softening — grand father's brother insane; mother's brother insane.
Cause Exciting, Heredity & severe railway injury 8 years ago.
Cause Predisposing, Heredity.
Form,
Accompanying Bodily Disorder, None.
Suicidal or Not, not.
Date of this Attack, Dec 18th 1893.
Duration, about 7 weeks.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 30.
Time of Leaving, July 10. 94
Time in Hospital, 6 mos. 11 days.
Result, Recovered

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog, Mar 11/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, quick.
MEMORY:
Past Events, } seems to be good
Recent Events, }
Special Subjects,
PERCEPTIVITY:
Alert or Dull, alert
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects, Good
Own Mental State, Defective
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Slightly
Depressed,
DELUSIONS: unsystematized, permanent.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: "of hearing."
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, inclined to reticence

GENERAL DESCRIPTIVE REMARKS:
On questioning him, he describes "a girdle-feeling" about the waist, and last summer "had retention of urine" — cause unknown; but he says he no longer experiences the "girdle-sensation" —

Personal and Medical History of Jan. K. Kock

Herewith find petition of Louis Kock for the appointment of a Guardian for Jan. K. Kock (committed to Rochester State Hospital) will be heard on Friday, February 23rd 1894 at 10 o'clock in the forenoon at the Probate Courtroom in the Court House St. Paul, Minn —
(Copy of appeal notice served on Dr Phelps 2&3 7/94

ISSION.—(Continued.)

TICS.

NUTRITION, Rather poor. —

ge.

Promptness Movement, prompt

normal

on, somewhat sluggish.

ual tests.

TREMORS, Hands, none — Tongue, slight fibrillary
Facial Muscles, none noted — General, none.
REFLEXES, Patellar, equal; absent, except on reinforcement — (slight there).
Other Reflexes,
ARTICULATION, Hesitating, — Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds distinct, but slight roughness of 1st sound, at apex.
LUNGS, appear to be good
EXAM. URINE, says had trouble once in passing urine — it had to be drawn. —

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, — Clean, — Careless,
BOWELS, Normal, — Constipated, obstinately (he says) — Irregular,
APPETITE, Good, seems keen — Medium, — Poor,
SLEEP, Good, — Poor, — Irregular,
PULSE, 60, regular. — 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, } particulars, as in history. —
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History

Whole No. 3650.
Residence, 135 W. 5th St. St. Paul
Date Admission, 7th February 1894.
Admitted by, Dr. Phelps — Hour, 1 P.M.
How Sent, John M. Oliver, Jo. Co. Ramsey County
Sex, Male
Age, 30
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, none.
Degree Education, good probably (in own language)
Profession Religion, Dutch Reformed Church.
Habits, Good.
Nativity, Loo. Holland —
Physicians Committing, Arthur Sweeny & J.B. Nelson
Correspondents, none given in papers

Form,
Accompanying,
Suicidal or Not,
Date of this Attack, Dec 18
Duration, about 7 wks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 30.
Time of Leaving, July 18.94
Time in Hospital, 6 mos. 11 days
Result, Recovered

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog, Mar 11/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Quick.
MEMORY:
Past Events,
Recent Events, } Seems to be good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, alert
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects, Good
Own Mental State, Defective
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Slightly
Depressed,
DELUSIONS: unsystematized, permanent.
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: "of hearing."
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, inclined to reticence.

GENERAL DESCRIPTIVE REMARKS:
On questioning him, he describes "a girdle-feeling" about the waist, and last summer had retention of urine" — cause unknown; but he says he no longer experiences the "girdle-sensation" —

Personal and Medical History of Jan. K. Koch

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4 1/2 in. WEIGHT, 120 1/2 pd. NUTRITION, Rather poor. —
WOUNDS OR ABNORMALITIES, See "S.R." next page.
TONGUE, Tremors, slight fibrillary tremors Coatings, grayish at base Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, somewhat excessive Accommodation, somewhat sluggish.
SIGHT, somewhat myopic
HEARING, slightly impaired.
COORDINATION, Arms, very slightly impaired, by usual tests.
Legs, somewhat impaired " "
TREMORS, Hands, none Tongue, slight fibrillary
Facial Muscles, none noted General, none
REFLEXES, Patellar, Equal; absent, except on reinforcement — (slight then).
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, found to distinct, but slight roughness of 1st sound, at apex.
LUNGS, appear to be good
EXAM. URINE says had trouble once in passing urine — it had to be drawn. —

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,		Clean,	Careless,
BOWELS, Normal,	Records kept	Constipated, obstinately (he says).	Irregular,
APPETITE, Good,		Medium,	Poor,
SLEEP, Good,		Poor,	Irregular,
PULSE, 60, regular		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,
Father or Pat. Relations,
Brothers or Sisters,
} particulars, as in history. —

1894

EBERT, VOLK & CHAMBERS, DAVENPORT, IOWA

I was brought here by Deputy Sheriff Charles E. Chapek, with following history. Habits are good. There is strong history of heredity. Father's brother died of softening (of brain?); grandfather's brother is and mother's brother is and. Supposed cause of this attack is heredity and severe injuries he received in a railway wreck in Holland, 8 years ago. Form of attack is chronic, exalted. No accompanying bodily disorder mentioned. First symptoms of the disease manifested as follows. On December 18th 1893, he listened to a concert, in which a well-known society lady sang and became in hypnotic communication with her and has declared he loves her and has set her a task to be "God's Fool". He has walked up and down in front of her house and has waited all day for her to come to his room, though he has never spoken to her. He has mistaken other women for her, and has demanded of another woman "flesh and blood". He wants to shed his blood for her. He influences musicians in a beer-garden by a pure look, and makes them play badly or well, at will. He talks vehemently on the subject of reforming the world, by playing the flute. This is the 1st attack. Insanity was shown by writing poetry, and he believes the philosophic genius in his brain is deceased. Patient has shown no disposition to injure others. Is not suicidal, nor filthy nor destructive. Previous to attack, was always of excitable temperament, and held extravagant views on social & ethical subjects. He has not been restrained or confined. Has been treated by Bromides, sulfonal &c, for the past month but with no curative effect. He is well educated & has an annuity of small amount, from Holland.

Feb 7 On Admission, was put on B3. (S.R. Complexion dark; hair brown; eyebrows; Condition of skin good; has some scars on right leg, below knee, and cut under the chin. Bodily condition clean. Will not keep shoes or socks on; biting his fingers & pounding himself and says "he wants to be punished"). " 8 Pulse 72. R 18 T(a) Refused. Feb 8/94. Was up last night, throwing himself on the floor. Was given hypodermic. Was very noisy for 5 hours or so. Put in restraint from 3 Am to 7.30 am (4½ hours). Slept but 2 hours. — Am. Pulse 76 R 16 T(a) "Refused". Appetite is poor: no cough noticed. Is quite restless today; singing; throwing himself on the floor. Is deluded: says it is his duty to punish himself". He has some " 9 marks or bruises caused from falling on floor. Pm. Pulse 78 R — T(a) refused. Feb 9/94. Noisy 1 hour, restless for 7 hours, sleeping but 1 hour last night. Am. Pulse 70 R 17 T(a) 99.8. Appetite medium. Is quiet part of the time; then, again, will stand, & all with nearly all his weight upon the floor. Sings; says "he is God's fool". Was, today, visited by relatives. Pm. Pulse 72. T(a) 100. — " — " 10 Feb 10/94. Was more quiet and restful, last night, sleeping 8 hours. Am. " 68 R 16. T(a) 99. — " 11 Conduct & behavior by day, about as above. Pm. Pulse 72. T(a) 98.8. Feb 11/94. Slept fairly well, 7 hours, last night. Am. Pulse 68 — Falls about on the floor. Stands, like a statue, for a considerable time rigid & does not move a muscle. Feb 12/94. Slept well, 8 hours, last night. Still manifests delusions. Plays billiards some. Am. Pulse 66. Feb 13/94. Am Pulse 68. Feb 14/94. Am. Pulse 70. Has " 13/14 been sleeping well the past 2 nights & has also been well-behaved, by day. Habits are clean. " 21 Feb 21/94. During this 2nd week rest & sleep at night have been uniformly good (8 hours each night). Pulse has been about normal. Appetite good, of late. Has been quiet & well-behaved, by day. Talks freely; no delusions noted. Walks quietly about hall. Reads some. Plays billiards. Has attended services in chapel. Makes no complaints. Seems to be improving quite rapidly. — Feb 28/94. Walks about the " 28 hall, considerably: sings at times. Shows delusions. Says "he is God's Fool". Plays games &c.

Mar 2/11 March 2/94. Wt 123 pds. Pulse 70. Mar 11/94. At close of chapel services today, got up & commenced

1894

Mar 11/13 to speak. When asked by Dr. why he did so replied that "he exercised it his duty". Mar 13/94. Somewhat " 15 noisy today; walking the hall and singing. Mar 15/94. Works some on the ward. Plays billiards &c. Still adheres to the delusion that he is "God's Fool." Habits are clean & tidy. — Health seems good " 31 March 31/94. No very material change to note, at this date. —

Apl 2/9 April 2/94. Wt 123½ pds. Pulse 74. April 9/94. Is anxious to do some work. Plays games; " 15 talks freely. Goes out walking). Apl 15/94. Says "he is now sleeping much better, at night". In other respects, continues about the same. Apl 21/94. Was visited by his brother, today. — " 21 " 30 April 30/94. Behavior is good. Talks freely; no complaints. Reads some. Plays games. Works

May 1/12 May 1/94. Wt 125 pds. Pulse 74. May 12/94. Helped with the work in the main kitchen, today. — " 15 May 15/94. Is always quiet & well behaved. Appetite is good. He reads some; plays games &c. A good worker on the ward. Was, today, transferred to B3. May 18/94. Continues quiet and well-behaved. Has " 18 had "no spells". Is very neat & tidy in appearance. Was today moved to A1. May 29/94 Visited by brother. " 29 " 31 May 31/94 Uniformly quiet & well-behaved, though he is rarely excited & is quite restless, at times and will then walk the hall a good deal. Seems anxious to go home. Is a good & willing worker.

June 1 June 1/94. Wt 132½ pds; (quite a gain in flesh, during the past month). Pulse 80. — " 30 Has commenced to work steadily, in the main kitchen. June 30/94. Patient seems very much improved, both physically & mentally. Works daily in the kitchen. Would like to go home. Is always pleasant & agreeable in manner. Habits are very neat & clean.

July 9/18 July 9/94. Wt 133½ pds. Pulse 70. July 18/94. A very well behaved & quiet patient. Appetite Continues good. Bowels regular. Pleasant & agreeable in manner. Talks freely & sensibly. — Works daily, intelligently, in the kitchen. Expects to go home soon. Habits very neat & tidy. Was today, visited by his brother, with whom he went home on trial.

Died Nov. 9. 94.

From Folio 120 John Simonson 3754

Sept. 19. Nutrition enemas continued. Patient perspired freely through night: Respiration much labored and irregular: Cheyne-Stokes breathing and pulse very irregular & weak. 5 Am. Began to fail very rapidly & continued to do so until death at 7:15 am. (Dictated by Dr. Wamons)

Post mortem examination by Drs. C.H. Mayo & E.J. Wamons, 5 hrs after death.

Age 60. Body poorly nourished. Small scar on left shoulder, probably caused from trying to defend himself from attack of McGroarty. Abrasion of left elbow. Bruise & a few small scratches on right elbow & arm. Discoloration on inner surface of right ankle. Small scar on upper lip. Discoloration below right shoulder, caused from lying on. Discoloration at base of spine; starting of bed-sore. Two scars on head. One tooth missing from upper jaw. Others all in, but some decayed. Old scar on right elbow. Old scar on right ankle. Old scar on left hip. Bunch on back about size of a goose egg, probably a lipoma. Irregular lacerations. Contused wounds, over right parietal eminence which had healed by first intention. Skull cap removed which was rather thin. Dura thickened & adherent in spots. Linear fracture of skull, without any depression, above right meatus, fracture separated. No depression. Right half of cerebrum red, softening. Whole brain congested. Left temporal lobe disintegrated by large clot from middle cerebral. Left kidney Cortex reduced. Excess of fibrous tissue somewhat contracted. Right kidney Cortex thin. Hemorrhagic spots throughout kidney. Arteries sclerotic. Lungs Pleural adhesions over left apex & right axillary region. Lungs oedematous, Tubercular nodules in both pericardium contained normal amount of straw colored fluid. Heart Size normal. Contained large white clot in apices Cusps of left auriculo-ventricular valve thickened & nodulous. Spleen small & friable. Liver Smaller than normal & friable. Impossible to remove it without tearing it. Stomach & intestines normal. Bladder normal. Contained Calculus size of bean. Gall bladder normal.

Personal and Medical History of Nathan W. Prescott

EBERT, PUCAN & CHAMBERS, DAVENPORT, IOWA



Whole No. 3651. for Year, 221.

Residence, 19 West Winifred, St Paul. ane Relatives, None

Date Admission, 7th February 1894. se Exciting, Hypochondriasis

Admitted by, Dr Phelps. Hour, 7 PM. se Predisposing, Chronic

How Sent, John B. Olivier, Jof P, Ramsey Co. m,

Sex, Male. ompanying Bodily Disorder, Dyspepsia

Age, 28 years idal or Not, Attempted it, with a revolver.

Civil Condition, married of this Attack, about April 1893.

Children, one ation, about 10 months

Age Youngest Child, of Attack, 1st

Occupation, Broker of Admissions, 1st

Degree Education, Probably Good. Age First Attack, about 27.

Profession Religion, not a Church member Time of Leaving, June 4 '94

Habits, Temperate Time in Hospital, 9m, 9d.

Nativity, St Paul, Minn. Result, Impd

Physicians Committing, C. Eugene Riggs & Vincent J. Hawkins

Correspondents, Father's address C. N. Prescott White Bear Lake, Ramsey Co. Minn

EXAMINATION ON ADMISSION.

Ex'd by Dr Herzog March 20/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, fairly quick

MEMORY:

Past Events, } Seems good

Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Seems alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, }

Own Mental State, } slightly at fault

Special Subjects, }

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, somewhat

DELUSIONS:

Systematized or Not, None brought out

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Possibly "of hearing"

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Somewhat reticient.

GENERAL DESCRIPTIVE REMARKS:

The patient is brought here with a history of delusions but if he now possesses them, he is unusually adept in concealing them. He is reticient and speaks vaguely of persecution, shortly before coming here. He is suspicious in his manner & thinks he was sent here to be got out of the way.

Personal and Medical History of Nathan W. Prescott

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6½ WEIGHT, 150½ pds. NUTRITION, Fair, the tongue's somewhat anaemic.

WOUNDS OR ABNORMALITIES, See I. R. on next page.

TONGUE, Tremors, Tremulous at tip Coatings, none marked Promptness Movement, Slow

PUPILS, Equality, left slightly larger than right Size, about normal

Response Light, Excessive Accommodation, Excessive

SIGHT, Seems good

HEARING, Normal

COORDINATION, Arms, very slightly impaired, by usual tests

Legs, slightly impaired " "

TREMORS, Hands, slight Tongue, slight

Facial Muscles, None General, None

REFLEXES, Patellar, Equal — 8 — Dr. P's scale.

Other Reflexes,

ARTICULATION, Hesitating, no Slurred, no — normal

FACIAL EXPRESSION, slightly depressed.

SENSIBILITY, ✓

HEART, action rapid; 1st sound forcible; 2d sound quite weak; no murmurs.

LUNGS, appear 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, Probably long ONSET GRADUAL OR SUDDEN, Gradual.

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

Mother or Mat. Relations, } no history of heredity brought out. —

Father or Pat. Relations,

Brothers or Sisters, ✓

1894

Was brought here by Deputy Sheriff C. E. Chapel & patient's brother, with the following history. Habits are temperate. There is no history of any heredity. Supposed cause of this attack is Hypochondriasis; form is depressed or melancholy; accompanying bodily disorder, Dyspepsia. First symptoms of disease were manifested about April 1893, by rambling & disconnected talk. This is the first attack. — Insanity now shown by suspicions, delusions, hallucinations etc. He has shown a disposition to injure others from premeditation. Has attempted suicide, with a revolver; propensity now active. He has no filthy or destructive habits. Previous to appearance of above symptoms, he showed numberless delusions. There is no history of any bodily disease, fits etc or injury to head. He has not been restrained or confined. Has not been under medical treatment. Patient had hemorrhage of stomach last April, and, since then, heaviness reverses. —

Feb 7 — On admission, was put on B.C. (S.R. Complexion light; hair brown; eyes blue; condition of skin good; some scars on right wrist; bodily condition clean; behavior good.). T. 97. P. 96. Feb 8/94. Rested fairly well and slept 8 hours, last night. Appetite fairly good. No cough observed. Is well-behaved. Rather depressed. Talks quite freely when addressed; shows no delusions. PM. Pulse 100. R. 18. T. 99.2. Appetite fairly good. No cough observed. Is well-behaved. Rather depressed. Talks quite freely when addressed; shows no delusions. PM. Pulse I(x) 99.4. No complaints or injuries to report. Feb 9/94. Quiet, sleeping 8 hours, last night. — AM. Pulse 100. R. 18. T. 98.8. Appetite good; bowels, as a rule, free. Behavior good. Talks freely. PM. Pulse T. 99. —

" 10 — Feb 10/94. AM. Pulse 100. R. 17. T. 99. Well-behaved; seems in good spirits, today. PM. Pulse 98. T. 99.2. —

" 11 — Feb 11/94. AM. " 100. Appetite good. He talks freely; reads some. Continues well-behaved. Makes no complaints.

" 12/13 — Feb 12/94. AM. " 98. Patient seems improving quite steadily. Feb 13/94. AM. Pulse 95. About as usual now.

" 14 — Feb 14/94. AM. " 94. Since last noted, has been sleeping well (about 8 hours) each night. Talks freely & sensibly. —

" 21 — Feb 21/94. During this, the 2nd week, patient has continued quiet and restful at night, sleeping about 8 hours, on each. Has also been quiet and well-behaved by day; making no complaints. Talks freely & sensibly. Plays games; reads some. Appetite has been good; pulse somewhat above normal. Seems to worry over his being kept here; thinks he is all right and ought to go home. Habits are cleanly. Feb 27/94. Visited by his father.

" 27 — Feb 27/94. Patient seems worse than before his father's visit. Is depressed. Thinks "his folks put him down here to get his property"; "thinks he will have to stay here, for life". —

" 28 — Mar 7/94. Wt 145 pds. (Last at 2 one in weight, without known cause). Pulse 90. Mar 13/94. Has, today, visited by his wife. Still holds to his delusions. Mar 15/94. Is well-behaved. Works some. Otherwise no change.

Mar 7/13 — Mar 31/94. Visited by brother today. Patient is much depressed. Still manifests delusions; "thinks that he is going to be kept here as long as he lives, or be killed &". Reads some. Talks but little.

" 15 — April 2/94. Wt 152 pds. (a gain of 7 pounds in past month). Pulse 80. April 4/94. Depressed and crying today.

" 31 — Apl 5/94. Again depressed today, & crying. Apl 9/94. Has been crying nearly all day; will not go out walking. Appetite is poor. Apl 11/94. No change; "thinks his wife & child are dam thieves".

Apl 2/4 — Apl 15/94. Very depressed; "wants to commit suicide"; "thinks he is the cause of all these men being here". Insists on sleeping on the floor. Will not go to his meals unless he is forced to & then eats very little.

" 9/9 — Apl 19/94. Depressed; "wants some one to kill him". Apl 20/94. Says "he is going to hell & his wife will have to go with him, unless he kills himself"; tried to steal a table knife, today.

" 12/12 — Apl 21/94. Received his wife's picture; began crying & seems worse. Seems afraid he is keeping everyone here. Repeats this delusion.

" 19/20 — Apl 22/94. Tried to strangle himself with some knotted handkerchiefs, today. Apl 23/94. Has to be watched constantly.

" 30 — Apl 30/94. During past week, has only averaged about 2½ hours sleep each night, being nightly restless for

1894 Apl 30 (cont'd) hours 4 to 4½ hours in ... disturbed that he slept none at all. Appetite poor. Still holds to reads the Bible, most of the time. Requires most careful watching. 6½ pds, during the past month). May 6/94. Has been noisy nights, and has slept very poorly. Crying & crying, today. st 2 nights, sleeping only about 3 hours, in each. — Slept only about 4 hours. May 14/94. Again, slept very , sleeping but 3 hours, last night. Ate nothing, today. Ate none today. May 15/94. Eating but little, today. king. May 31/94. Appetite very poor. Rest, at times, sed. Prays & cries a good deal. Wants to kill himself, ly watched. Helps some with the work on ward. — bruises in the past month, which attendant thinks can & hypic finite frequently refusing food). June 4/94. Eats self".

Will & Testament

Rochester May 9th 94

To The Elders & Doctors of the Hospital at Rochester Minn.

I N. W. Prescott born of sound mind, twenty eight years old, born in St. Paul, and having the world's property forced on me unbeknowing to me, and having my life taken daily from me. I do hereby surrender all claims up to the said Hospital or to its leading members. To be divided as they see fit. My entire fortune, consisting of every thing. If I am killed by the Infant father, and this is my family. I do the make this will, in trying to save my life. Hoping and praying

brother, who desired to take him home, on trial. This strong suicidal propensities, yet he decided to give at home with him this afternoon.

Wright (colored)

with Peter Loredo; striking him & scratching his face some. Pulse 80. Jan 2/96. Transferred to B1. (on account of a general regular behavior fairly good but he gets very angry, at times: and cut Monday; wants some answers; habit seems to be good. —

Feb 1 — Feb 6/96. Wt 138½ pds. P 78. Mar 2/96. Wt 139 pds. P 80. Mar 15/96. Struck & beat this morning, when getting up morning washed & dressing his face some. Apl 1/96. Wt 138½ pds. P 76. Apl 30/96. Appetite good. Bowels regular. Behavior noisy, restless & troublesome; talking incessantly & singing; very treacherous & requires close watching, as he will strike or kick another patient, without any provocation. Is not contented unless he is doing something.

Mar 2/4 — Apl 1/30 — Summary Nurses Notes by Dr. Phelps. Patient has been on violent ward. Is at times noisy & will fight: Got into the habit of doing a good deal of work during latter part of period & habits changed. Has seemed brighter recently. Will answer when spoken to. Health good: Wt. 138 to 146 lbs. Continued by Dr Herzog Wt. 147 lbs. Works continually about wards: delights in scrubbing. Takes particular care of closet & washroom. Talks threateningly & swears to himself while working; goes over every bench & chair in hall at least once a day. Will not hesitate to strike a patient if he does not move out of the way. Takes care of beds. Has delusions of grandeur: says he has power over others. Conversation very incoherent. Aug 12 Hurt slightly by R. Hanson. Mch 18 Neck scratched by J. Saunders. Apr 30 Found pot which he had sharpened on floor of closet. Became very angry when taken from him. Has had numerous small fights since last note. Is most contented when allowed to work. Delusions of persecution. Eats capfuls of ice can obtain it. June 25 Became very pugnacious, kicked Dr. Ernst. Taken to bed. shoes taken off. Aug 1/96 Wt. Fifty more quiet at present.

May 1/2 — to — Aug 1/97

See Page 0.

1894

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Habits are temperate. There is no history of a
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games; reads some. Appetite has been good; pulse somewhat above normal. Seems to worry over his being kept
here; thinks he is all right and ought to go home. Habits are cleanly. Feb 27/94. Visited by his father.

" 28 Feb 28/94. Patient seems worse than before his father's visit. Is depressed. Thinks his folks put him
down here to get his property"; "thinks he will have to stay here, for life". —

Mar 1/13 Mar 1/94. Wt 145 pds. (Has lost some in weight, without known cause). Pulse 90. Mar 13/94. Was, today,
" 15 visited by his wife. Still holds to his delusions. Mar 15/94. Is well-behaved. Works some. Otherwise no change.

" 31 Mar 31/94. Visited by brother today. Patient is much depressed. Still manifests delusions; "thinks
that he is going to be kept here as long as he lives, or be killed &c". Reads some. Talks but little.

Apl 2/9 April 2/94. Wt 152 pds. (a gain of 7 pounds in past month). Pulse 80. April 4/94. Depressed and
" 4 crying today. Apl 6/94. Again depressed today, & crying. Apl 9/94. Has been crying nearly all day;
" 12 will not go out walking). Appetite is good. Apl 12/94. No change; "thinks his wife & child are dam liars".

" 15 Apl 15/94. Very depressed; "wants to commit Suicide"; "thinks he is the cause of all these men being here".
Insists on sleeping on the floor. Will not go to his meals unless he is forced to & then eats very little.

" 19/20 Apl 19/94. Depressed; "wants some one to kill him". Apl 20/94. Says "he is going to hell & his wife will have
" 21 to go with him, unless he kills himself"; tried to steal a table knife, today. Apl 21/94. Received his wife's
picture; began crying & seems worse. Seems afraid "he is keeping everyone here". Repeats this delusion.

" 22/23 Apl 22/94. Tried to strangle himself with some knotted handkerchiefs, today. Apl 23/94. Has to be watched constantly.

" 30 Apl 30/94. During past week, has only averaged about 2½ hours sleep each night, being nightly restless for

1894 cont'd

Apl 30 from 4 to 7 hours; in one night being so disturbed that he slept none at all. Appetite poor. Still holds to
his delusions. Prays & cries a great deal. Reads the Bible, most of the time. Requires most careful watching.

May 1/6 May 1/94. Wt 143½ pds. Pulse 76. (Has lost 6½ pds. during the past month). May 6/94. Has been noisy
and restless the greater portion of the past few nights, and has slept very poorly. Praying & crying, today.

" 9 May 9/94. Restless about 6 hours, each of past 2 nights, sleeping only about 3 hours, in each. —

" 13/14 May 13/94. Passed a poor night, last night; slept only about 4 hours. May 14/94. Again, slept very
poorly, last night. May 16/94. Restless 5 hours, sleeping but 2 hours, last night. Ate nothing, today.

" 17/18 May 17/94. Rested & slept very poorly, last night. Ate none today. May 18/94. Eating but little, today.

" 30/31 May 30/94. Tried to run away, while out walking. May 31/94. Appetite very poor. Rest, at times,
is much broken. He seems much depressed. Prays & cries a good deal. Wants to kill himself,
and, on this account, has to be very closely watched. Helps some with the work on ward. —

Inner June 2/94. Wt 128½ (showing a loss of 15 pounds in the past month, which attendant thinks can
" 4 be accounted for by patient's poor appetite & his quite frequently refusing food). June 4/94. Eats
none the past day or 2. "Wants to kill himself". —

Patient was, today, visited by a brother, who desired to take him home, on trial. This brother had been informed fully of patient's strong suicidal propensities, yet he decided to give him a trial at home. Patient therefore went home with him this afternoon.

Discharged.

From 84.

George Wright (colored)

1895
Nov 1/13 Nov 1/95. Wt 143 pds. Pulse 72. Nov 13/95. Had a fight with Peter Loudo; striking him & scratching his face some.
Dec 1/94 Dec 1/95. Wt 141½ " 84. Jan 1/96. Wt 140 pds. Pulse 80. Jan 7/96. Transferred to B1 (on account of a general
Jan 1/21/31 change of the wards). Jan 31/96. Appetite good: bowels regular: behavior fairly good - but he gets very angry, at times: and
talks to himself in an incoherent manner: habits clean but slovenly: wants some answers: health seems to be good. —

Feb Feb 1/96. Wt 138 pds. P 78. Mar 1/96. Wt 139 pds. P 80. Mar 15/96. Struck A Deal this morning, when getting up,
Mar 2/9 using as hoe & bruising his face some. Apl 1/96. Wt 138½ pds. P 76. Apl 30/96. Appetite good: bowels regular. Behav-
Apr 1/30 -ior noisy, restless & troublesome: talking incoherently & singing: very treacherous & requires close watching, as he
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May 1/94 Summary Nurses Notes by Dr. Phelps. Patient has been on violent ward. Is at times noisy
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to. Health good: Wt. 138 to 146 lbs. Continued by Dr Herzog. Wt. 147 lbs. Works continually about wards. Delights
in scrubbing. Takes particular care of closet & washrooms. Talks threateningly & swears to himself while working: goes
over every bench & chair in hall at least once a day: Will not hesitate to strike a patient if he does not move out of the way.
Takes care of beds - Has delusions of grandeur: says he has horns over others. Conversation very incoherent. Aug. 12 Bit slightly by
R. Harrison. Mch. 18 Neck scratched by J. Saunders. Apr. 30 Found fork which he had sharpened on floor of closet. Became very angry
when taken from him. Has had numerous small fights since last note. Is most contented when allowed to work. Delusions of persecution.
Eats soap's if he can obtain it. June 25 Became very pugnacious, tried A. Ernst. Taken to bay. shoes taken off. Aug 1/95 Wt. 144 lbs more quiet at present.

See Page 0 -

Personal and Medical History of Edward H. Gilbert

GILBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3652.
Residence, Minneapolis, Minn.
Date Admission, 12th February 1894.
Admitted by, D. Phelps Hour, 7 P.M.
How Sent, John H. Steele, Jo P, Hennepin Co.
Sex, Male
Age, 30 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Barber
Degree Education, probably good.
Profession Religion, not a church member
Habits, addicted to use of morphine to excess
Nativity, Fairhaven, Vermont.
Physicians Committing, A. K. Norton and E. S. Kelley
Correspondents, Joseph Gilbert, George City, Conn.

No. for Year, 222.
Insane Relatives, None.
Cause Exciting, not given.
Cause Predisposing, not given.
Form,
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, not.
Date of this Attack, not stated
Duration, not stated
No. of Attack, not stated
No. of Admissions, 1st
Age First Attack, not given
Time of Leaving, March 16 '94
Time in Hospital, 3 m. 4 d.
Result, Rec.

EXAMINATION ON ADMISSION.

Exd by D. Herzog, March 29/94. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, fair
Recent Events, admits it is poor
Special Subjects,

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

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

EMOTIONAL STATE:
Normal, Calm,
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, somewhat reticent

GENERAL DESCRIPTIVE REMARKS:
Cause this time, (2nd attack), of taking morphine was "peritonitis". This, he states, is his 2nd attack. Exciting Cause of 1st attack was injury to knee.
Age 1st attack, 19; Duration 4 to 5 months.
Age 2d " 30; " about 9 months.

Personal and Medical History of Edward H. Gilbert

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 11¼ WEIGHT, 194 Pounds. NUTRITION, quite good now: some home disease
WOUNDS OR ABNORMALITIES, Anchylosis of left knee joint, from injury.
TONGUE, Tremors, large Coatings, none Promptness Movement, prompt
PUPILS, Equality, Equal Size, Normal
Response Light, Yes Accommodation Yes
SIGHT, Seems good, but there is a slight weakness of muscles of eye; Eyes tire easily
HEARING, Seems good
COORDINATION, Arms, Good
Legs, very slightly impaired, by usual tests
TREMORS, Hands, Slight Tongue, Slight
Facial Muscles, none General, none
REFLEXES, Patellar, of left leg cannot be tested, owing to bad knee; of right leg, about 6.
Other Reflexes,
ARTICULATION, Hesitating, Seems fair Slurred, —
FACIAL EXPRESSION, somewhat depressed
SENSIBILITY, ✓
HEART, beat is rapid, slightly irregular; 1st sound at apex, a little muffled; no murmurs.
LUNGS, Seem Good.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, See note — ONSET GRADUAL OR SUDDEN, —
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Maternal aunt hysterical
Father or Pat. Relations,
Brothers or Sisters,
} no other history of any heredity.

Personal and Medical History of Edward H. Gilbert

ROBERT, FISHER & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy Sheriff J.M. Allesu, with the following history, which is very meagre. There is no history of heredity. Nothing is stated as to cause of attack, form, if any accompanying bodily disorder, when first symptoms of disease was manifested, or in what way, nor number of attack. Insanity is now manifested by an uncontrolable appetite for morphine, and by its effects upon the nervous system. Patient is neither disposed to injure others, nor is he suicidal: there are no filthy or destructive habits. There is no history of any bodily disease, epilepsy or injury to head. He has not been restrained or confined, nor under medical treatment.

Feb 17 On admission, was put on 6gr. To Dr. Phelps, he says "came here voluntarily - Takes 40 to 50 grains of morphine, daily. Began a little over a year ago; Started taking it on account of cold." (S.N., Complexion light, hair dark; eyes brown; condition of skin good. Has sound marks on left arm and back. Scars on right leg. Bodily condition clean. Behavior good). Some eruption noticed on right leg. ——

" 13 Feb 13/94. Slept fairly well, last night. AM. Pulse 74 R 19 - T@ 98.4. Appetite good; bowels constipated. Coughs a little, at times. (3 gr. morph. were given patient last night). Is in bed, all of today. Behaves well but is somewhat restless. Talks about himself and the life he has led. PM. Pulse 60 R 20 T@ 98.6. (Gwen 10 gr. Morph today)

" 14 Feb 14/94. Was restless but slept 5 hours, during the night. AM. Pulse 80. Complains of leg paining him. -

" 15 (Was given 10 gr. Morph, today). PM. Pulse 68. Feb 15/94. Slept 6 hours, last night: somewhat restless. - AM. Pulse 64 R 18. T@ 98. Wants a great deal of looking after. Finds fault with everything. Is very cross.

" 16 PM. " 70 " — " 98.4. Was given 10 gr. Morph. today. Feb 16/94. Was very restless last night; slept but 4 hours. AM. Pulse 80. T@ 98.4. Is grumbling & fault finding, all the time. Says "he does not have to stay here unless he wants to". PM. Pulse 72 T@ 98.6. Was given 10 grains Morph, today -

" 17 Feb 17/94. Slept, last night, 6 hours. AM. Pulse 84. Talks of himself as though he were a "hard case". Tells

" 18 of his luck at Gambling". PM. Pulse 70. Given 9 grs. morph. today. Feb 18/94. Has been in bed since his coming. Is up a ward for 3 hours today. Appetite good; bowels constipated. Slept 8 hours, last night. -

" 19 AM. Pulse 78. PM. Pulse 90. Given 9 grs. morph. today. Feb 19/94. Again restless, sleeping but 5 hours last night. AM. Pulse 76. PM. Pulse 60. Seems to be getting more cross and cranky, every day; uses

" 20 a great deal of profane language. Given 8 grains morph. today. Feb 20/94. Rest, last night, was very much broken and he slept but 3 hours. AM. Pulse 78. Is a ward part of the time today; in bed, the

" 21 balance. Slept all this morning. PM. Pulse 92. Given 8 grs. Morph. today. Feb 21/94. Again passed very poor night, sleeping only 3 hours. AM " 84. PM Pulse. 60. Complains of semen passing him, at times.

" 22 No improvement in his behavior. Given 7 grs. morph, today. Feb 22/94. Was restless & awake all last night, slept none at all. AM. Pulse 76. PM. Pulse 60. Eating but little of late. Gave 7 gr. Morph, today.

" 23 Feb 23/94. Again passed a very poor night, sleeping only 1 hour. Refuses to eat; is surly and unruly.

" 24 Was given 6 gr. morph. today. Feb 24/94. Slept but 2 hours, last night. AM. Pulse 76. Appetite good; Bowels constipated; has to be given enemata. He is a little more civil, today. Ulcer on leg is improving.

" 25 PM. Pulse 76. Given 6 gr. morph. today. Feb 25/94. Rested very poorly last night; slept only 2 hours. - AM " 72. Has been in bed, all day. Complains, at times, of pains in legs. Given 5 gr. Morph. today.

" 26 Feb 26/94. Slept but 3 hours, last night. Is still in bed. Does not seem as restless as usual. Slept the greater part of the day. Pulse this am. 76. PM. Pulse 74. Was given 5 gr. Morph, today. -

" 28 Feb 28/94. Has slept, nightly, about 3½ hours from 13th to 28th Inclusive (as the average). Given 4½ grains morphine yesterday; also today. ——

27/105
3652

DETAILED HISTORY OF SICKNESS OF MR. Edward H. Gilbert
DIAGNOSIS.

1894 C. 2.

DATE.	HOUR	PULSE	RESP.	TEMP	
Feb.	AM. PM.	AM. PM.	AM. PM.	AM.	PM.
27	5	80			Slept nightly on an average of 3½ hours from the 18th to 28th of Feby inclusive. 4½ grs today and to day.
Mar.					
1	5	80			Gave both 4½ grs Morph
2	5	86			Weight 127 lbs. 4½ grs morph
3					Was again put on Dobbs Powder 40 gr three a day and gets the following 76 Ext Gelsem 3iii Tr Hyoscyam 3vi Aqua ad 3iv three teaspoonfuls Aqua given 4 hrly Three 3ii's & Morph today
4					Complains of pain. Down & ach bothering him. 3½ grs Morph
5					3 grains
6	5	76			Threatened violence unless he got Morphine 3 grains
7					At times is very cross. Complains of his diet. Says he is starving. 4½ grains Morph today. He is very cross & restless & not sleeping. 2½ grains Morph today
8	5	66			
9	5	72			If he does not get morphine regularly he vomits a fuss. 2½ grains
10					Gets evening regular appetite fairly good. Has been behaving himself quite well for the last two days. Considering sick past 2 hours Morph
11	5	76			Slept nearly all day 2 grains Morphine
12					2¼ grains to day
13					Quit work altogether. Suppose are giving him medicine to try to make him crazy. 3½ grains Morph today

Appetite is very good; bowels in fairly good condition; continues more or less cranky & irritable

" 16 day by day. Goes out walking, occasionally. Habit as clean. Apl 16/94. Up a ward. Appetite is

" 20 good; bowels fairly regular. Apl 20/94. Goes out on the ground nearly every day. Of late, sleeps fairly

" 24/94 well. Is on medicine - Apl 24/94. Patient is very "cranky" & irritable, at times. Apl 25/94. Moved to 13 -

(carried to 72)

1894

Feb 17 [illegible]

" 13 [illegible]

" 14 [illegible]

" 15 [illegible]

" 16 [illegible]

" 17 [illegible]

" 18 [illegible]

" 19 [illegible]

" 20 [illegible]

" 21 [illegible]

" 22 [illegible]

" 23 [illegible]

" 24 [illegible]

" 25 [illegible]

" 26 [illegible] the greater part of the day. Pulse this am. 76. Pm. Pulse 74. Was given 5 gr. morph. today. —

" 28 Feb 28/94. Has slept nightly, about 3½ hours from 13th to 28th Inclusive (as the average). Given ½ grains morphine yesterday; also today. ——— ~~~~

1894

Mar 2 March 1/94. Patient was given ¼ grains of morphine, today. March 2/94. Wt 177½ lbs. Pulse 86. (Has lost considerably in flesh). Was allowed ¼ grains morphine, today.

" 3 March 3/94. Was again put

" 4 on Potii Bromide &c. (see attached nurse's record). Given 3½ gr. Morp. today. Mar 4/94. Complains of

" 5 pain; stomach troubling him; 3½ gr. morph. allowed him today. Mar 5/94. 3 gr. morphine, today.

" 6/7 Mar 6/94. Threatened violence, unless he got morphine. Was given 3 gr. today. Mar 7/94. At times,

" 8 is very cross; Complains of his diet; says "he is starving". Was given ¼ grains, today, as he complained so much of not sleeping. Mar 8/94. Only 2½ gr. Morph. were given him, today.

" 9 Mar 9/94. Mates a great fuss if he does not get morphine regularly: 2½ p. given him today.

" 10 Mar 10/94. Appetite fairly good; bowels constipated, (is given Enemata); has been behaving

" 11/12 himself quite well for the last two days, considering his past conduct. Given ½ gr. Morph. today.

" 13 Mar 11/94. Slept nearly all day. Was given ½ gr. morph. today. Mar 12/94. 1¾ gr. morphine, today.

" 14 Mar 13/94. Went out walking today. Says "we are giving him medicine to make him crazy" - given

" 15 1¾ grains morph. today. Mar 14/94. Visited, today, by friends. Says "he is going to leave the Hospital,

" 16 in a day or so" - Still continues to be cross + cranky; always finding fault; Sleeps, nightly 3 to 4

" 17/18 hours; also sleeps a great deal, during the day. Given 1½ p. Morph. today. Mar 15/94. Appetite is

" 19/20 fairly good. Bowels, as a rule, constipated. Was given 1¼ p. Morph. today. Mar 16/94. Given 1 gr.

" 22 morph. today. Mar 17/94. ¾ gr. morph. today. Mar 18/94. ½ gr. morph. given him today. ~~~~

" 24 Mar 19/94. ¼ gr. morph. today. Mar 20/94. Patient was without morphine today, but given sedative at bed time

" 27 Mar 22/94. Has slept, as the average, only, during the past week; only about 2 or 3 hours, each night.

" 28 Mar 28/94. Has been more restful the past few nights: last night, however, was very restless until after

" 29 1. o'clock. Was given Sleeping dose. Mar 29/94. Restless; 12 M had a passage. at 12.15 was given a

Sleeping dose; afterwards, was very nervous & worse than before taking it. Patient has been restless

and nervous for 12 days past; appetite not as good as usual. Complains of bowels being too free.

" 30 March 30/94. Complains of his bowels troubling him; was up quite often during the night. At 12.25

was given ½ p. morph. for Diarrhoea; 2.25 given medicine; at 2.50 a Sleeping dose. Has been Sleeping

somewhat better, during the past week (4 & 5 hours nightly). Diarrhoea still continues today;

" 31 was given medicine for same. Mar 31/94. Diarrhoea still persists: Given medicine regularly.

Apl 1 April 1/94. Was given a Sleeping dose & was very quiet, last night. To day, is very cranky of late:

" 2 Goes out walking, occasionally. (Patient claims that he was taking morphine which he had bought

" 3 with him, for several weeks after he was shut off by the Dr. April 2/94. 9 PM. Pulse 130. Com-

plains of pain in bowels: given medicine. Wt today, 175½ lbs. Apl 3/94. Given Sleeping dose, at bed-

time. Was quiet and night Nurse did not disturb him, considering he was sleeping (Patient says he was not sleeping)

" 4 Apl 4/94. Has 2 passages of the bowels last night; also had 2, today. Still complains of bowels - Take medicine.

" 5 Apl 5/94. Was given a sleeping dose, last night. Condition of bowels somewhat improved today. ———

" 11 Apl 11/94. At 4. Am, Complained of severe pain in back; got out of bed and walked about in the hall. -

" 15 Apl 15/94. During past 2 week, patient has been sleeping, on the average, 4 to 5 hours, nightly.

Appetite is very good; bowels in fairly good condition: continues more or less cranky & irritable

" 16 to day. Goes out walking, occasionally. Habit as clean. Apl 16/94. Up on ward. Appetite is

" 20 good: bowels fairly regular. Apl 20/94. Goes out on the grounds nearly every day. Of late, sleeps fairly

" 24/25 well. Is on medicine - Apl 24/94. Patient is very "cranky" & irritable, at times. Apl 25/94. Moved to B1 -

(carried to 92)

Personal and Medical History of S. Taylor

SIBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3654.
Residence, Poor-Farm, Burnside.
Date Admission, 14th February 1894.
Admitted by, D. Phelps Hour, 1 PM.
How Sent, O.D. Anderson, Jof C. Goodhue County
Sex, Male.
Age, 82
Civil Condition, Widower
Children, 4 (according to report).
Age Youngest Child, —
Occupation, Farmer
Degree Education, —
Profession Religion, not known
Habits, Unknown
Nativity, Connecticut
Physicians Committing, D. Jacking & B. Dearborn
Correspondents, Mr. Adolph Grasse, Kiesling. Minn

No. for Year, 224.
Insane Relatives, not known
Cause Exciting, not known
Cause Predisposing, not known
Form,
Accompanying Bodily Disorder, Paralysis in left leg.
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, not given
Time of Leaving, 28th February 1894
Time in Hospital, 14 days
Result, Died: exhaustion of Senile Dementia.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

By Dr. Herzog

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

MEMORY:
Past Events, not specially examined
Recent Events, see Remarks below
Special Subjects, } much impaired

PERCEPTIVITY:
Alert or Dull, fairly alert
Correct or Illusive, in the main, Correct.

REASONING POWER:
Ordinary Subjects,
Own Mental State, } very poor
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

A systematic physical examination of this patient was practically impossible on account of his condition. He had suffered from hemiplegia, with subsequent contractures, was nearly blind & was in a very debilitated general physical state. His age appeared to be above 80. He was of a querulous, fault finding disposition at times, excitable. There was failure of mental power & the picture presented that of senile Dementia.

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

DELUSIONS:
Systematized or Not, No very definite Delusions
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Incoherent
Voluble or Reticent, voluble —

Personal and Medical History of S. Taylor

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, WEIGHT, NUTRITION,
WOUNDS OR ABNORMALITIES, blind of left eye.
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,

1894

LEBERT, FICKLE & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Adolph Gross, accompanied by Hans Johnson, with the following history, which is very meagre. Nothing is known as to his habits, history of heredity, supposed cause of this attack, when first symptoms were manifested, number of attack, if subject to any fits, epilepsy etc. Form of the attack is chronic, depressed. Patient has paralysis in left leg. Insanity is now manifested in financial matters, matrimony and fear of being robbed. Has sudden attacks of passion and sometimes is very violent, requiring short intervals of restraint. Is not suicidal. Is of filthy & destructive habits. He has not been under medical treatment. (He came in from town of Pine Island and we have no particulars bearing on his case).

Feb 14 — Feb 14/94. On admission, was put to bed. (S.R. Complexion light; hair gray; eyes blue; condition of skin clean; left hand somewhat disfigured; scars on ankle of right foot; was wet. Is almost helpless; has to be carried into the ward). Feb 15/94. Was quiet and slept 8 hours, last night. — AM. Pulse 78. R 20. Appetite fair; bowels free; no cough noticed. Is restless; talks plainly & distinctly but incoherently. Makes no complaints. Patient is paralyzed in lower limbs. Fourth toe of left foot is partially rotten (gangrene); both eyes inflamed & discharging matter. Feb 16/94. Rested poorly, last night, sleeping but 4 hours. AM. Pulse 94. R 20. Bowels have not moved since yesterday. " 15 " 16 Is still quite restless. Talks incoherently. Feb 17/94. Rested quite well, last night; slept 9 hours. AM. Pulse 84. R 18. Appetite fair; bowels have moved freely. Is quietly behaved, but very talkative. " 17 " 18 Talks in a wandering and childish manner. No complaints or injuries to report. Feb 18/94. Again passed a restful night, sleeping 9 hours. AM. Pulse 74. R 14. Appetite fair but bowels constipated. — Continues restless; drags his chair all around the alcove; talks childishly — Makes no complaints. " 19 Feb 19/94. Slept well (9 hours), again, last night. AM. Pulse 84. R 20. Continues about as above described. " 20 Feb 20/94. Rested fairly well, sleeping 7 hours, last night. AM. Pulse 72 irregular R 20. Behavior quiet. " 21 Feb 21/94. Was very restless & disturbed, and slept only 4 hours, last night. AM. Pulse 82. R 21. Is not so restless today; appears to be more accustomed to his surroundings. Talks in a rambling and disconnected manner. Appetite good; bowels constipated. " 22 Feb 22/94. Restful, sleeping 8 hours, last night. AM. Pulse 96, irregular; R 24. Is more composed than yesterday but talks incoherently, most of the time. Bowels are still constipated. " 23 Feb 23/94. Slept 7 hours, last night. AM. Pulse 88 (intermittent) R 24. Is well-behaved. Appetite good, but constipation persists. Talks a great deal about want of food &c. " 24 Feb 24/94. Rested fairly well, sleeping 7 hours, last night. AM. Pulse 86. R 27. Bowels have moved freely; " 25 another repeat, no change. Feb 25/94. Slept somewhat better (8 hours) last night. Appetite good; bowels " 26 free. AM. Pulse 80. R 26. Is about the same. Feb 26/94. Slept well (9 hours) last night. AM. Pulse 92. R 30. Is slightly restless; talks incoherently in a childish manner. Bowels more regular. Makes no complaints. " 27 Feb 27/94. Slept 9 hours, last night. Is quietly behaved. Patient is very weak & occasionally slips of his " 28 rocking chair on to the floor. Pulse 96, irregular, but strong. R 28. Feb 28/94. Passed a quiet night. AM. Pulse 126. R 30. Has had no movement of the bowels for 2 days. Is quiet. Talks more at all. Appetite seems gone. Makes no complaints. Is getting weaker.

Attendants note. This patient has been gradually growing weaker during the past few days, and he has taken little or no nourishment, now, for forty-eight hours. His condition is so weak, and his pulsation and respiration so accelerated that it appears to be only a question of a

1894

Feb 28 — cont'd few hours till death takes place. — Relatives have been written to —
He gradually sank and died at 11.55. AM. Remains removed. —

— Died —

From 144. Harry Williams

1894 cont'd

April 18 — crackers & milk; also fruit. Was visited by friend, today. April 18/94. For the past few days, has been " 19 very quiet. April 19/94. Has 3 or 4 sores, coming on his body. April 20/94. Is very quiet, today & " 20 appears much weaker than usual. Bowels, as a rule, move regularly, passages very thin and of a light " 21 yellow color. April 21/94. Had a very hard "coughing spell" during the night. Today, was very quiet up " 22 to about 5 PM, when he commenced coughing; also talking to himself. April 22/94. Coughed lightly, at " 23 intervals, during the night. Was visited by brother, today. April 23/94. Was quite noisy, at times, during last night. During last 10 nights, has been sleeping, on the average, about 4 hours, on each. " 24 April 24/94. Quieter than usual during the night. Appetite keeps about the same. Bowels are regular. " 25 April 25/94. Last night, he coughed almost continually, from 8.30 to 10.30. PM. At 2.45 AM, a coughing keep- " 26 April 26/94. Slight "coughing spell" last night. Was also noisy, for some time. Slept very poorly. — " 27 April 27/94. Had 3 "spells" of coughing, last night; was quiet, when awake. Has been sleeping almost all day. " 28 April 28/94. Two very severe "coughing spells," last night. April 29/94. 4 AM. "Coughing spell." — " 30 April 30/94. Had another severe spell of coughing at 11.30 last night. Has been very quiet all day. — Still continues to rest & sleep very poorly: being much disturbed by his coughing. Is growing weaker each day. (See Nurses' record of Pulse. R & T attached hereto). —

May 1 — May 1/94. Had several "coughing spells" during the night. Wt. today, 103 lbs. (has lost of 20 pounds in " 2 weight in past month). May 2/94. Again, coughed incessantly during the night. Was quite restless. " 12 May 12/94. Patient has continued, nightly, to have quite severe "spells" of coughing; has also had same, during the day. There has also been much difficulty in breathing, at times; has also perspired profusely; bowels have moved quite freely. He has complained some of pain in his side. Has occasionally refused his meals. From time to time patient has been visited by relatives. — " 13 May 13/94. Patient has been failing fast for some days, and his relatives have been kept advised of his critical condition. Today, he was taken with especially severe "coughing spells"; breathing, also, was very much labored. During the afternoon, "coughing spells" continued & breathing be- came even more labored; he was also perspiring profusely. Continued to sink rapidly and died at 5.20 PM. Relatives had come up from town & were present at the time of his death.
(For more full particulars and details as to treatment &c, see attached Nurses-notes).

— Died —

Personal and Medical History of John O. Rundquist

HERBERT, PIDLAW & CHAMBERS, DAVENPORT, IOWA

Whole No. 3655.
Residence, Vasa, Goodhue County, Minn.
Date Admission, 16th February 1894.
Admitted by, Dr. Phelps. Hour, 7 Pm
How Sent, O. D. Anderson, Jof P, Goodhue County
Sex, Male
Age, 71 years
Civil Condition, Widower
Children, 3
Age Youngest Child, —
Occupation, Farmer
Degree Education, —
Profession Religion, Ev. Church member
Habits, Good.
Nativity, Sweden —
Physicians Committing, B. Jacking & A. W. Jones
Correspondents, L. J. Rundquist, White Rock Goodhue Co. Minn

No. for Year, 225.
Insane Relatives, Mother.
Cause Exciting, Sunstroke & Epilepsy
Cause Predisposing, Heredity —
Form,
Accompanying Bodily Disorder, Difficult micturition
Suicidal or Not, Has threatened Suicide
Date of this Attack, Epilepsy of about 40 years duration
Duration, about 40 years — Sunstroke July 1893
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 32.
Time of Leaving, 4th March 1894.
Time in Hospital, 16 days
Result, Died; exhaustion of senile Dementia.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

By Dr. Herzog —

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,

Not examined specially (See remarks below)

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

GENERAL DESCRIPTIVE REMARKS:

Patient was brought here in a very weak condition, had had corneal ulcers, until his sight was almost obliterated. Reported as an Epileptic, but no Epileptic paroxysms had been observed. He suffered from enlarged prostate with retention of urine & secondary incontinence from overflow, which condition had lasted for a sufficiently long time to cause a severe eczema of the scrotum. The decrepit & suffering attendant on this condition, combined with his old age, had, no doubt, much to do with the causation of his Dementia. This dementia was almost complete, nothing could be made of the patients' conversation, which consists, merely, of disjointed incoherent mutterings.

Personal and Medical History of John O. Rundquist.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, (was too obtunate & weak to permit being taken) WEIGHT, NUTRITION,
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Size,
Response Light, Accommodation,
SIGHT,
HEARING,
COORDINATION, Arms,
Legs,
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

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

Personal and Medical History of John O. Rundquist

1894

BARKER, PUGLAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy Sheriff Anderson + John Larson, with the following history. — Insanity is hereditary, mother being insane; supposed cause of this attack is Epilepsy + Sunstroke: form is chronic, paranoiacal. Accompanying bodily disorder, difficult micturition. Epilepsy is of about 40 years duration; sunstroke occurred July 1893. This is first attack. Insanity now manifested in nothing in particular. Is not disposed to injure others, but has threatened suicide. Is of filthy and destructive habits during the paroxysms. Has been confined to his room. Been under medical treatment, but particulars not known.

Feb 16 Feby 16/94. On admission, was put on B[1] (3 R. Complexion light; hair gray; eyes blue; Condition of skin good; has small scar on back of hand: bodily condition dirty; behavior (when taken in ward) good.
" 17 Eyes seem very much inflamed + are discharging matter). Feb 17/94. Was somewhat restless but he slept 6 hours, last night. AM. Pulse 76. R 32. Appetite fairly good; bowels constipated, No cough noticed. Is restless; is not easily understood, and he does not seem to understand what is said to him. No complaints
" 18 or injuries to note. Feb 18/94. Again, rest was much broken last night, he sleeping only about 4 hours. — Appetite good but bowels still constipated. Pulse 84. R 28. Very restless. Talk but little + unintelligibly.
" 19 Feb 19/94 Somewhat restless, but sleeping 7 hours, last night. AM. Pulse 82. R 30. Is not so restless,
" 20 today. Walks about ward in an aimless state. Talk is rambling + childish. Feb 20/94. Slept 8 hours, last night. AM. Pulse 72. R 30. Appetite good, but bowels are constipated. Is quietly behaved. —
" 21 Feb 21/94. Was restful + slept 9 hours, last night. PM. Pulse 86. R 24. Appetite good; bowels have moved freely.
" 22 Is quiet and harmless. Talks incoherently + childishly. Feb 22/94. Slept 8 hours last night; was
" 23 fairly restful. AM. Pulse 78. R 24. Bowels are becoming more regular. Feb 23/94. Slept fairly well,
" 24 7 hours, last night. AM. Pulse 80. R 24. Feb 24/94. Again slept 9 hours last night. AM P 79. R 25.
" 25 Feb 25/94. Again rested fairly well, last night. AM. Pulse 82. R 20. Appetite continues good; bowels
" 26 regular. Is very quiet; has not talked any the past 2 days. Feb 26/94. Slept 8 hours, last night; was quiet.
AM. Pulse 92. R 27. Continues quietly behaved. Talks in a low murmur which is quite unintelli-
" 27 -gible. Bowels regular but he discharges his urine involuntarily. Feb 27/94. Slept 7 hours, last night.
" 28 AM. Pulse 84. R 28. Fell off a settee today, + cut his forehead. Was put to bed. Feb 28/94. Was restless and slept but 4 hours, last night. AM. Pulse 90. R 28. Must remain in bed. Talks childishly. Bowels are
slightly constipated. (Patient fell out of bed at 8:00 PM yesterday and cut his left eye. Put to bed on floor).
Mar 1 March 1/94. Again restless and slept only 6 hours, last night. AM. Pulse 92. R 36. Had to be put to bed on the floor, as he would get out of bed, crawl around + get hurt. Talks in a mutter and he can
scarcely articulate. Bowels still constipated. Scrotum is excoriated with involuntary discharge of urine.
" 2 March 2/94. Was very restless and disturbed last night and slept only 2 hours. AM. Pulse 94. R 28. —
Is quietly behaved, but quite restless - Appetite fair, but bowels are constipated. Mutters mostly; can
scarcely speak. Is kept in bed by tying 2 sheets across his body. Cough retired: Makes no complaints.
— Summary, by attendant. His patients behavior was, at first, exceedingly restless, and he kept moving or rather, creeping around, without any apparent purpose and oblivious to his surroundings. His talk was composed, chiefly, of mutterings, with an occasional word interspersed here and there with no coherence whatever. Sleep and rest at night have, as a rule, been poor. Bowels have been constipated, more or less, since his admission. Involuntary discharge of urine rendered the scrotum quite sore; this however has been relieved by an

Personal and Medical History of John O. Rundquist

1894

Mar 2 Contd application of soap + dusting powder. Patient has become gradually weaker, and is now unable to walk. He is apparently weak-minded — Appetite is very poor, and, by instructions, he is given only liquid food. Milk he relishes. Bowels are free, at present.

Patient is apparently getting weaker. His talk is quite rambling + unconnected
" 3 and it is impossible to understand what he wants. March 3/94. Gradually growing weaker. Is somewhat feverish, to-day. Pulse 106. —— Appetite continues very poor. ——
" 4 March 4/94. Is gradually growing weaker and weaker. Relatives have been kept advised of his failing and critical condition. —

Patient continued to fail rapidly, during the day, and Died at 10[35] PM.

Remains were removed by relatives. —

— Died —

From B4.

William Haeuggi

1895

Mar 2/95 Wt 185 pds. P qr. March 31/95. Worked with carpenters, the last two days: works at times,
to also onward. Talks freely. "Wants to get his trial". Habits clean. Physical condition good.
April 1/95. Wt 181 pds. P so. April 6/95. Worked at Carpenter-work. April 30/95. No special change —
30 Does not, of late, complain so much as usual. Reads. Worked some, as above, but lately, has done no work. Talks freely + quite sensibly. Seems anxious to be placed on his "trial" —
May 1/95 May 1/95. Wt 191 pds. Pulse so. May 31/95. "Wants his trial"; says "that tis a shame to keep a
to murderer locked up here + not give him a trial"; becomes very much excited, at times. —
June 30 Goes out walking, but does no work. June 1/95. Wt 196 pds. (Has gained considerably in flesh, of late)
Pulse 100. June 30/95. No special change in anyway: keeps "talking about his trial &c" —
July 1/95 July 1/95. Wt 195 pds. Pulse 94. July 31/95. Behavior good: Talks quite freely: reads some:
to Physical condition good. Clean + tidy in habits. Does no work. Still talks "about his trial" —
Aug 1 Aug 1/95. Wt 196 pds. P qr. Sep 1/95. Wt 197 pds. P 96. Oct 1/95. Wt 199 pds. P 76. Oct 31/95. Quiet
Sep 1 + well behaved, during the quarter; makes no complaints, tho' says "he wants to go home to St. Paul"
Oct 1/31 Is rather decrepit apparently, no change for month to month. He appears healthy + strong.
Nov 2 Nov 1/95. Wt 201 pds. Pulse 90. Dec 1/95. Wt 204 pds. Pulse so. Jan 1/96. Wt 205 pds Pulse 97
Dec 2 Jan 1/96. Transferred to B[3] (on account of a general change of wards). Jan 23/96. Complains of
1896 headache + aching limbs. Jan 24/96. Remained in bed, today. Pulse 100. R 22. T 98 1/5°. Ate nothing, all day.
Jan 23/25 Jan 25/96. Up, onward, during P.M. ate supper today "he feels much better". Jan 30/96. Complains of headache
" 25/30 and severe cold. Jan 31/96. Always quiet + well-behaved. Sleeps well. Appetite good: bowels regular.
" 31 Does out walking daily. Otherwise, condition about same, as for month past. Physical health good.
Feby 1 Feby 1/96. Wt 196 pds. Pulse so. March 1/96. Wt 200 pds. P qr. April 1/96. Wt 203 pds. P 88. April 30/96. Patient remains
Mar 1 in about same condition, month after month; no delusions or hallucinations noticed. Talks well +
Apr 1/30 rationally, always. In very good condition, physically. Making no complaints

See folio 304 Transfer Book "A"

Personal and Medical History of Maurice Bonner

EGBERT, FULLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3656.
Residence, "Transient"
Date Admission, 20th February 1894.
Admitted by, D. Phelps Hour, 7 P.M.
How Sent, Thos. P. Moran, Jof C. Dakota County
Sex, Male
Age, about 38.
Civil Condition, Married (he says).
Children, 4 (he says)
Age Youngest Child,
Occupation, Not Known (was a miner)
Degree Education,
Profession Religion, Catholic Church (he says).
Habits, Not Known
Nativity, Don't know (says Louisiana) —
Physicians Committing, A. Van Beeck & J.C. Fitch
Correspondents, wife Mary Bonner Sacramento Calif.

No. for Year, 226.
Insane Relatives, Don't know
Cause Exciting, Cannot tell
Cause Predisposing, previous attack.
Form,
Accompanying Bodily Disorder, none stated
Suicidal or Not, not known
Date of this Attack, probably recent
Duration, probably short (this time)
No. of Attack, unknown
No. of Admissions, 2nd
Age First Attack, unknown
Time of Leaving, Sept 3. 94
Time in Hospital, 6 mos - 14 days.
Result, Rec

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog, March 14/94.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events,
Recent Events, } Quite fair —
Special Subjects, forgets what he did in Hastings

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

REASONING POWER
Ordinary Subjects,
Own Mental State, } fair, for his condition in life
Special Subjects,

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

DELUSIONS:
Systematized or Not, none at present
Special Subjects,
Transitory or Not,

HALLUCINATIONS: None at present

ILLUSIONS:

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

GENERAL DESCRIPTIVE REMARKS:

Tells a story of going out one night in San Francisco, to get a Doctor for his wife, who was sick; of being then sandbagged & robbed, also claims he then received the head-injury which is the cause of his being insane. Has a roving disposition; no settled place of abode. Tells of his hunting for a man at Hastings who, he claims, robbed him. Says he had delusions while there & recognizes them as such. He adheres to the story of being robbed (now 3 times) & this may be a delusion & may not.

Personal and Medical History of Maurice Bonner

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 1/2 WEIGHT, 153 lbs NUTRITION, Fair, slightly anaemic
WOUNDS OR ABNORMALITIES, See "J.R." on next page.
TONGUE, Tremors, quite marked / reflects tonight } Coatings, none Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, sluggish Accommodation, ready. —
SIGHT, seems somewhat myopic.
HEARING, seems fairly good
COORDINATION, Arms, not impaired — by usual tests
Legs, slightly impaired " "
TREMORS, Hands, quite marked Tongue, quite marked
Facial Muscles, none; slight of eyelids General, none
REFLEXES, Patellar, Equal - about 7 & 8 - somewhat Exaggerated
Other Reflexes,
ARTICULATION, Hesitating, No Slurred, No; quite good
FACIAL EXPRESSION, Good natured.
SENSIBILITY,
HEART, Sounds are forcible; slightly irregular & roughness of 1st Sound, at apex.
LUNGS, seem good -
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 96.	RESP.,	TEMP.,

kept Quiet
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Previous attack ONSET GRADUAL OR SUDDEN, See history
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} No history of heredity brought out.

Personal and Medical History of Maurice Bonner

1894

This patient was brought here by Deputy Sheriff John Wasser with following history. "He is a transient"; habits, otherwise, unknown. Nothing known of family history. Cannot tell cause of this attack. Form is acute (apparently Chronic); no accompanying bodily disorder mentioned. Was picked up by the police and has been confined in Jail for 12 days. He was going about the streets, carrying a club & looking for one that he called Rogers. Number of attacks not known. Says he has been robbed; has killed one of the Robbers & is looking for the other one". Has thus shown some disposition to injure others. Not known if Suicidal. Has no filthy or destructive habits. Says he had a fit stroke". Not known if he has been under medical treatment. —

Note. This man has been here before. (See Vol 23. Page 61. No. 3277); from 21st Feby 1893 to May 25/93 Was uniformly well-behaved during that stay. Showed delusions at time of coming (of being robbed &c and of being private of a flying machine &c), but shortly discarded them. Was very talkative, giving accounts of his travels, losses of property &c, but these seemed always to have an air of uncertainty about them. Commenced to improve a good deal in ability and mental strength after being here about 5 weeks or so. Seemed quite contented all the time. At time of leaving was quite recovered, tho' perhaps unstable mentally. Physical health also, was very good. —

Feb 20 On admission, was put on B^{y}. (S.R. Complexion dark; hair dark gray; eyes brown; condition of skin good. Has marks of 3 crowned tattooed on left arm. Bodily condition (Clean. Behavior good)- Pulse 80. T(a) 99.4. Feb 21/94 - Was restless for 4 hours, Sleeping but 4 hours last night. AM. Pulse 72. R 18. T(a) 98.8. Appetite good; bowels seem free; no cough noticed. Is well-behaved. Slightly nervous - Talks freely; no delusions noted (though he talks of being robbed, which may be a delusion). PM. P 84 T 99.

" 21 Feb 22/94 Slept 7 hours last night; was fairly restful. AM. Pulse 70. R 17. T 99. Is well behaved. Talks freely. Plays games &c. Appetite good. PM. Pulse 72. T 99.2. Feb 23/94 Again, slept 7 hours, last night. Pulse & T(a) are about normal, today. R. also. Feb 24/94. Is well-behaved. Bowels generally free. Plays games &c. Feb 25/94 About as usual. Pulse normal. Feb 26/94 Quiet and uniformly well-behaved. Pleasant in manner; talks freely; makes no complaints. Works some in the ward.

" 25/26

" 27 Feb 27/94. Since last noted, has been quiet and restful at night, Sleeping about 8 hours, on each. Normal.

Mar 2/3 March 3/94. Wt 162 pds. (a gain of 9 pounds in the past 10 days). March 3/94. Continues quiet and well-behaved. Is somewhat restless, at times, by day. During the past few days is rather reticent. —

" 6 March 6/94. Has continued to rest and sleep well, at night. Conduct & behavior, by day, about as usual; somewhat restless, at times. Appetite fair; bowels regular. Plays cards & billiards. Attends services in Chapel; also the patients entertainments. Has no "spells". Is willing & agreeable. Seems quite contented. and is doing nicely. Sleeps, willingly, with the work in the dining-room. Habits are clean. —

" 7/15 Mar 7/94. Was transferred to B^{y} on 3^{d} Inst. Mar 15/94. A quiet and well-behaved patient. Has no "spells" - but is very high-tempered; easily excited. Also, quite restless, at times. Plays games & is quite sociable. -

" 31 Mar 31/94. Uniformly quiet & well-behaved. Has no "regular spells", though quite restless, at times. Is quick-tempered and easily excited. Has liberty of the Grounds & is a good & willing worker about the horse barn

Apl 2/30 April 2/94. Wt 163 pds. Pulse 74. April 30/94. Lives along quietly & Contented by Here. Still working at barn. Is in good physical condition. Habits are clean and tidy. —

May 2/5 May 2/94. Wt 161 pds. Has lost in flesh, the past month. Pulse 68. May 10/94. Has continued quiet & well-behaved. Somewhat restless, at times. Is easily excited. Quick tempered. Has limited

Personal and Medical History of Maurice Bonner

1894 Cont'd

May 15 parole - Works daily about the stables. Appetite good. Bowels regular. Habits clean & tidy - Patient

" 20 was, with several others, today moved to 4th an open ward. May 20/94 About the same. Still works outside about the barn & stables, working willingly & intelligently. Physical health is good.

" 21 May 21/94. Has today permitted to leave alone.

" 23 May 23/94 Word was received, today, from Lakeside, Wisconsin, that patient had been taken up there and, as he appeared to be insane, authorities here were asked to have him sent for. May 24/94. Patient

" 24 was sent for & brought back today by attendant (E. Rocke). He was put on B^{y} - May 27/94. Is restless &

" 27 somewhat excited today. Does not like confinement on the hall. May 30/94 Is quiet & well-behaved.

" 30 seems to have recovered from his "spell". Was transferred to 4th (the open Ward). Works some, outside.

" 31 May 31/94. Has commenced again at his old work, (outside about the stables). Still seems a little nervous at times.

June 30 June 4/94. Wt 158 pds. Pulse 80. Appetite good. Bowels regular - June 30/94 Sleeps & rests well, at night - Appetite good; bowels regular. Works outside daily at horse-barn. Seems quite contented here.

July 29/31 July 29/94. Wt 150 pds (has gained 8 pds, in past month). Pulse 70. July 31/94 Continues quiet & well-behaved. Is very civil & obliging. Works, as usual, outside daily. No further "spells" have been noted -

Aug 8/31 Aug 8/94. Wt 160 pds. Pulse 74. Aug 31/94. No special Change to note, during this month. He works outside daily, about the barn - Is always peaceable, quiet & well behaved. Habits are clean. - Is quite free in conversation - Has not given a hint of any delusions, of late. Health good. For some time, however, has seemed somewhat restless & desirous of leaving here. —

Sep 3 Sep 3/94. Was today permitted to leave for Chicago, where he felt he could Come work. —

Drsch - Nov 9 - 94 -

Trouv 976 John Dimonson 3754

Sept. 10/99. Nurse Sheldon reported that patient received wound on head, inflicted by patient WB. McMon ty with bat. Taken to Infirmary: found to have two wounds on head - both cut through scalp. The dorsal one about 2½ inches long & the anterior one about ½ in: both on parietal eminence of right parietal bone. Sutured by Dr Warnock. o patient put to bed. Bruise on back of left hand noticed. Patient became semi-conscious about 4 h 30 PM & remained so through night. Was Catheterized in evening. Very restless through night. Passed urine at 3 & 4 AM. Sept. 11 T 100 Pulse 60 Resp. 20. Resp. labored. Patient seems conscious of surroundings & recognizes nurses but cannot talk. Has some difficulty with swallowing but takes nourishment. Visited by Dr Mayo and house physician at 7 PM. Temp. 102^{2} Patient beginning to be restless: Bowels moved. passed urine: Slept none through night. Ice Bag kept on head. Patient is more quiet: Rested during night. Bowels moved: Some bleeding from rectum: Patient takes a considerable amount of nourishment. Continues to pass considerable blood. Sept 13 Somewhat restless: appears better & brighter. Tries to talk. Speech has improved. Takes nourishment: Bowels moved & passed urine. Sept 14 Temp. 100 P 80 R 20 Bowels moved. Was Catheterized. Passed some blood in urine: 2 Bm. Appears more stuporous T 99^{6} P 84. R 20.

Sept. 15 Taking peptonized milk Boric acid application to eyes because of acute congestion. Catheterized in afternoon. Clots of blood, passed with urine. Slept some during night. Sept 16 Bladder distended: Catheterized: Continues to take peptonized milk: Pulse very irregular. Temp. 99^{8} P. 88. Talks a good deal but cannot be understood: Has difficulty with swallowing. Sept 17 Breathes easier: 10 AM. Given 1/40 gr. strych. & 1/100 Nitroglycerine Intermittent pulse. Cheyne Stokes breathing: Cold applications to head: glass pep. milk Bowels moved & some blood stained urine passed. Patient is gradually fading: Cannot swallow & is unconscious.

Sept. 18 Stimulation continued: Pulse weak & intermittent. Given nutritive enema: refuses nourishment: respiration shallow & rapid Eyes dull & staring: Pulse very weak: Respiration becoming labored. Given sweat, at 1 AM.

See Folio 100

Personal and Medical History of Edward Meyer.

Returned under "new Warrant"

Whole No. 3367.
Residence, Kinross, Mc Inn
Date Admission, 9th March 1894. 2d
Admitted by, Dr Kilbourne Hour, 11.15 AM
How Sent, H. L. Buck, Jo P., Kinross County.
Sex, Male.
Age, 20. next July.
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, none
Degree Education, probably limited —
Profession Religion, not a Church member
Habits, Fair.
Nativity, Kinross Mcinn.
Physicians Committing, L. H. Keely and G. L. Gates.
Correspondents, (mother) Mrs J. J. Meyer

No. for Year, 274.
Insane Relatives, none
Cause Exciting, probably head-injury 10 years ago
Cause Predisposing, previous attacks
Form,
Accompanying Bodily Disorder, none.
Suicidal or Not, not.
Date of this Attack, probably recent.
Duration, probably short —
No. of Attack, 2d probably —
No. of Admissions, 2nd
Age First Attack, about 19. —
Time of Leaving, July 12. 1896
Time in Hospital, 2 yrs. 1 mo. 7 da.
Result, Improved. Discharged. 11/10/96.

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog, March 12/94. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Seems good.
Recent Events, Impaired, he says
Special Subjects,

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

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

GENERAL DESCRIPTIVE REMARKS:
Admits having been drinking a good deal since leaving here.

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

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

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, Somewhat incoherent
Voluble or Reticent, very voluble.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 127 pds. NUTRITION, Somewhat poor.
WOUNDS OR ABNORMALITIES, See S. R, next page.
TONGUE, Tremors, very slight tremors Coatings, none especial Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, normal Accommodation, normal.
SIGHT, good
HEARING, Seems normal
COORDINATION, Arms, Seems unimpaired, by usual tests

Case No. 3362. Edward Meyer. Vol. 27.
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, not Slurred, not
FACIAL EXPRESSION, Seems Galtic.
SENSIBILITY,
HEART, Sounds are weak.
LUNGS, Seem 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, 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 Edward Meyer.

Returned under "new Warrant"

Whole No. 3367.
Residence, Winona, Minn
Date Admission, 9th March 1894. See
Admitted by, Dr Kilbourne Hour, 11.15 AM
How Sent, H. Buck, Jo P., Winona County.
Sex, Male.
Age, 20, nextt July.
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, none
Degree Education, probably limited —
Profession Religion, not a Church membe
Habits, Fair.
Nativity, Winona Minn.
Physicians Committing, L. A. Keely and G. L. G
Correspondents, (Mother) Mrs J. J. Meyer

No. for Year, 274.
Insane Relatives, none
Cause Exciting, Probably head-injury 10 years ago
Cause Predisposing, previous attack
Form,
Accompanying Bodily Disorder, none.
Suicidal or Not, not.
Date of this Attack, probably recent.
Duration, probably short —
No. of Attack, 2d probably —
No. of Admissions, 2nd
Age, F

EXAMINATION ON ADMISSION.

Exd by Dr Herzog, March 12/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, Quick
MEMORY:
Past Events, Seems good.
Recent Events, Impaired, he says
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, fair
Own Mental State, fair
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Admits having been drinking a good deal since leaving here.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes
Depressed,
DELUSIONS:
Systematized ~~or Not~~, Delusions
Special Subjects,
Transitory or Not,
HALLUCINATIONS: unnoted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, somewhat incoherent
Voluble or Reticent, very voluble.

Personal and Medical History of Edward Meyer

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 127 pds. NUTRITION, Somewhat poor.
WOUNDS OR ABNORMALITIES, See S. R, next page.
TONGUE, Tremors, very slight tremors Coatings, none special Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, normal Accommodation, normal.
SIGHT, good
HEARING, seems normal
COORDINATION, Arms, seems unimpaired, Gait usual
Legs, Good.
TREMORS, Hands, slight Tongue, slight
Facial Muscles, none General, none
REFLEXES, Patellar, Equal, exaggerated, about 9. —
Other Reflexes, slight
ARTICULATION, Hesitating, not Slurred, not
FACIAL EXPRESSION, seems natural.
SENSIBILITY, ✓
HEART, Sounds are weak.
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.,

Reports kept
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 Edward Meyer.

HERBERT, FICKLIN & CHAMBERS, DAVENPORT, IOWA

1894

Was brought here by Sheriff Gay, with the following history of case. Habits, as regards temperance and morality fair. There is no history of heredity. Do not know cause of attack unless it be injury to head received 10 years ago. Form is Chronic, exalted, paroxysmal. There is no accompanying bodily disorder. These attacks have come on at intervals of 2 or more years. Showed delusions + attempted injury to others, from sudden passion. This is probably 3d or 4th attack; last one, last year and 2 or 3 previous to this date. He visits his mother is not his mother and abuses her, and is suspicious of others. He is not suicidal, nor filthy nor destructive. He has been in County Jail 30 days and in Asylum 3 months, in 1893. Has had no medical treatment except while at the Asylum. —

Note — Patient was here before, from June 5/93 to Sept 9/93. During the early part of his then stay, he had a restless excited air about him; later, showed a rather careless indifferent manner; also manifested delusions, as mentioned in history; seemed contented in a lazy, dull way. Was in good health, when leaving — (See Vol 23. Page 245. No 3362). ——————

Mar 9 — On admission, was put on B3 (S.D. complexion dark; hair dark brown; eyes brown; condition of skin good. Bodily condition dirty - Is well-behaved). This patient was committed here under the "Law of 1893" — He was today, returned under "New warrant" from Winneshiek County - Pulse 92 R 20 T 99.6.

" 10 — Mar 10/94. Slept quite well, 7 hours, last night. AM. Pulse 92. R 20. T 99.2. Appetite fairly good; bowels seem regular. No cough observed. Is well behaved, though very restless + walking the hall. - Talks freely; no delusions noted. PM. Pulse 90. R 18. T 99.4. No complaints or injuries to report.

" 11 — Mar 11/94. Slept 7 hours last night; was quiet. AM. Pulse 96. R 20. T 99.2. Appetite good; behavior about as yesterday; works some on ward. PM. Pulse 90. R 20. T 99.4. Mar 12/94. Restless for 3 hours, sleeping but 5 hours, last night. Works some: is restless, walking the floor. Talks to himself and laughs; evidently has delusions. AM. Pulse 94. R 17. T 99. PM. Pulse 92. R 18. T 98.8. Mar 13/94. Again passed a somewhat restless night, sleeping only about 5 hours. AM. Pulse 90. Walks the hall; and talks + laughs to himself. Mar 14/94. Slept 7 hours, last night. AM. Pulse 86. Behavior about as above.

" 15 — Mar 15/94. Again slept 7 hours, last night. AM. Pulse 86. Appetite fairly good. Is restless and uneasy.

" 16 — Mar 16/94. Restless 2 hours, but sleeping 6 hours, last night. Restless today; laughing + talking. Does no work. -

" 23 — Mar 23/94. During first 11 nights of this past week, patient has been restless, awaking for a couple of hours but has slept 6 hours, nightly. Pulse has become about normal. The first half day, after coming, he was very quiet and talked freely; but since then, he has been restless + uneasy walking the floor a good deal of the time. Talks to himself + laughs a good deal. Appetite good: bowels constipated, at times. Is in fair physical condition. Works in C2 Ward. No improvement, mentally, has been noticed. Habits are clean.

" 31 — Mar 31/94. Seems to rest well, at night. By day is restless + uneasy, pacing the floor a good deal of the time, talking + laughing to himself. Works in C2. Habits are clean. Appetite good. Bowels regular.

Apl 2/30 — April 2/94. Wt 137 pds. (has gained 10 pounds since coming here). Pulse 98. April 30/94. Continues very restless; walks the hall a great deal. Foolish-acting; talks + laughs to himself. Says "he don't think he will ever get well". Works, daily, very industriously in the C2 Ward. Habits continue clean —

May 1/8 — May 1/94. Wt 141½ pds - a fourteen gain in flesh - Pulse 82. May 5/94. Walks restlessly about, talking and

" 31 — laughing to himself. Legs and bottom out + sore. May 31/94. Apparently rests well, at night. Appetite good: bowels move freely. Is quiet + well-behaved though, at times, very restless + walking the floor. Works in the C2 hall. Talks quite freely but, at times, talks + laughs to himself. Habits fairly tidy.

Personal and Medical History of Edward Meyer.

1894

June 1/30 — June 2/94. Wt 148 pounds (a further gain, in the past month). Pulse 86. June 30/94. Is about the same. Is talks freely + sensibly; no delusions noted, of late. Legs are still somewhat sore. He works in C2 Ward.

July 1/7 " 8/31 — July 2/94. Wt 146 pds. July 7/94. Complains of not feeling well, today, but did not go to bed. July 8/94. About, as usual; feels better. July 31/94. Appetite continues good; bowels regular. Talks to himself and swears and cries, at times. Is very restless, walking the floor a good deal of the time. Works in C2 -

Aug 1 " 31 — Aug 2/94. Wt 140 pds; has lost some in flesh, in the past month, without apparent cause. Pulse 96. - Aug 31/94. Nothing special to report, since general note of last month. Still restless + very noisy at times. Habits clean.

Sep 1/30 — Sep 1/94. Wt 146 pds. Pulse 84. Sep 30/94. Quite noisy, at times. Takes "spells" of crying + talking and using profane language. Evidently, still holds delusions. Wants to kill some woman. Works in C2 -

Oct 1/31 — Oct 1/94. Wt 146 pds. Pulse 74. Oct 31/94. No special change. Still shows delusions. Clean. Works in C2 -

Nov 2 — Nov 2/94. Wt 145 " " 86. Dec 2/94. Wt 144 pds. Pulse 82. Jan 2/95. Wt 145 pds. Pulse 80 -

Dec 2 to Jany 31 1895 — Jan 31/95 - Is noisy + loud talking, from time to time; gesticulating; talks freely + sensibly, when addressed. Is clean + tidy in his habits - Reads some; plays games. Works on the "Infirmary Ward", Daily -

Feb 1/28 — Feb 1/95. Does not work on I2. Feb 17/95. Noisy, at times. Feb 28/95. Still noisy, at times; but, otherwise, behaves very good - Reads. Talks freely - Plays games - Clean + tidy. Physical condition good -

Mar 1/ " 15/31 — March 2/95. Wt 144 pds. Pulse 86 - March 15/95. Very noisy, part of the day. Works some on ward. March 15/95. Complains of headache; did not get up till 8:30. March 31/95. Frequently noisy - Works on ward. Does not walking - Talks freely + sensibly, when addressed. Says that he is crazy". —

Apl 1/ " 30 — April 1/95. Wt 145½ pds - Pulse 76. April 7/95. Began working with painter, today. Helps willingly - Apl 30/95. Still noisy, at times - Says "that he is crazy" - Works daily with painters - Habits clean -

May 1/31 — May 1/95. Keeps about his usual weight. Pulse 72. May 31/95. No special change. Talks loudly and "hallows", at times. Makes no complaints; Seems contented here - Bowels constipated, at times.

June — " 30 — Is a good deal of the time, is working outside, with the painters. June 1/95. Wt 147½ pds. P 108. June 30/95. Has been working outside with painters, quite steadily, up to today, but became so very noisy, they would not take him out any longer: talks loudly + pounds his head: otherwise, behaves well. Is in good physical condition. July 1/95. Wt 148 pds. Pulse 96. July 31/95. No special change: occasionally, does odd jobs of work about the premises, cleaning windows etc.

July 1/31 — Aug 1/31 — Aug 1/95. Wt 148 pds. Pulse 76. Aug 31/95. Generally cheerful + well-behaved. Plays cards + reads + sews, when in-doors. Works outside, considerably, with the painters. At times, noisy: "imagines he is whipping some person + will make hideous faces + noises at the same time". Health seems good.

Sep 2/ " 30 — Feb 2/95. Wt 150 pds. P84. Sep 18/95. Works now only occasionally with painters: inclined to be idle. Sep 30/95. About as usual. Still makes grimaces + goes thro' above peculiar actions, cursing + swearing at some women, who, he claims, southin here. Oct 1/95. Wt 143 pds. P 100. Oct 15/95. Works in kitchen, occasionally; also with painter: complained of headache + severe cold, today. Given medicine. Oct 19/95. Feels much better, today. Oct 21/95. Worked with painters, 8 days.

Oct 1/ " 31 — Oct 31/95. Dr. S. notes: at times, fairly well-behaved and intelligent, but restless: at others, has frequently "noisy spells", but can control himself for a few minutes, if spoken sharply to. Says, at these times, that he is "pretty crazy". Nov 15/95. During past week, has been troubled by a sore throat: now better. Nov 30/95. Some quiet, of late + "noisy spells" less frequent. Works in kitchen, every day.

Nov 10 " 30 — Dec 1/95. Wt 142½ pds. P 90. Dec 31/95. No special change. Jany 1/96. Transferred to B3, on account of a

Dec 2/ Jan 2/96 — general change of wards. Jany 31/96. Keeps about the same. Is quiet. Works well.

— carried to page 60 —

Personal and Medical History of Peter Dalen

LIBERT, FICLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3663.
Residence, Dennington, Mower Co. Minn
Date Admission, 13th March 1894.
Admitted by, Dr Kilbourne Hour, 7 P.M.
How Sent, S. S. Washburn Jct P. Mower County.
Sex, Male -
Age, 24.
Civil Condition, single
Children, None
Age Youngest Child,
Occupation, Farm Laborer.
Degree Education, Probably good.
Profession Religion, Church member.
Habits, - Good -
Nativity, Norway
Physicians Committing, H.W. Allen and A. Macdonald
Correspondents, Halvor J. Dalen (Brother) Ortiander, Fillmore Co.

No. for Year, 233.
Insane Relatives, None.
Cause Exciting, not known.
Cause Predisposing, not Stated.
Form,
Accompanying Bodily Disorder, None known
Suicidal or Not, Not.
Date of this Attack, Last June (1893)
Duration, about 9 months -
No. of Attack, 1st, probably
No. of Admissions, 1st
Age First Attack, about 23.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr. Herzog, March 20/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused
Quick or Sluggish, Sluggish -
MEMORY:
Past Events,
Recent Events, Seems poor
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, seems Correct
REASONING POWER:
Ordinary Subjects,
Own Mental State, Poor
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes
Depressed,
DELUSIONS:
Systematized or Not, Unsystematized "of having
Special Subjects, been mesmerized" -
Transitory or Not,
HALLUCINATIONS: None detected
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Incoherent
Voluble or Reticent, Markedly reticent

GENERAL DESCRIPTIVE REMARKS:
Patient's manner is restive & obstinate; when asked a question, he turned, frequently not answer; and, when he commenced to answer, he would stop, after saying a few words, grin idiotically & refuse to go on. He seemed terrified at the Physical examination & begged to have it omitted. He refused to answer questions & consequently the examination is somewhat unsatisfactory.

Personal and Medical History of Peter Dalen

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 160 pds. NUTRITION, Somewhat poor; ends of fingers some what clubbed. Yellowish tinge to eyes.
WOUNDS OR ABNORMALITIES, See S. R., next page. -
TONGUE, Tremors, Marked Coatings, large, flabby, tooth marks Promptness Movement, Slow
PUPILS, Equality, Equal Size, Somewhat dilated
Response Light, Sluggish Accommodation, Sluggish -
SIGHT, probably good
HEARING, Seems to be good.
COORDINATION, Arms, somewhat impaired by usual tests
Legs, Good. " "
TREMORS, Hands, Marked Tongue, Marked
Facial Muscles, of those about mouth General, tremor of eyelids
REFLEXES, Patellar, Equal; very much exaggerated - about 10. -
Other Reflexes, ankle - clonus not brought out -
ARTICULATION, Hesitating, ✓ Slurred, ✓
FACIAL EXPRESSION, Changeable; semi-idiotic -
SENSIBILITY, ✓
HEART, Sounds somewhat accentuated; no murmurs.
LUNGS, left supraclavicular space somewhat depressed. -
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,

Reports slept

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,

EGBERT, FICKLE & CHAMBERS, DAVENPORT, IOWA

1894

This pratient was brought here by Sheriffs Deputy Ole St. Vinje, with following history of case. Habits are good. No history of heredity. Form of attack, chronic. Complains somewhat of headache. First symptoms of disease were manifested last June (1893), by leaving places where he was working, without cause, and leaving his pay undrawn; by restlessness and uneasiness. This is, probably, the first attack. Insanity now manifested by his refusing to talk upon matters of business; stays out-doors nights; often, night after night. Patient has shown no disposition to injure others; is not suicidal: is slightly destructive of clothes. No bodily disease or head injury known of. Has been confined and in care of attendant. Has been under medical treatment, but did not take the medicine after it was prescribed.

Mar 13 March 13/94. On admission, was put on B³. (J.R. Complexion light; hair brown; eyes brown; condition of skin good. Bodily condition clean. Behavior good). March 14/94. Was restless, sleeping but 1 hours, during last night. AM. Pulse 88 R 20 T@ 100. Appetite fairly good; no cough noticed. Is well behaved

" 15 March 15/94. AM. Pulse 75. T@ 99. Appetite good; bowels moved, behavior quiet. Appears to be rather

" 16 dull and stupid; standing most of the time; does not want to sit down. Mar 16/94. Probably sleeps

" 17 well, at night. Appetite good; bowels regular. Mar 17/94. Slept well, 8 hours, last night. AM. P 75 T@ 98.8. Appetite good; bowels normal. Was stubborn & contrary, when out walking, today.

" 18/19 Mar 18/94. Again rested well, last night, sleeping 8 hours. AM. Pulse 78. T 99. Mar 19/94. Was very restless for 6 hours, last night, sleeping but 2 hours. AM. Pulse 75. T@ 98.8. Appetite fairly good. Bowels regular. Cries sometimes & appears to be scared over something. Talks a good deal about going home.

" 20 Mar 20/94. Again passed a poor night, last night; sleeping only 3 hours; was restless 6 hours or so. has scarcely partaken of any food during past 4 meals, & appears to be growing worse. Is very

" 21 restless, calling for his clothing & "wants to go home". Mar 21/94. Rested & slept well, all last night. Appetite poor: bowels seem regular. Is restless & afraid; contrary & stupid; also cries occasionally.

" 22 Mar 22/94. Was somewhat restless, but slept 6 hours, last night. Appetite is still poor. Is quietly behaved; hardly ever speaks; when asked a question, will hesitate before answering; always watching his chances for getting out of the door - Today, came very near being successful, when the Painter opened the door. Mar 23/94. Slept well, last night. Appetite continues poor; Bowels irregular. Is stubborn & contrary, especially about taking medicine.

" 24 Mar 24/94. Slept 6 hours, last night; was somewhat restless. Appetite is improving a little. Bowels seem regular. Mar 25/94. Slept & rested well, last night. Appetite quite good. Bowels have moved.

" 26 Mar 26/94. Appears to be improving some; is not so restless as at first coming; seems more contented.

" 27 Mar 27/94. Does not seem as bright this morning, as yesterday. Cries quite frequently, today. —

Summary. Appetite has been good, at times; at others, very poor. As a rule, he has been quite dull and stupid; also quite contrary; very restless, at times; hardly ever sitting down. Appears to be afraid of something. Talks very little. When asked a questions, hesitates before answering, if answering at all. Sometimes will stop in middle of a sentence & begin to cry. Has frequent "crying spells" - says he is afraid he will never get out of here. (His trouble appears to have originated in love affairs: Affidavit)

" 30 Mar 30/94. Started to run away, when out walking today. Has caught and brought back.

" 31 Mar 31/94. Continues about as described in above "Summary". - Habits clean but is untidy about clothing.

Apl 2 Apl 2/94. Wt 151 pds. Has lost some in flesh, without apparent cause, as he does not complain of ill feeling.

1894

Apl 15 Apl 13/94. Appetite is very poor; hardly eats anything; has been crying more than usual of

" 26 late, and still manifests delusions of "fear". Otherwise, no change to note. Apl 26/94. Started

" 27 home away, today, while out walking with the rest. Was captured & brought back. Apl 27/94. Was struck

" 30 by a fellow-patient (Peter O. Marken) over the eye, marking it slightly. April 30/94. Appetite poor; sometimes refuses meals altogether: will sit at table, & act as if he was afraid & quite frequently cries about something. Bowels apparently regular. Behavior is stubborn & contrary; is always watching for an opportunity to escape; tries to get out when someone goes through the door. Stands up most of the time. Habits clean, but he is untidy about his clothing. Does no work. Evidently still holds to his delusions. —

May 1/8 May 1/94. Wt 162 pds. (Has gained 11 pds in past month). Pulse 76. May 8/94. Is quietly behaved; reticent; hardly ever speaking to anyone. Stands up in hall, most of the time: has frequent "spell" of crying. - Habits are clean, but heir untidy about his clothing. Still inclined to be contrary & stubborn, at times.

" 28/31 Was thus forced to B¹ today - May 28/94. Two friends came to see him, today. May 31/94. No noticeable change. — (Yesterday, got into trouble with another patient (Dickinson); was thrown on floor & received a cut over the eye) —

June 1/30 June 1/94. Wt 153 pds. Pulse 81. June 30/94. Patient is of a mean disposition; troublesome; always trying to get out & make his escape. Has "spells" when he will cry for 20 minute, at a time. Has delusions. Says that everybody is trying "to do him an injury". Appetite is poor; but bowels are regular. —

July 4/31 July 4/94. Wt 170 pds. (is still gaining in flesh). Pulse 68. July 31/94. General notes for past few months still hold good. Is still subject to "crying spells" - Conduct & behavior about as usual. —

Aug 13 Aug 1/94. Wt 169 pds. Pulse 72. Aug 31/94. Keeps about the same. Much inclined to make his Escape, when outside. Has "spells" of laughing to himself & has other "peculiarities". While out walking, will go in front of every team, if allowed. Is very quietly behaved. Does some work upward.

Sept 2/30 Sept 3/94. Wt 170½ pds. Pulse 114. Sept 30/94. Has changed some. Now, a troublesome patient. Is always trying to escape. Quite contrary & stubborn. Has "spells" of laughing to himself. Works some.

Oct 2/31 Oct 2/94. Wt 174 pds. Pulse 76. Oct 31/94. No change noticeable, since the last report. —

Nov 2/30 Nov 1/94. Wt 177. " 68. Nov 30/94. Appears to be about the same. No delusions noted, but he seems to be quite melancholy & will sometimes cry. Inclined to be alone. Has but little to say. Does some work upward.

Dec 3/31 Dec 3/94. Wt 171½ pds. Pulse 82. Dec 30/94. Three friends called to see him. Dec 31/94. Is somewhat stubborn.

1895 Jan 3/31 Otherwise, no special change to note. Jan 3/95. Wt 170 pds. Pulse 84. Jan 31/95. Is quite obstinate. Has hallucinations. Is discontented. "Wants to go home" & tries to escape, when out walking. Works some upward. —

Feb 2/10 Feb 2/95. Wt 169 pds. Pulse 90. Feb 10/95. Works upward; seems improving some, mentally.

" 28 Feb 28/95. Appetite good: bowels regular. Makes no complaints. Still has delusions. Works upward. Seems making improvement mentally, (and physically). March 2/95. Wt 182 pds. P 80

March 31 March 31/95. Behavior good. Physical condition good (though has lost some in flesh). Mental condition about same, as last reported; Still has delusions. Works upward. Apl 1/95. Wt 178½ pds. (Has been steadily losing in flesh, the past 4 months, yet has not complained of any ill feeling). Pulse 84.

Apl 1 " 17 Apl 17/95. Complained of headache & soreness in lungs, remained in bed, part of the day; Appetite is fair. Pulse 94. Apl 18/95. Up, upward. Apl 19/95. Around again & working upward —

" 18/19 " 30 Apl 30/95. No special change. Has not seemed to improve any of late. Works some upward

May 1/31 May 1/95. Wt 186 pds. Pulse 84. May 31/95. Appetite good: bowels regular. Behavior good. Has many delusions & talks foolishly, at times. Physical condition good. Works upward.

(Carried to 12)

Personal and Medical History of John Wecker

ROBERT, FOLAN & CRAMBERS, DAVENPORT, IOWA

Whole No. 3605.
Residence, St Paul. Minn.
Date Admission, 17th March 1894.
Admitted by, Dr Phelps Hour, 7 P.M.
How Sent, John. B. Olivier J.P.C. Ramsey County
Sex, Male
Age, 36.
Civil Condition, married
Children, 2
Age Youngest Child, —
Occupation, Laborer
Degree Education, probably fair
Profession Religion, Catholic
Habits, Temperate
Nativity, Luxemburg —
Physicians Committing, C. F. Hoolway and Jacob Markoe
Correspondents, Mary Wecker (wife) cor. 3d & Jerry Sts St Paul, Minn

No. for Year, 235.
Insane Relatives, None known
Cause Exciting, not known.
Cause Predisposing, Previous attack
Form,
Accompanying Bodily Disorder, habitual headache
Suicidal or Not, not
Date of this Attack, 6 years ago
Duration, 6 years — (off & on) —
No. of Attack, 2nd
No. of Admissions, 2nd
Age First Attack, about 30 —
Time of Leaving, Apr. 5. 1898
Time in Hospital, 4 yrs. 19 d.
Result, Discharged July 30. '98 Recovered

EXAMINATION ON ADMISSION.

Seen by Dr Herzog, 11th April 1894.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Recent Events, Special Subjects, Good —

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

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

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

DELUSIONS:
Systematized or Not, Special Subjects, Transitory or Not, unsystematized and a general, Delusive train of Thought.

HALLUCINATIONS: none

ILLUSIONS: none

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

GENERAL DESCRIPTIVE REMARKS:

Says this one-sided headache first came about 5 years ago. This general delusive train of thought is manifested in the instance where he mentioned that he believed that the black rings under his eyes were caused by a woman, with similar "rings" looking at him. Patient's Manner is somewhat depressed; worrying considerably over the "Hard Times". Denies any syphilitic infection: careful questioning fails to elicit anything suspicious.

Personal and Medical History of John Wecker

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 Feet 6½ WEIGHT, 170½ pds. NUTRITION, Good
WOUNDS OR ABNORMALITIES, See "S R" on next page.
TONGUE, Tremors, fine, of right side Coatings, Yellowish, at base. Promptness Movement, somewhat slow; Deviates to right —
PUPILS, Equality, Equal Size, normal ; Conjunctiva somewhat injected
Response Light, ready Accommodation, Excessive. — Dark rings under Eyes.
SIGHT, Good
HEARING, Seems good
COORDINATION, Arms, Seems good) Normal test.
Legs, Seems good " "
TREMORS, Hands, none Tongue, fine (as above).
Facial Muscles, Slight of Eyelids General, none
REFLEXES, Patellar, Equal — about 6 — D. P. Scale
Other Reflexes,
ARTICULATION, Hesitating, No Slurred, Foreign accent
FACIAL EXPRESSION, about normal, tho' somewhat depressed.
SENSIBILITY,
HEART, Sounds are muffled.
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, Records Kept

HISTORICAL.

LENGTH OF INVASION, 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,

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1894

This patient was brought here by a Sheriff's Deputy, with the following history. Habits are temperate. No history of heredity known. Cause of attack is not known. Form is Chronic and depressed; accompanying bodily disorder, habitual headache. First symptoms of disease were manifested 6 years ago. This is 2nd attack. Insanity is now shown, at first, in religion. He believes he has to follow and fulfil the decrees of his fortune as foretold to him. Patient is not suicidal; nor is he filthy or destructive. There is no history of any bodily disease, convulsions or ever of injury to the head. Has been in this hospital before, as mentioned in note below.

Note — Patient was here from July 19/93 to Oct. 6/93. On his examination at that time, in office, he gave an account of a one-sided trouble (probably cerebral) for which see "remarks" made at that date. — During first portion of his then stay, he had a quiet and reserved air; was intelligent in appearance and did not speak of any of his hallucinations; complained quite frequently of headaches. In the 2nd month, he seemed to make good improvement; talked quite rationally; sometime before going home, he seemed quite clear mentally and had not complained of any headaches. Was also in good physical health + quite cheerful, at time of his leaving. (See Vol 23 page 34+5. No 3440)

Mar 17 — March 17/94. On admission, was put on B3. (S.R. complexion dark; hair dark; eyes gray. Condition of skin good; forefinger of left hand stiff. Bodily condition clean. Behavior good). Pulse 90. R 18. Te 99.2.

" 18 — Mar 18/94. Was restless for 4 hours, sleeping but 4 hours, last night. AM. Pulse 90 R 18 Te 98.8. Appetite good; bowels seem regular, as a rule; is well-behaved; talks freely; no delusions noted. PM. Pulse 92 R 17 Te 99. Works some on the ward; no complaints or injuries to report. Mar 19/94. Slept quite well, (8 hours), last night. AM. Pulse 94 R 17. Te 99. Is well-behaved. Talks freely + sensibly; helps with work.

" 20 — PM. Pulse 96 R 19. Te 99.2. Mar 20/94. Again, rested + slept well, last night. AM. P 86. R 17 Te 98.8.

" 21 — Appetite good; complains of pain in head. PM. Pulse 84. R 17. Te 99. Mar 21/94 AM. Pulse 80.

" 22/23/24 — Mar 22/94. PM. Pulse 88. Mar 23/94. AM. Pulse 80. Mar 24/94. Since last noted, has continued to rest and sleep well, at night. Appetite good; bowels have tendency to constipation, at times. Talks freely + sensibly. Works well + willingly on the ward. Mar 31/94. During this, the second week of his stay, patient has been uniformly quiet and restful, at night, sleeping 8 hours, or each. Has been quiet + well-behaved from time of coming on this ward. Pulse has been about normal. He talks freely; shows no delusions. Appetite is good; bowels constipated, at times; plays games etc + seems in good spirits. Complains, quite frequently, of pain in head. (Patient is about in same condition, as on 1st admission).

Apl 2/20 — Apl 2/94. Wt 175 pds. (a slight gain since coming). Pulse 92. Apl 30/94. Apparently, continues to rest and sleep well. Is uniformly quiet + well-behaved. Talks freely; makes no complaints. Reads some. Plays games. Always ready + willing to help with the work. Physical condition is good. Clean + tidy in habits. —

May 1/10 — May 1/94. Wt 175 pds. Pulse 74. May 10/94. Has been working, outside, for the past week, off + on, helping Mr. James, the farmer, putting up telephones etc. May 15/94. Always quiet + well behaved. A willing worker on the ward + occasionally helps outside. Talks fairly freely. Makes no complaints. Transfered to B3 today. —

" 18 — May 18/94. Quiet + well-behaved. Otherwise about the same. Was today moved to A1. "To spell" noted.

" 31 — May 31/94. Apparently rests + sleeps well, at night. Appetite good; bowels regular. Uniformly quiet and well-behaved. Willing + obliging. Works well in dining-room. Seems much improved.

June 1/30 — June 1/94. Wt 183½ pds (a gain of 7½ pds, in past month). Pulse 90. June 30/94. Continues about as usual. Quiet + well-behaved, at all times. Gives no trouble. Makes no complaints. Is always

1894 (Cont'd)

June 30 — willing to work + works intelligently. Habits are neat and clean. Talks freely + sensibly. —

July 9/31 — July 9/94. Wt 186 pds. Pulse 84. July 31/94. No special change to note. Physical condition Good.

Aug 3/31 — Aug 3/94. Wt 180 pds. Pulse 72. Aug 31/94. Keeps about the same, from month to month. Health is good.

Sept 4/30 — Sept 4/94. Wt 183½ " " 74. Sept 30/94. No material change. Always happy + contented.

Oct 2/31 — Oct 2/94. Wt 183½ " " 76. Oct 31/94. Uniformly quiet + well-behaved. Talks freely + sensibly. Plays games etc. Works occasionally outside + works in dining-room. Physical health is good. —

Nov 1/30 — Nov 1/94. Wt 186½ pds. Pulse 70. Nov 30/94. Seems happy + contented. Behaves well. Works very willingly.

Dec 3/31 — Dec 3/94. Wt 185½ " " 64. Dec 31/94. No special change noticeable in patient's condition.

1895 Jan 3/31 — Jan 3/95. Wt 185½ " " 72. Jan 31/95. Appetite good; bowels regular. Behavior good. No delusions noted. Does not worry any about being locked up here. At times, complains of pains in left side of his head. Always appears to be contented. Works in dining room. Physical condition is good —

Feb 2/28 — Feb 2/95. Wt 183½ pds. P 88. Feb 28/95. Appetite good; bowels regular. Behavior good. Habits are clean. Is always willing to assist in work on ward. Talks freely + sensibly. No complaints. Seems contented.

Mar 2/31 — March 2/95. Wt 182½ pds. P 80. March 31/95. Quiet + well-behaved. No change noticed, during the month.

Apr 1 — April 1/95. Wt 185 " " 76. (D[r] S[s]-note. Has been always the same. Has had not very many headaches, at which time, is depressed. Usually quite clear). Apl 30/95. Quiet + well-behaved. Talks freely and sensibly; no complaints of any kind, during month. Always happy + contented. Good + willing worker. Corresponds quite frequently with his people. Physical condition is good. —

May 2/31 — May 2/95. Wt 185 pds. Pulse 90. May 31/95. About the same, from month to month. At times, complains of pains in left side of head. Speaks some of going home. Health good. Works in the dining-room.

June 1/30 — June 1/95. Wt 184 pds. Pulse 86. June 30/95. No change noticeable, in any way. —

July 1/10 — July 1/95. Wt 181 " " R. July 10/95. Mental condition seems good: he eats + sleeps well. Stopped working, 8 days: says he has worked long enough for the State: very anxious about going home.

July 31 — July 31/95. About the same: seems well, mentally. Talks about going to Dakota, to his sister. Health good

Aug 1 / Sept 2 / Oct 1/31 — Aug 1/95. Wt 180 pds: Pulse 64. Sept 2/95. Wt 182 pds. Pulse 74. Oct 1/95. Wt 181½ pds Pulse 72. Oct 31/95. Eats + sleeps well. Talks freely + sensibly. Plays games etc: is indolent + has not done any work of late. At one time, was very anxious about going home, but now contented now + does not want to leave until Spring. Corresponds with wife + sister, quite frequently. Health good.

Nov 2 / Dec 3 / 1896 Jan 1/31 — Nov 1/95. Wt 180½ pds. Pulse 76. Dec 3/95. Wt 179 pds. Pulse 76. Jan 1/96. Wt 180 pds. Pulse 76. Jan 31/96. Does not seem to change any: behaves well: Appetite good: bowels regular: Talks freely and sensibly: has not done much of any work since last Summer: helps some now: Enjoys himself, by playing cards etc. Seems quite contented, + does not say any more about going home. Health is good.

Feb 1/27 — Feb 1/96. Wt 179 pds. P 78. Feb 27/96. Stays in bed, all day: Complains of lame neck + slight head + tooth ache.

Mar 2/31 — Appetite fair: bowels regular. Sanf. 9[th] P 76. Mar 1/96. Wt 180½ pds. P 66. March 31/96. No special change.

Apr 1/30 — April 1/96. Wt 180½ pds. P 66. April 30/96. Patient does not change any: behavior always good. Talks freely: no delusions or hallucinations noticed. Willing + helpful on ward. Talks about going home. Sleeps well —

May 1/96 to Aug 1/97 — Summary Nurses Notes by Dr. Phelps. In Dec. 96 patient had attack of tonsilitis + was sent to sick ward. Having been previously in very good health. Temp. kept up for about 3 weeks. was up to a little over 100 every day. Had a slight cough + a general cold. During Jan patient appeared to be in fairly good health: Complains at times of severe headaches: Kept on extra diet: Since that time patient has remained upon sick ward, spends most of time in a dull, indifferent way: Works little

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Personal and Medical History of Peter Rieckmann

Whole No. 3666.
Residence, Douglass, Minn.
Date Admission, 17th March 1894.
Admitted by, D. Phelps Hour, 6.30 P.M.
How Sent, Thomas Fraser, Jof P. Olmsted County
Sex, Male
Age, 27.
Civil Condition, married
Children, Eight
Age Youngest Child,
Occupation, Farmer
Degree Education, probably fair
Profession Religion, Not a Church member
Habits, Temperate - good morals
Nativity, Germany
Physicians Committing, E.W. Huckfield and Chas F. Zange
Correspondents, (Friend) Karl Kolsch Douglass. Minn

No. for Year, 236.
Insane Relatives, None
Cause Exciting, Injury to head
Cause Predisposing, not stated.
Form,
Accompanying Bodily Disorder, none
Suicidal or Not, not
Date of this Attack, about 6 months ago
Duration, about 6 months
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 46+
Time of Leaving, Apr 27 '94
Time in Hospital, 1 m 10 d
Result, Impr.

EXAMINATION ON ADMISSION.

Exd by D. Herzog, March 28/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Somewhat Confused.
Quick or Sluggish, Somewhat Sluggish
MEMORY:
Past Events,
Recent Events, } Considerably impaired
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull —
Correct or Illusive, In the main, Correct
REASONING POWER:
Ordinary Subjects,
Own Mental State, } Poor
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Patient shows a general failure of mental powers, with no distinct delusions

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Somewhat
Depressed,
DELUSIONS:
Systematized or Not, None detected
Special Subjects,
Transitory or Not,
HALLUCINATIONS: Unnoted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Slightly incoherent
Voluble or Reticent, Quite voluble

Personal and Medical History of Peter Rieckmann

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 140 pds. NUTRITION, is somewhat anaemic; poor; breath is foul. —
WOUNDS OR ABNORMALITIES, See "S.R." on next page. Over union angle of left eye is a scar, movable, which he states was caused by a saw-axe - injured about 4 years ago in centre of forehead, a linear scar - 2 inches in length caused by trephining operation; left frontal region has a circular linear defect, 1½ inch in diameter. These are also several irregular unpigmented scars on right frontal region - look suspiciously like syphilitic scars - also slight scar on left cheek.
TONGUE, Tremors, Fine Coatings, yellowish, attack; Defect in right Promptness Movement, Quite quick
PUPILS, Equality, Some divergent Strabismus of left eye. Left pupil irregular in outline & immobile Size, somewhat contracted - (also has Dysplopia)
Response Light, right responds readily Accommodation, right, somewhat slow to accommodation
SIGHT, Impaired in both eyes; particularly in left. —
HEARING, somewhat impaired. —
COORDINATION, Arms, Is much impaired: Sways considerably; turning quickly, hesitates.
Legs, Impaired, by usual tests Standing unfirst, poor; staggering eyes shut
TREMORS, Hands, None Tongue, None
Facial Muscles, None General, None noted.
REFLEXES, Patellar, Equal — 9 — Dr. P. Scale.
Other Reflexes,
ARTICULATION, Hesitating, Slightly — Slurred, —
FACIAL EXPRESSION, Somewhat blank & peculiar, owing to way he has to use injured eye.
SENSIBILITY,
HEART, Seems good.
LUNGS, Sounds seem good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Probably long ONSET GRADUAL OR SUDDEN, Probably gradual.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations, } No history of heredity brought out. —
Brothers or Sisters,

Personal and Medical History of Peter Rieckmann

1894

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This man was brought here by Sheriff's Deputy with the following history of case. Is temperate and of good morals. No insane relatives. Form of attack acute (?). There is no accompanying bodily disease. First symptoms of the disease were manifested about 6 months ago, by loss of mental power. This is the 1st attack. Insanity now shows by a quarrelsome disposition, though not disposed to injure others. He is not suicidal nor of filthy or destructive habits. Supposed cause of this attack is injury to head. Has not been restrained or confined. - Has had operation performed for depressed facture of frontal bone. -

March — March 17/94. On admission, was put on Vs (S.R. complexion light, hair dark; eyes gray; condition of skin good. Has a small scar on back; first joint on forefinger stiff, on left hand. Bodily condition clean. Is well-behaved. Patient is nearly blind in left eye). See previous page for more full particulars, under head of "Wounds & abnormalities". Pulse 98. R 24. T 100. Mar 18/94. Was restless for 5 hours, last night, sleeping but 3 hours. AM. Pulse 90. R 22. T 99.4. Eats but very little. Walks about hall aimlessly. Talks loud; when asked questions, answers freely; mutters to himself. PM. Pulse 94. R 20. T 99.8. No complaints or injuries to report. Mar 19/94. Was extremely noisy for 2 hours; noisy nearly all night and slept none at all, last night. AM. Pulse 86. R 20. T 99.2. Eats but little; seems very weak; walks aimlessly about; digging about the corners. PM. Pulse 90. R 18 T 99.6. Wet his bed, last night. Mar 20/94. Restless & noisy for 5 hours or so, sleeping but 3 hrs, last night. AM. Pulse 92. R 19. T 99.4. Appetite is very poor. Walks restlessly about hall; talks all the time. "Wants to go home". PM. Pulse 96. R 21. T 99. Mar 21/94. Was restless and noisy for 7 hours and slept only 1 hour, last night. AM. Pulse 90. Appetite still poor. Walks aimlessly about; seems to be dizzy, at times. Pounds on the doors and tries to get out. Mar 22/94. Slept only 2 hours; was noisy for about 6 hours, last night. AM. Pulse 94. Appetite medium. Has a generally insane behavior. Runs about, pounding on the doors; shows, however, no delusions. Mar 23/94. Noisy 6 hours; - sleeping but 2 hours, last night. Bowels constipated. No change in conduct or behavior, by day. Pulse 90. Mar 24/94. Noisy for 7 hours, sleeping but 1 hour, last night. AM. Pulse 92. Appetite medium. Was, today, visited by a friend; was very restless & crying, afterwards. Complains of being cold. Mar 25/94. Again passed a poor night, last night; restless & noisy 6 hours & sleeping only 2 hours or so. Is more quiet, today. Pulse 90. Appetite medium. Mar 26/94. Noisy 4 hours, sleeping but 2 hours, last night. AM. Pulse 92. Appetite fairly good. Walks about hall. Is getting more used to the place, and seems more contented. Mar 27/94. Restless and noisy for 6 hours, sleeping only 2 hours, last night. AM. Pulse 96. Behavior is now good. - Appetite improving some. Patient is very anxious to go home. Mar 28/94. Slept but 3 hours, last night; was restless and noisy for 5 hours. AM. Pulse 96. - Appetite is good; seems gaining in weight. Well-behaved; talks quite freely. No delusions noted. Mar 29/94. Slept 5 hours, but was restless about 3 hours, last night. AM. Pulse 98. About as yesterday. Mar 30/94. Restless & noisy for 4 hours, sleeping but 4 hours, last night. AM. " 94. Walks about hall. Talks of tramps going to kill him &c". Mar 31/94. Restless 3 hours, but slept 5 hours, last night. AM. Pulse 96. Appetite is now good. Is quiet & well-behaved. Works some in the ward. -

Apl 2/94 — April 2/94. Ill 136 hrs. Pulse 100. Slept poorly last night; was quite restless. Apl 15/94. Was, today, visited by his wife & daughter. April 27/94. Apparently, has been sleeping better, of late. Has continued quiet & well-behaved; talks freely & sensibly & has made considerable improvement. Works well in ward.

Was, today, taken home by relatives, on trial.

— Discharged —

Personal and Medical History of Emery L. Obert

From 72.

1894

Oct 20 poorly, today. Still complains of pain in left hip. Bowels again constipated. Oct 20/94. Ate light breakfast & dinner; also 1 pint of eggnog. - Was given bath, in afternoon. Oct 21/94. Ate fairly well, today. Still complains of the pain. Bowels have moved, fairly freely. Oct 22/94. Has been resting fairly well; sleeping 6 to 7 hours, in each of last few nights. Appetite very poor, today. "Wants to starve". Oct 23/94. Since last note, patient has been resting very much better & has been sleeping 7 to 8 hours, each night. Has been eating, since days, fairly well, other days, very well, though sometimes refusing food altogether. Is still on extra diet & takes considerable of milk & eggnogs. Bowels, from time to time, are costive & he requires cathartics quite often. He has "crying spells" frequently & at times delusions are very manifest. He frequently also expresses himself as "determined to starve himself to death". Still complains of pains in hip, though not so much as before. Patient is getting much stronger & gaining in flesh. He is still confined to his bed.

Nov 4 — Nov 4/94. Appetite poor; sometimes he refuses meals. Takes Eggnog during the day; needs considerable urging before eating. Bowels fairly regular. Nov 5/94. Patient is melancholy and has frequent "crying spells". Nov 6/94. Sleeps well, at night. Eats fairly well. Is on extra diet, (beefsteak). Seems getting stronger. Nov 9/94. Shows suicidal tendencies. Talks of "starving to death", or "otherwise killing himself". Still has frequent "spells of crying". Nov 11/94. "Still wants to starve". Nov 15/94. Continues to sleep well. Is still depressed & has "crying spells" frequently. Still expresses his desire to starve". Nov 17/94. Still "wants to starve". Nov 18/94. Asks for a razor, "to cut his throat". Sleeps well, at night. Nov 23/94. Talking of women & children, considerably, today. (Probably some of his delusions). - Nov 30/94. Sleeps well, each night. Appetite medium; requires much urging before he will eat; bowels fairly regular. Patient is still depressed, has frequent "crying spells" & shows still suicidal tendencies.

Dec 1/94 — Dec 1/94. Wt 96 lbs. Is still in bed. Dec 15/94. Patient is steadily confined to bed. Sleeps from 7 to 9 hours, every night. Needs much urging before eating; "thinks there is poison in his food". Sometimes persistently refuses meals & then has to be fed by tube. Says "he wants to starve". Is inclined to melancholia & has frequent "crying spells". Dec 31/94. Rest & sleep at night are good. Patient is steadily confined to his bed. Lies there quietly. Still requires great urging in order to get him to eat; refuses food very often & has to be fed by tube. Still melancholy; has frequent "crying spells" & still has delusions.

1895

Jan 10 — Jan 10/95. At times, refuses food & has to be fed by tube. - Nearly always, requires a good deal of urging before he will eat. Is much depressed & has frequent "crying spells". - Has been steadily confined to his bed, but was got up & placed in roller-chair, a couple of hours, today. - Jan 13/95. Has been eating some solid food, the past 2 days. He is still quite despondent & has "crying spells" quite often. Says "he wants to boil himself in the bath-tub". Jan 15/95. Is up, in roller-chair - for a few hours, each day. Jan 31/95. Sleeps well, at night. Sit up, for a time, in chair, daily. Appetite changeable - some days, will take only solid food, & at other times, only liquids. Bowels are regular. (See Nurse's notes attached).

Feb 1 — Feb 1/95. Wt 92½ lbs. Still in bed. Eats very well of late. Quite despondent; frequent "crying spells". Sleeps well. Feb 2/95. Was got up today, dressed & put on hall. Feb 6/95. Still up. Appetite very good. Feb 10/95. Of late, needs much urging before eating; still very despondent; says "worrying about the girls". Feb 15/95. Sleeps well. Appetite good; bowels regular. Feb 28/95. Has frequent "crying spells" & is very despondent. Wants to kill himself". Is continually worrying about the girls". Has remained up, since the 2nd inst. (See attached nurse's record). March/95. Weight 107½ pounds.

Mar 1 — Has gained some in flesh. March 7/95. Appetite good; bowels regular. He is very despondent

(carried to page 216)

Personal and Medical History of Wm. Henry Saunders (Colored)

EBERT, FIDLAR & CHAMBERS, DIVENPORT, IOWA

Whole No. 3667.
Residence, cor 6th and Cedar Sts St. Paul, Minn
Date Admission, 19th March 1894.
Admitted by, Dr Herzog Hour, 7 P.M.
How Sent, John B. Oliver, Jof C, Ramsey County
Sex, Male
Age, 24 years
Civil Condition, married
Children, None
Age Youngest Child, —
Occupation, Bell boy
Degree Education, not stated
Profession Religion, not a church Member
Habits, Good.
Nativity, River Falls (Wisconsin)
Physicians Committing, F. A. Larkin & Geo. J. Stanley
Correspondents, (address of Mother) Rilla Saunders, cor. 6th & Cedar Streets St Paul Minn

No. for Year, 237.
Insane Relatives, no history of heredity. —
Cause Exciting, Domestic troubles & melancholia
Cause Predisposing, not stated; Epilepsy probably
Form,
Accompanying Bodily Disorder, Anaemia & Epilepsy.
Suicidal or Not, attempted Suicide, "proclivity active.
Date of this Attack, Chronic; of 2 years duration
Duration, 2 years; but had fits from childhood
No. of Attack, not 1st —
No. of Admissions, 1st
Age First Attack, about 22 years
Time of Leaving, Sept 17-94
Time in Hospital, 5 mos. 29d
Result, Re

EXAMINATION ON ADMISSION.

Exd by Dr Herzog, March 28/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Quick
MEMORY:
Past Events, Somewhat poor
Recent Events, Good
Special Subjects, Does not remember what he did while in "Spells"
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, good
Own Mental State, good
Special Subjects,

EMOTIONAL STATE:
Normal, Calm, Yes, at present.
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, None noted
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None noted
ILLUSIONS: None noted
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, quite free

GENERAL DESCRIPTIVE REMARKS:

Habits are somewhat intemperate. Patient states that he has had some domestic trouble & worried a good deal over it; that he had occasional Epileptic fits. Denies having attempted Suicide. Says he acted rather peculiarly, when at Superior, the last year & a half, but has no distinct recollection of the occurrences. His behavior, from his description seems to have been of a paroxysmal nature, but his behavior at the time of this Examination was good. —

Personal and Medical History of Wm. Henry Saunders. Colored

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 2 3/4 in WEIGHT, 117 1/2 pds. NUTRITION, Fair; slightly anaemic.
WOUNDS OR ABNORMALITIES, None noted.
TONGUE, Tremors, slight large tremors Coatings, Yellowish at base; somewhat anaemic Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes —
SIGHT, normal
HEARING, Seems quite good.
COORDINATION, Arms, Legs, } Seems good, by usual tests.
TREMORS, Hands, none Tongue, slight
Facial Muscles, ✓ General, none.
REFLEXES, Patellar, Equal — about q — D. P's Scale. —
Other Reflexes,
ARTICULATION, Hesitating, no Slurred, no — Seems normal.
FACIAL EXPRESSION, normal
SENSIBILITY, ✓
HEART, Sounds seem good.
LUNGS, Seem 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,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Wm Henry Saunders (Colored)

EGBERT, FOLEY & CHANDLER, DAVENPORT, IOWA.

1894

This man was brought here by Deputy Sheriff M. N. Goss, with the following history. Habits are good. There is no history of heredity. Supposed cause of this attack is melancholia and domestic troubles; form of attack paroxysmal — accompanying bodily disorder anaemia, epilepsy: had fits when a child. This is not 1st attack; it is chronic; of 2 years duration. Insanity was shown by threatening to kill family. Is disposed to injure others, from sudden passion. Patient has attempted suicide; propensity not now active, but liable to become so. No filthy habits but has done destructive ones; breaks furniture. No peculiarities of temper &c noted previously shown. He has not been restrained or confined, nor under medical treatment.

Mar 19 March 19/94. On admission, was put in B2 (S.R. colored man; black hair; dark eyes; condition of skin good. Has vaccination marks on left arm. Bodily condition dirty; behavior good).

" 20 Pulse 90. R 20. T @ 99.8. March 20/94. Has restful, sleeping 8 hours, last night. AM. P 86 R 17 T @ 99.6. Appetite good; bowels, as a rule, regular. No cough noticed. Is well-behaved; talks freely and sensibly.

" 21 PM. Pulse 86. R 18. T @ 99.4. No complaints or injuries to report. Mar 21/94. Again, rested & slept well, last night. AM. Pulse 82. R 16. T @ 99.4. Walks quietly about the hall. Talks fairly freely.

" 22 Works when asked. PM " 80 " 17 " 99.2. Mar 22/94. Slept well, 8 hours, last night. — AM. Pulse 82 R 17 T @ 99 2/5. PM. Pulse 90 R 19 T @ 99. Continues quiet & well-behaved. Talks freely.

" 23 March 23/94. AM. Pulse 80. Well-behaved; pleasant and sociable. Laughs & jokes &c. Habits are clean

" 24 March 24/94. AM. " 82. Is about as last described. Is in good spirits & seems quite contented here.

" 25 March 25/94. AM. " 78. Has been resting well the past few nights: Is also well-behaved by day.

" 31 March 31/94. During this 2nd week, Patient has continued to sleep well (7 to 8 hours) each night. Appetite has been good; pulse about normal. Has also been very well-behaved. Talks freely & sensibly; no delusions have been noted. Reads some; plays games &c. Has had no "spells" and no convulsions have been as yet reported. Works well & willingly in dining room; also at the hall. Is on medicine.

April 2/94 April 2/94. Wt 119 pounds (a trifle to gain). Pulse 64. April 10/94. Always well-behaved. A good worker.

" 30 April 30/94. Uniformly quiet & well-behaved. Makes no complaints. Reads; plays games &c; works willingly & intelligently in the ward. Is clean & neat in personal habits. Is on medicine.

May 1/31 May/94. Wt 118 pds. Pulse 72. May 25/94. Helped with work in the kitchen today. May 31/94. Behavior is very good. Is pleasant & agreeable in manner; makes no complaints. No "spells" has been reported.

June 2/30 June 2/94. Wt 120 pds. Pulse 74. June 15/94. Works in the kitchen in the forenoons, for some days past. —

" 30 June 30/94. Still works occasionally in the kitchen. Continues quiet & well behaved: makes no complaints. Is on medicine — no "spells" yet reported. Is musically inclined & plays the snare-drum in the Band.

July 2/31 July 2/94. Wt 123 pds (is gaining slightly in flesh). July 31/94. Works in ward well; also, occasionally in kitchen. Is always pleasant & sociable; agreeable in manner: talks fairly freely; no delusions noted and no "spells" have yet been reported. Walks out daily. Habits clean & neat. Plays still in the Band.

Aug 2 Aug 2/94. Wt 124 pds. Pulse 64. Complains of slight uneasiness in stomach & bowels, today. —

" 3/27 Aug 3/94. Feels all well again, now. Aug 27/94. Was, today, transferred to A1 East.

" 31 Aug 31/94. Continues uniformly quiet & well behaved. Pleasant & agreeable. Habits very clean.

Sept 14/15 Sept 14/94. Wt 121 pds. Aug 15/94. Rests well at night; behavior uniformly good. Plays the snare-drum in the Hospital Band. Always pleasant in manner; cheerful & contented — No "Spells" have been reported since his coming here. Has a limited parole. Helps with ward-work

" 17 Sept 17/94. Was allowed to go home, today. — Discharged —

Personal and Medical History of Gust Dohling

1894 From 7/11 —

given a hot bath, which seemed to effect him a little, so that he opened his eyes. Nurse repeated warm water applications a number of times — Sept 21/94. Patient was given Massage treatment, today.

" 22 Sept 22/94. Hot bath given him at 2.30 Pm & at 4 Pm, & massage) treatment. Both of these seemed to have

" 23 had good results, for the time being. Sept 23/94. Was given a hot bath at 2.30 Pm. He would open his eyes for a short while & repeat something. 4.00 Pm Massage given. Sept 26/94. Was again given hot

" 26 bath & massage) treatment, today. Sept 28/94. Had Stricture of the Meatus; (Cut by Dr. H.) —

" 28 4 Pm. Patient has not passed his urine the last 24 hours; bladder appears quite full. — 4.30 Pm;

" 29 passed catheter & drew about 6 oz of urine; at 8 Pm, again drew about 8 oz. urine. Sept 29/94. Again

" 30 passed Catheter & drew about 8 oz. urine 5.30 Pm. Again drew about 8 oz urine. Sept 30/94. Patient is still confined to his bed & remains in about the same cataleptic state. Bowels moved during the night. He also passed his urine at 8 am & again at 6 Pm — today — at latter hour; bowels moved again. —

Oct 1 Oct 1/94. Wt 94 pds (in underclothes); this shows a loss of 12 pounds in flesh in the past month. Pulse 80.

" 8 Oct 8/94. Patient lies steadily in bed; in a stupor all the time; groaning quite loudly, at times. Takes quite liberal quantities of milk, being fed by nurse, 3 times daily. Passes urine in & soils his bed.

" 31 Oct 31/94. There is no change, from day to day. Lies in bed steadily in above stuporous state. Is growing weaker.

Nov 6 Nov 6/94. Mouth washed daily. Ear has been discharging a sort of thick matter, the past few days. Patient is in the same condition, day after day. Lies in bed in his stupid state; groaning & mumbling something incoherently, very frequently. Passes urine in and soils his bed. Is fed milk, by the nurse, 3 times a day.

" 8 Nov 8/94. Sleeps 7 to 9 hours, every night. Patient seems to be failing & growing weaker. Is loosing flesh, perceptibly. Nov 9/94. Frequently groaning and mumbling quite loudly. Sleeps very well.

" 15 Nov 15/94. Mouth washed every day. Patient is quite noisy at times. Is steadily failing & loosing flesh.

" 24 Nov 24/94. Patient remains, daily, in his stuporous condition; often moaning quite loudly. Ear still discharging some every day. Mouth washed daily. He takes liquid diet only, as usual. Sleeps well.

" 30 Nov 30/94. Patient has failed steadily, during past month. Is fed by nurse, on usual diet of milk. Movements of bowels quite infrequent. Passes considerable urine in bed; also soils bed. Mouth washed every day; ear continues to discharge some. He moans & groans more than usual, of late. Sleep good.

Dec 1/15 Dec 1/94. Wt 91 pds. Dec 15/94. Patient remains in bed, daily, in the above described state. At times, moans & groans a good deal. Has to be fed, daily, by the nurse. Mouth washed every day. He is steadily failing & growing weaker. Passes urine in & soils his bed. He sleeps all night, at times, with open eyes. Dec 31/94. Still steadily keeps his bed. No special change to note, (he is lethargic but not so completely inactive as he was. Dr. H). Still has to be fed by nurse.

1895 Jan 12 Jan 12/95. Sleeps from 7 to 8 hours, at night & continually, during day. Lies steadily in same condition every day: passes urine in & soils bed. Fed, by nurse, liquid diet. Is frequently noisy, for short spells, during night, groaning & moaning. Bowels constipated. Jan 31/95 No change. Still fed, by the nurse. —

Feb 1/15 Feb 1/95. Wt 81 pounds (a loss of 10 pounds in past 2 months). Feb 5/95. Up in roller-chair, 3 hours, during P.M.; kept eyes open most of the time. Feb 6/95. Up in chair, 3 hours, this P.M. Appeared restless & as if he would speak. Feby 7/95. Visited by Dr. Phelps: patient opened his eyes & answered several questions.

" 12 Feby 12/95. Condition does not change much. Is got up daily, for a few hours. On usual diet of milk.

" 19 Feby 19/95. Passes urine in & soils his bed. Has bed sore on left arm, on elbow: same dressed. Feb 23/95 Bed sore worse.

" 24 Feb 24/95. Patient sleeps 5 to 8 hours, every night. Bed sore doing better. His condition keeps about the same.

(Carried to page 200)

Personal and Medical History of Harry Williams

Whole No. 3669.
Residence, Rochester, Minn.
Date Admission, 21st March 1894
Admitted by, Dr Kilbourne Hour, 5:30 PM.
How Sent, Thos. Fraser, Jof P, Olmsted County
Sex, Male
Age, 23 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Has none
Degree Education, probably fair
Profession Religion, not stated
Habits, Intemperate, at one time.
Nativity, Rochester, Minn
Physicians Committing, A.S. Adams & Chas T. Granger
Correspondents, Father Col. D.K. Williams, Rochester, Minn

No. for Year, 239.
Insane Relatives, none
Cause Exciting, Inherited neurosis + exposure
Cause Predisposing, — —
Form,
Accompanying Bodily Disorder, Pulmonary tuberculosis
Suicidal or Not, not.
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, 13th May 1894
Time in Hospital, 1 month; 23 days.
Result, Died; tuberculosis pulmonalis

EXAMINATION ON ADMISSION.

Exd by Dr Eby. April 12/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish,
MEMORY:
Past Events, Good
Recent Events, Poor
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Illusive
REASONING POWER:
Ordinary Subjects, Good
Own Mental State, Very much perverted
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Has delusions of persecution, thinks various town-people are conspiring against him: thinks we have something cooking to put him in.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Depressed
DELUSIONS:
Systematized or Not, not systematized
Special Subjects,
Transitory or Not,
HALLUCINATIONS, has hallucinations: thinks he has seen & heard family talk & been at the ward
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, voluble

Personal and Medical History of Harry Williams

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, ✓ NUTRITION, Not very good.
WOUNDS OR ABNORMALITIES, See "S. R" next page; hacked right arm below elbow, he says.
TONGUE, Tremors, coarse tremors Coatings, coated in places Promptness Movement, Prompt
PUPILS, Equality, unequal; left larger. Size, slightly dilated
Response Light, slight Accommodation, ✓ Iris of left eye adherent in places.
SIGHT, Poor; has nystagmus —
HEARING, Good.
COORDINATION, Arms, Finger to nose, eyes shut, not very correct
Legs, Standing, Eyes shut, some swaying. —
TREMORS, Hands, Yes Tongue, Yes
Facial Muscles, General, Yes; is quite weak.
REFLEXES, Patellar, Equal — about 7 —
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, ✓
SENSIBILITY, normal
HEART, Good.
LUNGS, Bad; has a cavity in right apex.
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,
Father or Pat. Relations,
Brothers or Sisters,
} see History

Personal and Medical History of Harry Williams

1894 LESLEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Sheriff Stewart, with the following history. There is a history of intemperance, at one time; supposed cause of attack is inherited neuroses and exposure: form is acute: accompanying bodily disorder, pulmonary tuberculosis. First symptoms of the disease were manifested several years ago; showed delusions; imagined he was persecuted by his friends; increasing in severity. This is 1st attack. Insanity is now shown by his imagining that his food and medicine are poisoned; refuses to eat and to take medicine; fearful of imaginary foes. He is disposed to injure others from sudden passion. Is not suicidal, nor filthy nor destructive. Patient has been confined not for medical treatment, but was in jail for two months. Has been under treatment for pulmonary difficulty; improving. Has always been of a weak-minded-condition.

NOTE. It was ascertained that he locked himself in his room, nailing up the door; had a butcher knife and threatened to use it on his father; (this was to prevent them sending him here). A.J.K. —

March 21 On admission, was put on C.2 (S.R. Complexion light; hair dark brown; eyes blue; condition of skin good; has a mark on right leg. Bodily condition dirty. Eyes are continually shifting. —

" 22 Patient was put to bed. Pulse 102. R. 30. T. 101.8. Behavior fairly quiet. March 22/94. Restless & uneasy, sleeping but 4 hours, last night. A.M. Pulse 92. R. 36 T. 101.4. Ate very little: bowels in fairly good condition; Is inclined to be stubborn. Shows delusions; "thinks he is going to be cut up and burned". P.M. Pulse 92 R. 32 T. 101.6. Has slept none, today. Has had several "coughing spells" at frequent intervals during

" 23 the day; Complains also of pain in lungs. March 23/94. Very uneasy, restless & disturbed last night and slept but 2 hours. A.M. Pulse 98. R. 30. T. 102.6. Took no breakfast. P.M. Has been continually coughing and raising some blood; very wild & excited, all day; "thinks he is going to be killed". Ate but very little.

" 24 Complains of pain in lungs. Spit up a little blood, this evening. March 24/94. very restless & excited all last night; slept none at all. A.M. Pulse 80 R. 28 T. 100.8: P.M. Pulse 88. R. 34 T. 100.4. Has Eaten but very little, today. Still continues to think he is going to be killed, but, on the whole, has been

" 25 somewhat quieter today. Was put on medicine (Cod-liver oil & emulsion). March 25/94. Again very restless, last night; slept only 3 hours. A.M. Pulse 108. R. 28. T. 101.6. P.M. Pulse 100. R. 28. Was fairly quiet, during the morning, but is excited and restless, this afternoon. Took but little nourishment; talks a great

" 26 deal also has some severe "coughing spells". March 26/94. Was quiet but slept only 3 hours, last night. A.M. Pulse 84. R. 26. T. 100.4. P.M. Pulse 130. R. 26. T. 102.4. Has been very quiet, all day up to 6.30 P.M: then he became suddenly excited and said "thinking" he was going to be burned". Has eaten nothing all day.

" 27 March 27/94. Was quiet, last night and slept somewhat better than previously; slept 3 hours. A.M. Pulse 100. R. 32. T. 100.6. P.M. Pulse 82. R. 28. T. 100.4. Ate no breakfast a dinner, today, but ate a few crackers and drank 2 glasses of milk for supper. Still holds to his delusions; "thinks he is going to be burned".

" 28 March 28/94. Constipated; at 11 P.M. last night, was given pills; was restless during night; slept only 3 hours. A.M. Pulse 88. R. 34. T. 101.; P.M. Pulse 82. R. 30. T. 101.2. Has taken only about 1 quart of milk and some crackers, today: has had very hard "coughing spells". Complains, also, of a pain in lung.

" 29 March 29/94. Again restless, last night, sleeping but 3 hours. A.M. Pulse 106. R. 28. T. 101. P.M. Pulse 80. R. 30. T. 101.6. Complains of pain in stomach and says that movements of bowels are accompanied with pain, also. Has been fairly quiet all day. Has taken about the same amount of nourishment as yesterday.

" 30 March 30/94. Was quiet & slept 7 hours, last night: about 12.15 had some hard coughing spells. — A.M. Pulse 102. R. 30. T. 101.4; P.M. Pulse 92. R. 24. T. 101.4. Has been quite restless all day, talking;

Personal and Medical History of Harry Williams

1894 Con. to

March 30/31 "thinking that he is going to be poisoned". Appetite about the same, as yesterday. March 31/94. Slept but 3 hours, last night; was very restless; at 11.40, had a passage of bowels. A.M. Pulse 102. R. 22. T. 100.4. Slept some this morning. P.M. Pulse 90. R. 24. T. 101. Is restless; talking a great deal; also coughing. Appetite seems to be improving somewhat. Takes quite fair quantities of milk; —

April 1 April 1/94. Has out of bed quite often, during the night. Restless, but slept about 5 hours. A.M. Pulse 92. R. 28. T. 101.4; P.M. Pulse 88. R. 23. T. 101.2. Has been fairly quiet, all day: took a reasonable amount of food;

" 2 still continues to take medicine. April 2/94. At 9.40, last night, had a passage; slept only 3 hours; was very restless. A.M. Pulse 106. R. 30. T. 101.6. P.M. Pulse 92. R. 22. T. 101.6. Will take no solid food, except crackers; drinks considerable milk. Complains of his bowels troubling him; had some very hard

" 3 "Coughing Spells" today. Wt. 122 3/4 pds. Was vaccinated today. April 3/94. Was noisy & restless, last night, and slept only 3 hours. A.M. Pulse 104. R. 22. T. 102.6; P.M. Pulse 104. R. 24. T. 102.4. Has coughed but little, today. Appetite good; is on diet of milk & crackers (chosen by himself); will eat nothing else,

" 4 Except fruit. Has been fairly quiet today. April 4/94. At about 11.40 last night, had a severe "coughing spell"; at 3.30 A.M. has a movement of bowels. Was quite noisy for an hour; slept only 3 hours, during the night. A.M. Pulse 106. R. 28. T. 102.4. P.M. Pulse 112. R. 30. T. 103.6. Has been quite restless, and irritable, all day. Has also had several severe "coughing spells." Appetite fairly good; but bowels are not in very good condition. Summary. Patient has remained steadily in bed, since his coming; for the first 4 days, he would be apparently resting quietly, then he would, suddenly, become quite excited & often ugly; showing delusions; "thinking" he was going to be killed; "always thinking someone was conspiring against him. This seems to trouble him but little, of late. He has very hard "coughing spells" at times, both by day & at night; some days coughing almost continually & raising phlegm; occasionally some blood. Also complains of pains in lungs, at times.

" 5 Appetite poor. Bowels in fairly good condition, the past few days. — April 5/94. Last night at 11 P.M. had a "coughing spell"; at 4 A.M. another. Was fairly quiet, this morning; but restless & coughing in the

" 6 afternoon. Appetite fairly good; bowels regular. April 6/94. At 9 P.M. last night, was quite noisy. Talks considerable in his sleep. Has coughed continually, all day; is very noisy & cranky; after "coughing spells"

" 7 seemed to have difficulty in getting his breath. Appetite is good. April 7/94. Was very noisy last night. Talked & swore frequently, in his sleep. Has been ugly & wild, all day: talking very loud, at times,

" 8 thinking he was going to be killed"; Also having severe "coughing spells". April 8/94. Restless, last night; at 11 P.M. was given a sleeping dose. Was out of bed quite often; also quite noisy, during the night. 10.25 A.M. Bowels have moved. Has a bed sore coming on back. Has been, at times,

" 9 restless and quite noisy, today. April 9/94. Quite restless, last night; while awake, was crying & asking for his folks. He has been fairly quiet, today. Coughs & complains of pain in his lungs.

" 10 April 10/94. Talking a great deal, last night; also very restless & having some severe "spells" of coughing.

" 11 Appetite keeps fairly good. April 11/94. Has been very wild & noisy, all day: has taken but little nou-

" 12 -rishment. (Seclusion shown). Bed sore is growing; it is dressed daily. April 12/94. Is very noisy this morning. (Seclusion). P.M. Is fairly quiet. Wants the door of his room kept locked. —

" 13 April 13/94. Since 2nd inst, has been sleeping nightly, in the average only about 4 hours.

" 15 April 15/94. Was fairly quiet, last night. Appetite quite good; bowels regular. Has also been

" 17 fairly quiet, all day. April 17/94. Coughs a great deal, raises phlegm. Eats nothing but

(carried to 112)

Personal and Medical History of August Hartwig

HERBERT, PUGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3614.
Residence, Town of Milton, Dodge Co Minn
Date Admission, 26th March 1884.
Admitted by, Dr Phelps Hour, 7 PM
How Sent, E. T. Way, J. of P., Dodge County
Sex, Male
Age, 43
Civil Condition, married
Children, 8
Age Youngest Child, —
Occupation, Farmer
Degree Education, Probably fair —
Profession Religion, Lutheran Church
Habits, Morals good
Nativity, Germany.
Physicians Committing, Drs Bidient & Mayhew
Correspondents, (wife) Wm August Hartwig Mantorville, Dodge Co

No. for Year, 2414
Insane Relatives, none
Cause Exciting, Worry about business & over some money
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, None
Suicidal or Not, not.
Date of this Attack, probably recent (2 weeks)
Duration, probably short.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 43.
Time of Leaving, May 28-'84
Time in Hospital, 2 m - 2 d.
Result, Recovered.

EXAMINATION ON ADMISSION.

Exd by Dr Herzog April 9/84.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Seems clear
Quick or Sluggish, quite quick

MEMORY:
Past Events, } Good
Recent Events, }
Special Subjects, poor, in subjects occurring during sentences of attack

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

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

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

DELUSIONS:
Systematized or Not, none brought out
Special Subjects,
Transitory or Not,

HALLUCINATIONS: none brought out
ILLUSIONS: " "

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

GENERAL DESCRIPTIVE REMARKS:

Patient is slightly depressed in manner. His behavior is somewhat peculiar owing, probably largely to his unfamiliarity with the English language. He remembers having been told of his delusions & insane behavior, but has no recollection of them. Claims he had "Egyptian Ophthalmia (probably trachoma) in 1875, when he was nearly blind for about 13 weeks; previous (when about 10 years old) had measles; there, he claims, affected his eyesight. He claims his sight has been very poor since he had this "Egyptian Sickness".

Personal and Medical History of August Hartwig

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, — WEIGHT, 137 lbs NUTRITION, fatty poor; ends of fingers somewhat clubbed.
WOUNDS OR ABNORMALITIES, probably bone osteomyelitis of left radius; has been shot in right arm & forearm; some crushing injury to chest; scars on left leg.
TONGUE, Tremors, Coarse Coatings, heavy white at base, towards anterior brown — marks — Promptness Movement, prompt
PUPILS, Equality, Equal Size, somewhat Contracted
Response Light, Excessive Accommodation, somewhat sluggish
SIGHT, markedly myopic; at present, some Photo Phobia
HEARING, Seems good —
COORDINATION, Arms, quite marked incoordination, by usual tests
Legs, somewhat impaired " "
TREMORS, Hands, some Tongue, Coarse
Facial Muscles, some of eyelids, when facing light General, None noted.
REFLEXES, Patellar, Equal — Seem about 5 — (Dr P's Scale). —
Other Reflexes,
ARTICULATION, Hesitating, no — ~~Slurred,~~ Seems good
FACIAL EXPRESSION, somewhat Depressed; face is "screwed up" on account of his Eyes. —
SENSIBILITY, —
HEART, beat somewhat rapid; apex sounds somewhat muffled, but no murmurs.
LUNGS,
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal, Kept	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,") } no history of heredity brought out. —
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of August Hartwig

1894

This patient was brought here by Sheriff's Deputy, Mr Shuckstaland, with following history. Morals were good. No history of heredity. Cause of attack is worry about business & over loaned money. Form is acute. Began about 2 weeks ago, by wanting to see his children. No accompanying bodily disorder. This is the 1st attack. Insanity is now manifested by the idea that he has too many children and probably a religion. Has threatened to injure others, as above stated. Is not suicidal. Has no filthy or destructive habits: nor has he been subject to any bodily disease, convulsions, head injury &c. He has not been restrained or confined, nor under medical treatment.

March 26/94. On admission, was put on B.r. (S.R. Complexion light; hair dark; eyes brown; condition of skin good. Has a scar on left leg. Bodily condition dirty. Is well-behaved). P 110. R 22. T (a) 100.2. March 27/94. Slept fairly well (6 hours) last night; was restless 2 hours or so. AM. P 100 R 19. T (a) 99.8. Appetite fairly good; bowels constipated. Talks freely, showing no delusions. Complains of pain in breast and stomach. PM. Pulse 108. T (a) 100.2. March 28/94. Again slept fairly well, 6 hours, last night, tho' restless for a couple of hours. AM. Pulse 106. R 20. T 100. Appetite medium. Constipated and complaining of pains in stomach; given salts. Talks freely. PM. Pulse 104. T (a) 99.8. Mar 29/94. Slept 5 hours, restless 3 hours or so, last night. AM. Pulse 104. R 20. T (a) 99.6. Appetite fair; behavior good. PM. Pulse 106 T (a) 99.8. March 30/94. Slept well (8 hours) last night. AM. Pulse 102. Appetite only medium. Tells a story of a sickness before coming here; talks straight and sensibly. March 31/94. Restless for 2 hours, sleeping 5 hours, last night. AM. Pulse 98. Complains still of pain in chest and stomach. Quiet & well-behaved. Talks freely: goes out walking. Bodily habits are good. —

April 1/94. Slept somewhat better, last night (7 hours), tho' restless for about an hour. AM. Pulse 96. Conduct and behavior, by day, about as usual. April 2/94. Again, rested and slept quite well, last night. AM. Pat. Appetite good; talks freely; works some on ward. Wt. today, 136 pds. April 3/94. Restless for 3 hours, but slept 5 hours, last night. AM. Pulse 98. Appetite fairly good; still complains of pains in chest and in stomach; helps some with ward-work. April 4/94. Was restless for 5 hours, sleeping but 3 hours, last night. Complained of being sick during the night & at 3 AM, was given medicine. Pulse (AM) 98. Talks in a somewhat dull and vague way, though with no incoherence (W.P.). April 5/94. Slept well (8 hrs) last night. AM. Pulse 98. April 6/94. Visited by daughter & friends, today. Pulse 96, this morning. April 7/94. AM. " 94. April 8/94. AM. Pulse 96. April 9/94. AM. Pulse 96. —

April 10/94. Since last noted, patient has been restful at night sleeping 7 to 8 hours at each; but, last night, he was restless for 7 hours & slept only 1 hour. Complained of a severe pain in his stomach and vomited some. Appetite on the whole, has been fairly good; bowels have a tendency to constipation. He has been always quiet & well-behaved: talking freely; no delusions have been noted. The pains he mentions generally seem to trouble him at night. He helps some with ward-work. Habits are clean. Patient is on medicine. — April 20/94. Still complains of this pain in his stomach. Patient seems to have grown more depressed, since his admission; has vague delusions, of melancholy character. Says "he defrauded the Railway and wants to confess to every one". April 30/94. Appetite fairly good; behavior is good. He talks quite freely; reads some. Helps some with work on the ward. —

May 1/94. Pt. 137 pds. Pulse 96. May 26/94. Was helping with the work in the kitchen, today. — May 28/94. Behaves well. Talks freely. Works some on ward. Is anxious to go home. Was today visited by wife & friend & was allowed to go home with them.

Discharged

Personal and Medical History of Henry C. Reed

1894 Feb. 21 Cuff

Now 164

Vol. 27 Fol. 161 No. 3884

CASE RECORD.

Patient's Name H.C. Reed Name Disease Name Physician H.H.H.

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms
June 22	98.2	92	20	Received an enema		Enema no effect returned with a little blood
	100	80	20	of water 90°		Night. Slept 1 hr. restless & his; extremely noisy & his. Mittens taken off. Patient requires constant attendance. eyes very yellow all day. Appetite fairly good. bowels costive. 8 PM. mittens put on very restless all day & quite noisy at times Mittens taken off Night. slept 2 hrs very noisy 1 hour. put on mittens Patient very restless, all day and at times extremely noisy mittens taken off put on mittens Slept 4 hrs R. 1 hr. noisy 3 hrs during night. 7 AM. took off mittens. Bowels moved slightly was of a dark color.
7 A.M.				Syringe bath		
" 23	98.4	80	20			
	98.8	76	18			
7 A.M.						
8 P.M.						
" 24	98.6	72	18			
	98.2	72	18			
7 P.M.						
8 P.M.						
" 25	98.4	80	20			
9 3/4 P.M.				Gave enema of warm water		

Recorded by 1 PM. up dressed. transf. to C.3. Nurse.

" 22 but with no effect. Is quite restless this PM. 8.50 PM. Mittens again put on. June 23/94. Was extremely noisy, first 2 hours during night: held in bed from 9 to 20 PM. Slept only 3 hours.

" 23 June 23/94. Has been kept in bed under treatment. Is out of restraint. Extremely noisy, at times restless, took by far night. Has slept very poorly. 1 PM. Up, dressed & transferred to C.3.

carried to Transfer Book A. page 184

Per

1894

ERKERT, PECKAR & Co.

Thi

[illegible]

[illegible]

[illegible]

1894

…y &c.

…rm;

…). P110.

…so. Mk. P100

…. Complains of

…r well, 6 hours, last

…. Constipated and

…Mar 29/94. Sleeps 5 hours,

…avin good. Pr. Pulse 106

…ady medicine. Tells a story

…Restless for 2 hours, sleeping 5

…reach. Quiet & well-behaved.

…an hour. Mk. Pulse 96. Conduct and

…kept quite well, last night. Mk. Pgs.

…5. April 3/94. Restless for 3 hours, but

…ill complains of pains in chest and in

…otless for 5 hours, sleeping but 3 hours, last

…am, was given medicine. Pulse Mk / 98.

…is unchanged (D.P.). April 5/94. Slept well (8 hrs)

" 4 Mar.

night. "

" 5 Talks in a form

" 6 last night. Mk. Qua

" 7/8/9 April 7/94. Mk " 94

…ed 96. April 9/94. Mk. Pulse 96. ——

" 10 April 10/94. Since last noted, 7

…stful at night sleeping 7 to 8 hours at each; but, last

night, he was restless for 7 hours &

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has been always quiet & well-behaved: talking freely; no delusions have been noted. The pains he

mentions generally seem to trouble him at night. He helps some with ward-work. Habits are clean.

" 20 Patient is on medicine. — April 20/94. Still complains of this pain in his stomach. Patient

seems to have grown more depressed, since his admission; has vague delusions of melancholy character.

" 30 says "he defrauded the Railway, and wants to confess to every one". April 30/94. Appetite fairly good;

Behavior is good. He talks quite freely; reads some. Helps round with work on the ward. —

May 1/94 May 1/94. Wt 137 pds. Pulse 76. May 28/94. Was helping with the work in the kitchen, today. —

" 28 Visited by friends. May 28/94. Behaves well. Talks freely. Worksome on ward. Is anxious to go home.

Was today visited by wife & friend & was allowed to go home with them.

Discharged

Personal and Medical History of Henry C. Reed

How 164

1894

Oct 30 good; bowels regular. Eruptions still present on face, hands & body. Talks incoherently & has many

delusions: "is always praying for some one to put him to death." No improvement is noticed.

Oct/3 Oct 1/94. Wt 139½ pds. Pulse 72. Is on medicine. Oct 3/94. Noisy, as usual, by day; annoying to

" 4 the others. Face bruised today by patient (Kroeger). Oct 4/94. Noisy all day. Was today knocked down

" 11 by fellow patient, who gave him a blow in stomach. Oct 11/94. Noisy & crying the past few days;

" 14 kicked a fellow patient today. Oct 14/94. Continues very noisy, daily. Is today crying & praying for death.

" 18 Oct 18/94. Is getting much worse. Noisy all day. Attempted to jump from fire escape. Also tried

" 19 to stab himself with a table-fork at supper. Oct 19/94. Noisy all day; trying to knock his brains

out with a large stone. Made a dash for R.R. switch; climbed on a box car. was caught by the

" 20 attendants. Afterward had a "spell" of vomiting. Oct 20/94 Noisy all day. "Want to be burned at the stake."

" 31 Oct 31/94. Has continued noisy. Continually expressing a desire to die & "wanting to be burned at the

stake". Habits dirty. Appetite generally good. Is fed at the hall. Talks incoherently & has many

delusions, which are very strong in him. Patient is a chronic masturbator. No improvement noted.

Nov 1 Nov 1/94. Wt 138 pds. Pulse 82. Dec 1/94. Wt 142 pds. Pulse 100. Dec 5/94. Continues noisy, very day.

Dec 1 to Jan 31 1895 Is on medicine. Dec 31/94. Visited by his mother. Patient eats & sleeps well. Has some eruption similar to eczema. Behavior continues very noisy. He has suicidal ideas. Habits are very dirty.

(Jan 1/95. Wt 140½ pds. P 94). Jany 31/95. Physical condition fair. He is very noisy, every day. Seems

to be tired of living. Inclined to be suicidal. Is full of delusions; also has hallucinations. He is a chronic

masturbator. Habits are dirty. Has on medicine 12 days. No improvement is observed. —

Feby 8 Feby 1/95. Wt 140 pds. P 90. Feb 8/95. Tried to choke himself, during the night; had a suspender drawn

" 19 very tight around his neck. Feby 9/95. Received a kick on knee from J. Scanlan Jr, from which he limps.

" 20 Feby 20/95. Complaining of pains in knee, all day. Feby 28/95. No change. Restless & noisy every night, sleeping only 3 to 5 hours.

Mar 1/95 Mar 1/95. Wt 141 pds. P 76. Mar 14/95. Restless & noisy every night. Sleeps poorly. No change to note in behavior.

" 31 March 31/95. No change noticeable, in any way. Restless & noisy. Still manifest strong delusions.

Apl 1/30 Apl 1/95. Wt 139 pds. P 75. Apl 30/95. Still, more or less restless nights, & sleeps poorly. Noisy by day; at times,

extremely so. Has sores on hands & face, similar to Eczema. Still shows delusions & has strong suicidal

tendencies. A chronic masturbator: On the whole, no improvement noted, mentally or physically.

May 1/31 May 1/95. Wt 141 pds. P 82. May 31/95. Very frequently, noisy & restless, at night, sleeping poorly.

Noisy & restless by day. Habits very filthy. No change, mentally. Still holds delusions. —

June 1/95. Wt 130 pds. P 82. June 3/95. Escaped while at walking, but was caught before he

" 4 had gone very far & brought back. June 4/95. at 12.25 Pm, was found, hanging to the gas-jet,

by a suspender round his neck; was resuscitated by means of artificial respiration. —

" 19 June 19/95. Restless & noisy, every night; sometimes, extremely so: sleeps only 2 to 3 hours, as a

" 20 rule. Otherwise, about same: habits very filthy. June 20/95: Is suffering from hemorrhage

of rectum: Transferred to "Infirmary Ward". Put to bed, there, & treatment given him.

" 21 Restrained by mittens. June 21/95. Ice Dressed & mittens taken off at 2 Pm & enema given,

" 22 but with no effect. Is quite restless this Pm. 8.30 Pm. Mittens again put on. June 22/95. Was

extremely noisy, first 2 hours during night: held in bed from 9 to 10 Pm. Slept only 3 hours.

" 25 June 25/95. Has been kept in bed & under treatment & out of restraint. Extremely noisy, at

times restless, both by day & night. Has slept very poorly. 1 Pm. Up, dressed & transferred to C3.

carried to Transfer Book A. page 184

Personal and Medical History of Herman Fossback

KORLEY, FOELAN & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3679.
Residence, recently at Poor-Farm, Dakota Co. Minn
Date Admission, 2nd April 1894.
Admitted by, D. Phelps Hour, 7 PM.
How Sent, Thos P. Mozar Jr., Dakota County
Sex, Male.
Age, 36.
Civil Condition, Cannot tell
Children, Dont Know.
Age Youngest Child, —
Occupation, Laborer
Degree Education, not known
Profession Religion, not known.
Habits, not known.
Nativity, Sweden
Physicians Committing, H. Van Beck & A. A. Finch
Correspondents, Michael Farrell
Rosemount, Minn

No. for Year, 249.
Insane Relatives, not known —
Cause Exciting, Epilepsy —
Cause Predisposing, Epilepsy probably
Form,
Accompanying Bodily Disorder, Epilepsy
Suicidal or Not, not. —
Date of this Attack, March 30th by Epileptic attacks
Duration, about 3 days —
No. of Attack, 1st to for as known.
No. of Admissions, 1st
Age First Attack, 36 (?)
Time of Leaving, 25th September 1894
Time in Hospital, 5 Mos + 23 Days.
Result, Died; Apoplexy.

EXAMINATION ON ADMISSION.

Exd by D. Ely, April 2nd/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, how clear; thoughts, at times, confused
Quick or Sluggish,

MEMORY:
Past Events, Good
Recent Events, } good except during confused periods
~~Special Subjects~~,

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

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

GENERAL DESCRIPTIVE REMARKS:
Has had tuberculosis of tibia and of humerus — Has "spells" when he is confused — Has hallucinations + also delusions.

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

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

HALLUCINATIONS: yes

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, coherent
Voluble or Reticent, quite free.

Personal and Medical History of Herman Fossback

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ WEIGHT, ✓ NUTRITION, Good.
WOUNDS OR ABNORMALITIES, see Supervisors Record, on next page —
TONGUE, Tremors, done fine Coatings, White Coating Promptness Movement, Prompt
PUPILS, Equality, Equal Size, Normal
Response Light, Yes Accommodation, Yes —
SIGHT, Says good; does not use glasses.
HEARING, Fair —
COORDINATION, Arms, } Good by usual tests; standing, eyes shut, no swaying.
Legs, }
TREMORS, Hands, Tongue, done fine
Facial Muscles, General,
REFLEXES, Patellar, unequal; left about 3; right about 5.
Other Reflexes,
ARTICULATION, Hesitating, ~~no~~; good; but has a ~~Slurred,~~ marked foreign accent.
FACIAL EXPRESSION, Good —
SENSIBILITY, normal
HEART, Sounds good
LUNGS, Sounds are good; left side not as resonant as the 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, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } Supposed relatives insane
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Herman Fossback

1894

This man was brought here by Sheriff Radtican, accompanied by K. Trnaks with the following history of case. As to civil condition, family, religion, habits, history of heredity, nothing known. Cause of this attack is Epilepsy; form is acute; first symptoms of the disease were manifested on March 30th, as epileptic attacks. This is 1st attack, so far as Known. Insanity is now shown by his wanting to run away. Patient is not disposed to injure others, nor is he suicidal, nor filthy nor destructive in habits. Had to be tied + restrained, the night of April 1st. He has not been under medical treatment. ——————

Apl 2 On admission, was put on B3 - S.R. Complexion sandy; hair brown; eyes blue; condition of skin good; scars on right arm and left knee; bruises on left side of face; bodily condition dirty; his
" 3 behavior is stubborn). Apl 3/94. Did not sleep any, last night. was restless. Att. Pulse 120. Was injured during last night as per following report of Attendant Olson: "this morning, when unlocking patient door, blood was on the floor, also on his clothing; upon examination, it was found that he had a cut across his scrotum and his testicles were lying on the floor. The wound appeared to have been done with some blunt instrument. A strict search was made in the room but nothing could be found. Sweytzer (a fellow patient) who slept with him says that Fossback was bothering him so, that he (Sweytzer) did it, but cannot give a satisfactory explanation as to how he did it. Says first, that he bit him, and, again, that he used his finger nails. Fossback does not seem to realize what has happened. Dr. called, who dresses the wound." Patient became very restless; was put in a restraint sheet at 11 o'clock AM. Appetite good; bowels had not moved. No cough noticed. Talks in-
" 4 -coherently. April 4/94. Again restless, last night and slept poorly. Appetite good; bowels constipated. Is restless also today. Restraint sheet taken off at 10 o'clock (he having been in restraint 19 hours); appears to be somewhat better today, but will not stay in bed. Was put back in restraint at 5:30 PM.
" 5 April 5/94. Slept but 4 hours, last night; was very restless. Appetite good; bowels have not moved yet. Restraint removed at 10 AM (after being in restraint 15½ hours). Appears to be improving
" 6 some + remains very quietly in bed. Talks quite rationally. April 6/94. Fairly restful, sleeping 6 hours, last night. Appetite good; bowels obstinately constipated. Remains very quiet. Says and
" 7 that he wont get well again. Att today 170 pds. (in underclothes?). April 7/94. Slept but 5 hours, last night; was restless. Appetite fairly good. Had 3 convulsions during day + one during night.
" 8 April 8/94. Did not sleep any during the night; was very restless + would not stay in bed. Appetite good; bowels have moved. Has been somewhat noisy during the day, talking incoherently; apparently not so well, as to mental condition as he has been in the last two days. Has hallucinations.
" 9 April 9/94. Did not sleep any, all last night. Has been very restless + noisy all day, as also last night; was placed in restraint sheet but tore it up every time he was put in it. Restraint sheet
" 10 used 3 hours; mitts also put on him for 5 hours (Total 5 hours). April 10/94. Slept 5 hours, last night. Appetite good; bowels still constipated. He has been very wild + excited all day. Put in restraint sheet several times, but managed to get out of it, by tearing it. At last, was placed in bed-harness.
" 11 Has thus been restrained 18 hours. April 11/94. Fairly restful, sleeping 7 hours, last night. Is also somewhat better today + rests quite easily. Restraint removed at 2 o'clock. Talks quite sensibly.
" 12 April 12/94. Slept all last night + was quiet. Appetite good; bowels persistently constipated. Is very
" 13 quiet, today; apparently sleeping most of the time. April 13/94. Again restful, + slept all night.

Personal and Medical History of Herman Fossback

1894 Cont'd

Apl 13/14 Appetite good; constipation persists; quietly behaved; talks quite rationally. Apl 14/94. Slept all of
" 15 last night. Is quietly behaved + resting Easily, today. Apl 15/94. Slept, well, 7 hours, last night.
" 16 Appetite good; bowels badly constipated. Behavior quiet. Apl 16/94. Again rested well, sleeping 7 hours last night. Appetite good; bowels very constipated. Remains quietly in bed. ——

Summary. Patient has remained steadily in bed, since his admission. Appetite has, on the whole, been good, but bowels have been, and still are, obstinately constipated. Has been quietly behaved most of the time, though has required to be restrained some (as detailed above). Is subject to fits, of which he has had three, since confined here, and after each of which he was very wild and noisy + would talk incoherently. At present, seems to be improved, mentally. The wound,
" 30 above mentioned, (on 3d inst), is progressing nicely. Habit are clean. April 30/94. Is still confined to his bed. Appetite good; bowels regular. Is very quietly behaved, at present. Talks rationally. The wound, above referred to, is progressing nicely. Patient is subject to Spasms + is on bromides. Was in restraint, a short period, during the month (7½ hours), it being found necessary to use the restraint sheet in order to prevent his picking at wound, also to keep him in bed. Habits are clean at present. (Was, however, dirty 2 days, during the month). —— ——————

May 1/94 May 1/94. Wt 164½ pds. Pulse 88. May 4/94. Was permitted to get up + was put in the hall, this morning.
" 15 May 15/94. Has not been feeling well, the last 2 days; remained in bed mostly all day. Refused food for 3 meals.
" 16/18 May 16/94. Feels better; is up today. May 18/94. Remained in bed, all day. Appetite rather poor. Will quite
" 20 frequently go, for 3 or 4 meals, without eating. May 20/94. Appears to be growing very weak, in the last 2 days, cant get out of bed alone, now, to attend to calls of nature; cant speak above a whisper + seems entirely hopeless.
" 21 Failed his bet twice, during the day. May 21/94. Does not partake of any solid food, but will drink some milk
" 23/26 occasionally. May 23/94. Seems improving some. Appetite fairly good, now. May 26/94. Again up + in ward.
" 31 May 31/94. Appetite fairly good; bowels regular, apparently. Is quiet + well-behaved. Complains of a "tired feeling" a good deal + lies down on his bed, most of the time - Yet he appears to be improving some. Habits are clean.
June 2/4 June 2/94. Wt 172½ pds (has gained some, in past month). Pulse 84. June 15/94. Had a convulsion in dining room,
" 19/24 today. June 19/94. Had 2 convulsions, during the night - June 20/94 - One convulsion during night. June 21/94. Had
" 22 a convulsion, during the day. June 22/94. Was quite restless + noisy for 7 hours during night; would not stay in bed.
" 23 July 23/94. Has been noisy, also, during the day; would not keep any clothing on. Was kept in seclusion all day; (14 hours). Was marked up sound, during the night, by knocking his head against the bed or the radiator. Was quite noisy for 2 hours, restless; slept only about 1½ hours; was out on floor, most of the time: night watch
" 24 could not keep him in bed; would not keep clothing on him. June 24/94. Patient was placed in restraint-sheet this morning at 7 O'Clock, as he was tearing around in his room + would not keep his clothing on him.
" 25 June 25/94. Has been restless + noisy, the past 2 night + has slept only about a couple of hours, in each. Had one convulsion, during the night and two, today. Appears to be very weak; cannot get out of bed. —
" 27 Bowels seem quite badly constipated - medicine given did not have effect. June 27/94. 8 Am. Patient has not partaken of any food, now, for 4 meals: lies in a stupor; appears asleep. 7 PM. Seems somewhat improved, today. Drank some milk for supper. Acted as if he had just waked up from a long sleep, and, this evening, wanted to know where he was. Had no convulsion, during the night. June 29/94. Slept 5
" 29 hours; was restless 4 hours or so during the night. Was placed in restraint jacket at 4:30. He could not be kept in bed, otherwise. June 30/94. Is still confined to bed. Appetite fairly good, at present, but
" 30

(Carried to page 250)

Personal and Medical History of Philip Covell

SUBERT, PIELER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3680.

Residence, Town of Zumbro, Minn

Date Admission, 3rd April 1894.

Admitted by, Dr Kilbourne Hour, 4.30 PM

How Sent, Malcolm Kennedy, Jo P. Wabasha County

Sex, Male.

Age, 54 -

Civil Condition, married

Children, 7

Age Youngest Child, —

Occupation, Farmer - Laborer

Degree Education, not stated

Profession Religion, not a church - member

Habits, Temperate, as far as can be ascertained

Nativity, New York. —

Physicians Committing, J. A. Law 2nd M. B. Lee

Correspondents, John Robins, South Troy

Mrs Helen Covell (wife) Oakwood Place - Rochester, Minn | Wabasha Co. Minn

No. for Year, 250.

Insane Relatives, no history can be learned.

Cause Exciting, Religion & family troubles

Cause Predisposing, previous attacks

Form,

Accompanying Bodily Disorder, none known of.

Suicidal or Not, not

Date of this Attack, about 2 weeks ago.

Duration, about 2 weeks.

No. of Attack, 3rd

No. of Admissions, 1st

Age First Attack, about 44.

Time of Leaving, 22nd April 1894

Time in Hospital, 19 Days. —

Result, Died; Acute peritonitis.

EXAMINATION ON ADMISSION.

Exd by Dr Herzog, April 5/94

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Quite Clear

Quick or Sluggish, very sluggish

MEMORY:

Past Events, poor

Recent Events, poor

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, illusive

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, poor

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient is very reticent. It takes him from ½ to 2 minutes to frame an answer even though it is monosyllabic. He has the delusion that he has killed a man & that he is now in hell. He has a marked intention tremor, which, he says, is congenital. —

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not, not systematized

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Quite Coherent

Voluble or Reticent, very reticent

Personal and Medical History of Philip Covell

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10½ WEIGHT, 140 lbs NUTRITION, Poor

WOUNDS OR ABNORMALITIES, See S. Q. next page; hand much bruised & deformed, evidently from hard work.

TONGUE, Tremors, Yes; large & fine Coatings, White, at base. Promptness Movement, Slow

PUPILS, Equality, Yes Size, somewhat contracted

Response Light, Normal Accommodation, Normal

SIGHT, Seems good

HEARING, Seems Good.

COORDINATION, Arms, markedly impaired —

Legs, somewhat impaired —

TREMORS, Hands, intention tremor Tongue, Yes

Facial Muscles, Yes, of lower lip General, slight.

REFLEXES, Patellar, Equal; about 3 or 4. —

Other Reflexes, Slight ankle-clonus.

ARTICULATION, Hesitating, Yes Slurred,

FACIAL EXPRESSION, blank and depressed. —

SENSIBILITY, —

HEART, —

LUNGS, —

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Recent 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,

Brothers or Sisters,

} unknown

EBERT, TIDLAR & CHAMBERS, DAVENPORT, IOWA

1894

This patient was brought here by Deputy Sheriff P. L. Heermeskricht, accompanied by John Robins. with the following history. Habits, as far as can be ascertained, are temperate. no history of heredity can be learned. Supposed cause of this attack is religion and family troubles: Som is depressed and Introspectual. No accompanying bodily disease or disorder so far as can be learned. First symptoms of the disease were manifested by neglect and indifference. He had the 1st attack abut 9 years ago, the 2nd abut 6 years ago, and last attack about two (2) weeks ago. Insanity now manifested by family trouble. Patient is not disposed to injure others, nor is he suicidal, but has filthy & destructive habits. On 2 or 3 occasions, of late, has been locked in his room all night (3 or 4 nights) & has also been under treatment by Dr. Percey of Hazelton Pa (6 years ago) and 2 or 3 days ago by Dr. Tittle of Jumbo Falls, Minnesota. (No results of these treatments can be ascertained). —

April 3d. On admission, was put to Bt (S.R. Complexion light; hair gray; eyes blue; condition of skin good; no marks bruises &c noticed. Bodily condition dirty. Patient is very weak & depressed). —

" 4 April 4/94. Slept only 2 hours last night; got out of bed twice, but made no trouble; returned to bed, but laid awake, the rest of the night. Appetite fairly good; there has been no movement of the bowels since his admission. no cough noticed. Is quietly behaved; sits in one place; seems to be inoffensive & harmless. Talks little, and only after persistent questioning; is under the delusion "that he has committed murder". Makes no complaints. Has a callosity, and wound in centre of same, on sole of left great toe. Pulse, at 7 Am. 74. R (at same hour) 18. April 5/94. Was very restless and out of bed 5 times, last night. AM. Pulse 78. R 17. Appetite poor; has had a slight passage of bowels: no cough observed. Quietly behaved; harmless. Talks none, unless questioned, and he seems to have difficulty in concentrating his thoughts, so unable him to answer. Makes no complaints. April 6/94. Slept but 2 hours, last night; the rest of the night, was wakeful. AM. Pulse 76. R 19. Appetite still poor: bowels are constipated. Is quietly behaved, though still restless, walking up & down the hall. Answers questions a little more readily, but does not talk voluntarily. Makes no complaints, as yet; seems contented. No cough noted.

" 7 April 7/94. Slept very little; restless most of the night; insisted on getting out of bed. Went to stool, but had no passage. AM. Pulse 87. R 17. Behavior quiet but restless; walks up & down hall, most of the time. Talks very little, in answer to questions only. Appetite very poor, indeed.

" 8 April 8/94. More restful & slept 6 hours, last night. Had movement of the bowels during the night. AM. Pulse 74. R 19. Behavior about as usual. Talks almost none. Appetite fairly good, today.

" 9 April 9/94. Slept only 3 hours, last night; was restless 6 hours, or so. Says he had a movement of the bowels yesterday; but this was not observed by Attendants. Behavior continues quiet, but restless. Talks none & cannot be drawn into a conversation. Appetite quite good. Does not complain.

" 10 April 10/94. Very restless, last night, and sleeping only 3 hours. AM. Pulse 81. R 17. Quietly behaved; most of time either stands or walks about hall. Talks only when spoken to, but responds more readily than when received on ward. Appetite good; no cough noticed; bowels, patient says, are loose, but night nurse reports no movement. Patient is very dull & stupid & has a paretic appearance.

" 11 April 11/94. Slept only 1 hour, last night; continuously getting out of bed & put his clothes on. Appetite good; bowels fairly free. AM. Pulse 77. R 17. Continues quietly behaved; talks more readily

" 12 now; articulation seems easier & more spontaneous. April 12/94. Slept 7 hours, though out of bed four times during the night. (Was given Chloralamid gr XXX). AM. Pulse 78. R. 17. Appetite good;

1894 Cont'd

April 12 Bowels more regular now; is quiet by day; inoffensive; stands up or walks the hall most of the day;

" 13 Talks better & more readily. April 13/94. Slept none; restless all night; constantly getting up, to put on his clothes. AM. Pulse 79. R 19. Behavior abut as usual: talks scarcely any; wont stay in one place; is very restless. Bowels constipated. April 14/94. Slept 4 hours, restless 8 hours, last night. AM. Pulse 80. R 17. Appetite good; had a free passage yesterday afternoon. Quiet by day, though restless; talks little, but responds quicker than when admitted. Makes no complaints; no injuries to report.

" 15 April 15/94. Very restless all night; slept none; had motion of the bowels. AM. Pulse 74. R 18. Appetite good. Conduct & behavior by day, do not change any. Is very much inclined to reticence.

" 16 April 16/94. Slept only 3 hours; was very restless the remainder of the night. AM. P 70. R 17. Patient says he had a movement of the bowels. Quiet by day; inoffensive. Still talk little & only in reply to questions; seems to have got over delusion he had "as to murder" —

" 17 April 17/94. Was restless 5 hours & slept but 4 hours, last night. (Was placed in a bedroom for quietness at 3. Am). AM. Pulse 76. R 17. Appetite good; bowels constipated still. Talks in a hesitating way, as if not certain of what he is saying. Seems contented: makes no complaints

Summary. This patient has improved considerably during these 2 weeks, in several respects. His appetite has become much better & he now takes a fairly good meal, 3 times a day. His articulation is, now, much more distinct; can be got to answer questions more readily & promptly, but he still hesitates in his replies & seems never to be sure of the correctness of his statements. He has been very restless, since admission; sleeping very little and standing up, in one position, most of the time, or restlessly walking the floor. He has, however, during the last two nights, had better sleep than usual. (Was put in a bedroom last night, in C.th hall, & be away from noise). His bowels, unless kept free by medicines, are constipated. He has got rid of the delusion he was laboring under (of having committed murder) but his improvement mentally has not been very marked.

Patient ran away, while out walking today; was captured & brought back. —

" 20 April 20/94. Is very stubborn and hard to manage. Does not like to take his medicines. — Patient has had no movement of the bowels for 2 days & was given an enema, last night: had a slight passage afterwards. During the night, also had a free passage of the bowels. Does not feel well, this

" 21 morning; refused his food. April 21/94. Patient has eaten nothing for 36 hours; was given (by Dr. H's orders) malted milk and ½ doses powd at 9 Am. and beef peptonides at 11 Pm. 1. 3. 5 and 7 Am. Has had no passage of the bowels. Is very weak & confined to bed. Pulse 88.

" 22 April 22/94. At 10 Pm, patient was very restless, complaining of great pain in the region of the bowels. At 11 Pm, 1. 2. 3 & 4 Am still complaining of great pain and at 4 Pm, seemed to be very much worse, and sinking rapidly. Physician (Dr. H.) prescribed 1 gr. morphine which was given patient at 4. Am. Patient continued to fail rapidly and died at 5.25 am. — " — " —

— Died —

Personal and Medical History of Albert H. Tisdale (Tisdel)

HERBERT, FICKLIN & CHAMBERS, DAVENPORT, IOWA



Whole No. 3681.
Residence, St Paul, Minn
Date Admission, 5th April 1894.
Admitted by, Dr. Phelps. Hour, 7
How Sent, John B. Olivier, Jof P.
Sex, Male
Age, 39 years
Civil Condition, Single (?)
Children,
Age Youngest Child, —
Occupation, was a coffee-roaster
Degree Education, probably good
Profession Religion, is a Church member
Habits, Strictly temperate —
Nativity, Massachusetts. —
Physicians Committing, Alex. Donald & Angus Macdonald
Correspondents, Mrs Jennie Gorham
sister's address 720 Robert St St Paul

Year, 251.
Relatives, no history of heredity.
Exciting, Religious mania
Predisposing, previous attacks & Masturbation probably

panying Bodily Disorder, none visible
l or Not, not
this Attack, about 6 years ago
n, about 6 years. —
Attack, 1st severe one
Admissions, 1st
Age First Attack, about 33.
Time of Leaving, Apr. 26. 1900
Time in Hospital,
Result, Transferred to Hastings

EXAMINATION ON ADMISSION.

Early D. Ely, April 1894. —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear.
Quick or Sluggish, Quick
MEMORY:
Past Events, Good
Recent Events, Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Good
Own Mental State, thinks he is just insane
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
"has had warnings from God"; "has had revelations"; "a tall handsome lady has appeared to him" —

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, exalted
Depressed,
DELUSIONS:
Systematized or Not, not systematized
Special Subjects, of a religious nature.
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, voluble

Copy of Notice for Hearing Petition for appointment of Jennie Gorham as guardian for A. H Tisdale - served upon A. F Kilbourne, Supt. August - - 98 & paper filed with Commitment papers under No 3681

ION.—(Continued.)

NUTRITION, Good.

mptness Movement, prompt
ormal
respond.

HEARING, Good
COORDINATION, Arms, good; finger to nose, eyes shut, good.
Legs, fair; standing at rest, quite steady; standing eyes shut, steady.
TREMORS, Hands, none marked Tongue, coarse
Facial Muscles, none noted General, none noted.
REFLEXES, Patellar, unequal — Right 5; left 6 or 7.
Other Reflexes,
ARTICULATION, Hesitating, no Slurred, good.
FACIAL EXPRESSION, Good.
SENSIBILITY,
HEART, Good
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.,

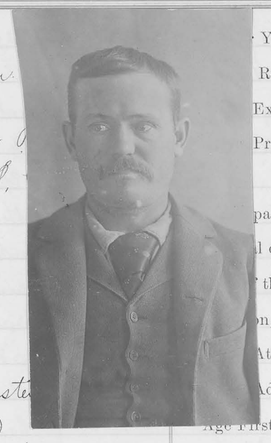
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother dead; not of robust health.
Father or Pat. Relations, Father lost sight of, when was broke out.
Brothers or Sisters, Brother & 2 sisters all healthy.

Personal and Medical History of Albert H. Tisdale (Tisdell)

HERBERT, PUGLAR & CHANDLER, DAVENPORT, IOWA



Whole No. 3681. Year, 251.

Residence, St Paul, Minn. Relatives, no history of heredi

Date Admission, 5th April 1894. Exciting, Religious mania

Admitted by, D. Phelps. Hour, 7 P. Predisposing, previous attacks & Masturbation probably

How Sent, John B. Olivier, Jof C.

Sex, Male

Age, 39 years panying Bodily Disorder, none visible

Civil Condition, single (?) l or Not, not

Children, this Attack, about 6 years ago

Age Youngest Child, — n, about 6 years. —

Occupation, was a coffee-roaster Attack, 1st severe one

Degree Education, probably good Admissions, 1st

Profession Religion, is a church member Age First Attack, about 33.

Habits, Strictly temperate — Time of Leaving, Apr. 26 1900

Nativity, Massachusetts. — Time in Hospital,

Physicians Committing, Alex. Donald & Angus Macdonald Result, Transferred to Hastings

Correspondents, sister address Mrs Jennie Gorham
720 Robert St St Paul

EXAMINATION ON ADMISSION.

Exam'd by D. Ely, April 10/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear.

Quick or Sluggish, Quick

MEMORY:

Past Events, Good

Recent Events, Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, thinks he is just insane

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says he has warnings from God"; "has had revelations"; "a tall handsome lady has appeared to him"

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, exalted

Depressed,

DELUSIONS:

Systematized or Not, not systematized

Special Subjects, of a religious nature.

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, voluble

Personal and Medical History of Albert H. Tisdale

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5½ WEIGHT, 145 pds. NUTRITION, Good.

WOUNDS OR ABNORMALITIES, See "S. R."; on next page.

TONGUE, Tremors, Coarse Coatings, somewhat large & thick marked - coating in centre Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, respond. Accommodation, respond.

SIGHT, Good

HEARING, Good

COORDINATION, Arms, good; finger to nose, eyes shut, good.

Legs, fair; standing on foot, quite steady; standing eyes shut, steady.

TREMORS, Hands, none marked Tongue, Coarse

Facial Muscles, none noted General, none noted.

REFLEXES, Patellar, unequal — Right 5; left 6 or 7.

Other Reflexes,

ARTICULATION, Hesitating, no ~~Slurred~~, good.

FACIAL EXPRESSION, Good.

SENSIBILITY,

HEART, Good

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, Mother dead; not of robust health.

Father or Pat. Relations, Father lost sight of, when was broke out.

Brothers or Sisters, Brother & 2 sisters all healthy.

LABERT, FIDLAR & CRANDERS, DAVENPORT, IOWA.

Was brought here by Deputy Sheriff Chapel with the following history of case. Habits are strictly temperate, though masturbation is suspected. No history of heredity. Supposed cause is religious mania. Form of attack is exalted and paranoiacal. No bodily disorder visible. First symptoms of disease were manifested about 6 years ago. This is the 1st severe attack. Insanity is now shown in religious and matrimonial subjects. Patient has shown no disposition to injure others nor is he suicidal. He however, careless of person. Was melancholy before symptoms appeared. No bodily disease or any injury to head known of. He has not been restrained or confined, nor under medical treatment. He imagines he is Christ and instructed to preach; has no value of money.

Apl 5 April 5/94. On admission, was put on B3 (S.R. Complexion light; hair brown; eyes gray; condition of skin good. There are three marks on right leg; bodily condition clean. Is well-behaved). — —

" 6 April 6/94. Was fairly restful, sleeping 7 hours last night. Abt. Pulse 76 R 18 T 98 4. Appetite fairly good. no cough noticed. Is quiet and well behaved. Talks freely, but has some religious delusions. Works some on ward.

" 7 Makes no complaints. No injuries to report. April 7/94. Restless for 2 hours or so, but slept 6 hours last night. Abt. Pulse 74 R 18 T 98 4. Appetite good; behavior good; talks freely; helps willingly with the ward-work.

" 8 April 8/94. Restful, sleeping 7 hours, last night. Abt. Pulse 84 R 20 T 98. Conduct & behavior, by day, are

" 9 about as usual. April 9/94. Restless for an hour or so, but slept 7 hours, last night. Abt. Pulse 80. Appetite is

" 10 good. He is somewhat restless & walks about considerably. Talks quite freely. April 10/94. Abt. Pulse 88. Is

" 11 somewhat more restless today, walking the hall continually. Is well-behaved. April 11/94. Abt. Pulse 80. Appetite good; bowels regular; still very restless, by day; talks quite freely. Helps with the ward-work.

" 12 April 12/94. Abt. Pulse 76. Conduct & behavior do not change any. Was working some, outside, today.

" 19 April 19/94. Since last noted, patient has been restful at night as a rule sleeping 7 hours at a clock; in only 1 or 2 nights being restless for a couple of hours. Appetite has been good; bowels generally regular. Pulse about normal. He has been well-behaved; quite restless during the first week after his admission, but during this, the 2nd week, he has become much less restless & seems more contented. Has some religious delusions, but seldom talked of them; now talks freely & rationally. Works willingly on ward,

" 28 made no complaint. Goes out walking regularly. Physical condition seems good. April 28/94. Worked in

" 30 the kitchen, this morning. April 30/94. Bowels are generally regular. Is quiet & well-behaved. Talks freely; makes no complaints. Helps some with work on the ward. Habits are clean & tidy. —

May 1/30 May 1/94. Wt 150 pds. Pulse 72. May 2/94. Is troubled with a stye on his eye. May 10/94. Eye is now better.

" 18 May 18/94. Is quiet & well-behaved. Talks quite freely. Makes no complaints. Works some in the dining-room. Was today transferred to 1st. Habits are cleanly. Physical condition improved.

" 31 May 31/94. Continues quiet & well-behaved. Keeps about the same, all the time. Has no "spells". Talks quite freely, but shows delusions. Says "that he is married" and "thinks he has a brother has a B2".

June 1/30 June 1/94. Wt 142½ pds. (Some loss in flesh, without apparent cause). Pulse 81. June 30/94. No special change

July 1/31 July 1/94. Wt 152 pds. (an increase in weight of 9½ pds in past 5 weeks). Pulse 79. July 31/94. Not much, if any, change, to report. Continues quiet & well-behaved. Talk freely but still shows delusions. Takes part in games & makes himself quite agreeable. Is a good & willing worker on ward. Habits clean.

Aug 1/31 Aug 1/94. Wt 152 pds. Pulse 66. Does not change any. Aug 31/94. No special change. Health seems good.

Sep 4/30 Sept 4/94. Wt 153½ " " 70. - Sep 30/94. Patient keeps about in same condition, all the time. Talks a good deal on religion. Still manifests delusions. Says "that he has got a wife & brother in

Sep 30 the institution". Habits are clean & tidy. He is a good and willing worker on the ward.

Oct 2/31 Oct 2/94. Wt 155½ pds. Pulse 70. Oct 31/94. Quiet & well behaved. No particular change noted.

Nov 3 Nov 3/94. Wt 160 " " 72. Dec 3/94. Wt 161 pds. Pulse 76. Jany 3/95. Wt 159 pds. Pulse 76.

Dec 3 1895 Jan 1/31 Jan 31/95. Patient behaves well. He has many delusions. Says "he can hear people coming in his room, at night." He plays games etc. Willingly works in dining-room & on hall. Physical condition good.

Feb 2/32 Feb 2/95. Wt 160 pds. P 80. Feb 28/95. Behaves well: habits clean; willing to assist with work. Has delusions and

Mar 2/31 talks to himself; makes motions with his hands. March 2/95. Wt 159 pds. P80. March 31/95. No change, & note

Apl 1/30 Apl 1/95. Wt 157 pds. P80. Apl 30/95. Behaves well: seems happy & contented. Does not say anything about going home; makes no complaints. Talks religion. Has delusive thoughts and ideas.

May 1/31 May 1/95. Wt 158 pds. P80. May 31/95. Behavior good: talks freely, but somewhat incoherently, & changeable. Has delusions; says "his marriage & his wife works in kitchen". Appetite very good: bowels regular.

June 1/30 June 1/95. Wt 156½ pds. Pulse 80. June 30/95. No change in patient from last month. He appears & be in good health: Complains, at times, of rheumatism in Shoulder. July 1/95. Wt 153½ pds. Pulse 88.

July 1/31 July 31/95. Has not improved any: Has "false beliefs": Does not say anything about going home. Seems contented here & cheerful. Plays games. Goes out walking. Eats & sleeps well, at night.

Aug 1 Aug 1/95. Wt 155 pds. Pulse 70. Sep 2/95. Wt 156½ pds. Pulse 92. Oct 1/95. Wt 157½ pds. Pulse 78.

Sep 2 Oct 31/95. Does not improve any mentally; a very quiet & well-behaved patient. Has "all sorts

Oct 1/31 & imaginations". Always cheerful & contented. Works in dining-room. Physical health good.

Nov 2 Nov 1/95. Wt 162 pds. Pulse 78. Dec 3/95. Wt 162½ pds. Pulse 72. Jan 1/96. Wt 162½ pds. Pulse 76.

Dec 3 1896 Jan 31/96. No special change noticeable. Talks freely, but somewhat incoherently. Eats & sleeps well. Works

Jan 1/31 in dining-room. Goes out walking. Attends patients' dances & participating in them.

Feb 1 Feb 1/96. Wt 159½ pds. P 78. Mar 1/96. Wt 158 pds. P 78. Mar 17/96. Patient is gradually getting worse, mentally.

Mar 1/17 Has all sorts of delusions. Talks incoherently. Is careless about dressing himself. Apl 1/96. Wt 157½ pds. P 74.

Apl 1/17 Apl 17/96. Refused to go out walking. Has delusions. "Says himself the God". Transferred to B2. Is coming on

" 30 ward, behavior good. Apl 30/96. No change in patients' condition. Behaves many delusions. Talks incoherently,

May 1/31 and a great deal to himself; makes motions with his hands. Is very quiet today. Refuses at times, to go walking.

to Summary Nurses Notes by Dr. Phelps. Patient quite demented & troublesome, mostly, however, in the

Aug 1/97 way of attacking & interfering with other patients. Has many delusions & during latter part of period was not so aggravating as during former portion. Since march has been at times Wt 141 to 149 lbs. Aug 31/97 Wt. 148. Oct 31/97 Health good: Quiet in behavior: Somewhat noisy at times in Fall: Is very incoherent. Jan 31/99 Intervening notes show no change of importance. Feb 1 - July 31/99 (Dr Watrous) Wt. 156. General condition unchanged: Mental state stupid. Aug - Jan 31/1900. Wt. 165. Condition shows little change. Health good. Very quiet & well behaved. Very demented. Has numerous delusions of grandeur. Quite tidy in habits. Works on ward. Spends considerable time writing. Apr 26/1900 - No change. Trans. to Hastings Asylum.

Personal and Medical History of Henry C. Reed (Reis)

ROBERT, FOLLAS & CHAMBERS, DAVENPORT, IOWA

Whole No. 3684.
Residence, 130 E. Congress St. St. Paul.
Date Admission, 9th April 1894. —
Admitted by, Dr. Eby — Hour, 6 45 P.M.
How Sent, John B. Olivier, Jeff. Ramsey County
Sex, Male
Age, 25 Years
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, Journeyman Printer
Degree Education, probably good —
Profession Religion, not a Church member
Habits, Intemperate & gambling for last 5 years
Nativity, Decorah, Iowa —
Physicians Committing, A.W. Dunning & J.C. Markoe
Correspondents, Mrs. D.C. Reid (Mother) 130 E. Congress St. St. Paul

No. for Year, 254.
Insane Relatives, no history of heredity
Cause Exciting, his habits; dissipation
Cause Predisposing, probably bad habits
Form,
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, Yes; attempted it last November.
Date of this Attack, about 1 year ago
Duration, about a year
No. of Attack, 2nd
No. of Admissions, 1st
Age First Attack, 17 years (about)
Time of Leaving, Sept 16'95
Time in Hospital, 1 yr. 5 mo. 7 das.
Result, Rec. 7/8/96

EXAMINATION ON ADMISSION.

Ex'd by Dr. Phelps & Eby, Apr 10/94. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Recent Events, Special Subjects, } seemingly good.

PERCEPTIVITY:
Alert or Dull, Quite alert
Correct or Illusive, Seemingly Correct

REASONING POWER:
Ordinary Subjects, Fair now
Own Mental State, Judges his state quite accurately
Special Subjects,

EMOTIONAL STATE:
Normal, Calm, Calm & normal
Indifferent,
Exalted,
Depressed, not much

DELUSIONS:
Systematized or Not, Special Subjects, Transitory or Not, } Describes morbid, insistent ideas, but thinks has no defined Delusions.

HALLUCINATIONS: Denies any.
ILLUSIONS:

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

GENERAL DESCRIPTIVE REMARKS:

Had a cough for 3 to 4 months, about 11 years ago. Had nervous attacks; one at 14; one at 17. "Got over it and enjoyed but suffering". This one a more severe attack; "Don't think insane" - always nervous; a horror of always having to think; "afraid of not thinking right". Laudanum took away all these bad feelings for the time being. 4 spoonful at a dose. in ½ an hour another & ½ spoonful of bromidia - At Hughes' institute, for a time, for drinking; grew more nervous. First treatment 1 year ago in Feby; 2nd treatment latter part of Dec; next day then took 3 gr. Morphine; did not sleep; then took 2 oz. laudanum, then took some chloroform; then Hughes resuscitated him & gave him "sick shot" & he vomited it up.-

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 135 lbs. NUTRITION, Fair
WOUNDS OR ABNORMALITIES, See G.S.R. on next page.
TONGUE, Tremors, fine Coatings, some coating Tongue is large, Gradually subsiding } Promptness Movement, Prompt
PUPILS, Equality, Equal Size, Normal
Response Light, respond Accommodation, Respond
SIGHT, Seems fair
HEARING, Good.
COORDINATION, Arms, Fair; Legs, fair; Standing w feet, fair; Standing, eyes shut, fairly Good.
TREMORS, Hands, Steady Tongue, fine
Facial Muscles, General,
REFLEXES, Patellar, Equal - (reinforcement) - 1 & 2; very sluggish
Other Reflexes,
ARTICULATION, Hesitating, good ~~Slurred~~,
FACIAL EXPRESSION, Fair -
SENSIBILITY, ✓
HEART, Good
LUNGS, " "
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good, (Recent kept)	Poor,	Irregular, Insomnia for a good while - 6 mos — took opiates.
PULSE,	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, 6 mos + over ONSET GRADUAL OR SUDDEN, Gradual, 2 days.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother healthy; recently nervous & irritable, but no attacks.
Father or Pat. Relations, Father died of inflammation of bowels
Brothers or Sisters, Sister are nervous but no attacks; would be sane hysterical

Personal and Medical History of Henry C. Reed.

1894 GIBERT, FULLAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy Sheriff Chapel, with the following history. By occupation, a journeyman printer; he drinks to excess, and he has been habitually gambling for the past 6 years. There is no history of heredity. Supposed cause of this attack is his habits & dissipation: former, chronic & depressed. There is no accompanying bodily disorder. First symptoms of disease were manifested about one year ago, by depression and moodiness. This is probably, the second attack; he had a similar one at age of 17 years, lasting about 3 months. Insanity is now manifested by depression & suicidal tendencies. Patient has shown no disposition to injure others, but is suicidal. Attempted suicide last November, when he took laudanum and chloroform. He has no filthy or destructive habits. No peculiarities of temper &c were previously known. There is no history of any bodily disease &c or head injury. He has not been restrained or confined. Patient has the usual general treatment for his present condition; but no results are stated.

April 9 **On admission**, was put on B3z (S.R. Complexion light; hair light; eyes blue; condition of skin good, has some marks on little finger of right hand. Bodily condition clean; behavior good.) No eruptions or ulcers noticed. Pulse 74. R 16. T 98.2. April 10/94. Was restless for 4 hours or so, sleeping but 4 hours, last night. AM. Pulse 74. R 17. T 99. Appetite fair; bowels constipated; no cough noticed. Behavior is good: he is, though somewhat restless, walking about the hall. Talks freely & rationally. Seems of a nervous temperament.

" 11 April 11/94. Slept only 4 hours, last night; was very restless for 6 hours. AM. Pulse 72. R 20. T 98.6. — Appetite only fair; walks about considerably; talks freely; says he is not as nervous as he was yesterday. —

" 12 April 12/94. Slept poorly, only 2 hours, last night; very restless the greater part of the night. AM. P 72. R 16. T 98.6. Has been very nervous all day; "wants to kill himself". Has delusions: said they were going to put hand cuffs on him. April 13/94. Restless & disturbed all last night; slept none at all. — Appetite poor, but bowels are regular. Has been very nervous & restless all day; "wants to commit suicide".

" 14 Pulse, today, 74. April 14/94. Was given 2 sleeping doses last night, but sleep & rest were not improved any; was restless for 6 hours, sleeping but 2 hours. Has been crying nearly all the day. — Pulse, this AM, 74. Still shows delusions; "thinks his mother is down stairs". "Wants to kill himself". —

" 15 April 15/94. Again passed a poor night; restless 6 hours, sleeping but 2 hours. AM. Pulse 74. Is very restless today, Continually walking the hall; "hallooing" and tearing his hair; "wants somebody to give him poison".

" 16 Has eaten nothing all day. April 16/94. Was given hypnotic last night; slept only 4 hours; was restless for 4 hours or so. AM. Pulse 76. Has been very restless all day: ate nothing at dinner or supper. Writes occasional letters. (See three, of recent date, attached, which purport to be a history of his life, his habits &c and also tend to show the many delusions he holds). April 17/94. Was restless & noisy for 8 hours, last night. Slept none at all. AM. Pulse 74. Ate scarcely anything all day. Seems to have "fainting spells", at times; falling or throwing himself about in the benches & chairs. April 18/94. Slept somewhat better (6 hours) last night, though was restless for 4 hours or so. Is usually given one or 2 hypnotics each night. AM. P 72. Seems to be a little brighter, today; Ate a light dinner & supper. Still holds delusions: also has hallucinations,

" 19 talks at some imaginary person, at times. April 19/94. Restless 4 hours, sleeping 6 hours, last night. AM. Pulse 76. Ate a good dinner & supper today. Has been restless today; went to bed in afternoon.

" 20 April 20/94. Restless 3 hours or so, but slept 8 hours, last night. AM. Pulse 74. Appetite fairly good. Is restless & singing this morning; took off his clothes this p.m. & wanted to go to bed. Mental State has been one of confusion, with melancholy character. April 21/94. Restless 3 hours, but slept 8 hours,

Personal and Medical History of Henry C. Reed

1894

April 21 cont'd last night. AM. Pulse 76. Restless & nervous today; walking the hall; singing at times, and at other

" 22 times, swearing, cursing and crying. April 22/94. Was fairly restful, sleeping 7 hours, last night. —

" 23 AM. Pulse 72. Appetite fairly good; in other respects no material change to note. April 23/94. Was restless for 5 hours, sleeping but 3 hours, last night. AM. Pulse 76. Appetite poor. Patient is restless & disturbed;

" 24 also much confused. April 24/94. Was restless all night and slept none. Very restless also today. —

" 25 freely and sensibly; a few days afterward, became

" 26 the doors. Wanted to kill himself; also wanted

" 27 hallucinations. Appetite poor, Mistr the time. Is on medicine

" 28 way, today. April 26/94. Was crying, at times,

" 29 27/94. Has been crying & walking the hall, most

" 30 night, restless from 2 to 5 hours, sleeping only

May 1 king the floor; crying & pounding at the doors.

" 2 times, also, is much excited. —

" 3 rs, noisy & hour & slept only 3 hours, last night.

" 4 eeps, most of the time. May 4/94. Noisy in morning

" 5 deal of the time, each day. Eats but little. Talks

" 6 ell manifests delusions. — . —

" 7 t has eaten nothing the past 3 days. Was fed by the

" 8 y; says there is something wrong with his mind" —

" 9 hole of the day. Appetite poor. Drinks milk quite freely.

" 10 e has improved & is now safe enough. Since 1/94. His

" 11 ged very much from that reported last month. Still,

" 12 tinually & shouting delusions. Lies about on the benches:

" 13 the past month). July 2/94. About as last generally

" 14 talks none, even when addressed. Lies about on settees,

" 15 wels regular. Doesn't walking daily, but does no work.

" 16 Noisy. Very noisy, at times, by day. Wants to have

" 17 y of glass in his mouth & was trying to eat it;

" 18 w, today. Aug 22/94. Very noisy, today. Destroyed

" 19 eruption on face & hands. — Aug 31/94. Sleeps

" 20 restless & noisy by day, & answering to the others:

occasionally receives a black eye & some bruises in this way. Eats well, sometimes; again, eats nothing. Bowels Constipated. Has considerable eruption on face & hands. Talks incoherently & has delusions; Habits fair. Does not seem to improve any & physical condition deemed poor.

Sept 1/8 Sept 1/94. Wt 140½ lbs (a loss of 7 lbs, in past month). Pulse 70. Sept 8/94. Has been very noisy

" 21 by day during past week. Is vomiting, today. Sept 21/94. Has continued noisy by day. Seems to

" 22 have some stomach trouble. Has vomited, more or less, each day, since 8th inst. Eats fairly.

" 25 Apparently is sleeping somewhat better of late. Is on medicine. Sept 25/94. No change to note. Has been detected, several times during the month, with small pieces of glass

" 30 in his mouth. Is noisy all day. Sept 30/94. Has continued noisy every day. Appetite

(carried to page 146)

History Henry C. Reed

Rochester, Minn., April 12

My Dear Mother, sisters and brothers. I expect where they are going to put me you will never see me again. ~~Upon with I leave by~~ I hope that you all will forgive me for my past life, and, although I might have rallied at home, I was horrified when I found that I was to be put in the mad house. Of course I grew worse when the opiates were taken away from me and could not have recovered any way, as the shock to my nerves when I came in from the screeches of the inmates could not be endured. I am not afraid to die after the terrible suffering I have endured in the past few years. I know that it will take

1894

This patient was brought here by Deputy Sheriff Chapel, with the following history. By occupation, a journeyman printer; he drinks to excess, and he has been habitually gambling for the past 6 years. There is no history of heredity. Supposed cause of this attack is his habits & dissipation: fears, chronic & depressed. There is no accompanying bodily disorder. First symptoms of disease were manifested about one year ago, by depression and moodiness. This is, probably, the second attack; he had a similar one at age of 17 years, lasting about 3 months. Insanity is now manifested by depression & suicidal tendencies. Patient has shown no disposition to injure others, but is suicidal. Attempted suicide last November, when he took laudanum and chloroform. He has no filthy or destructive habits. No peculiarities of temper as noted previously shown. There is no history of any bodily disease &c or head injury. He has not been restrained or confined. Patient has the usual general treatment for his present condition; but no results are stated. ——

Apl 9 On admission, was put on B^z (S.R. Complexion light; hair light; eyes blue; condition of skin good, has some marks on little finger of right hand. Bodily condition clean; behavior good). No eruptions or ulcers noticed. Pulse 74 R 16. T 99.2. April 10/94. Was restless for 4 hours a.m., sleeping but 2 hours, last night. AM. Pulse 74. R 17. T 99. Appetite fair; bowels constipated; no cough noticed. Behavior is good: he is, though somewhat restless, walking about the hall. Talks freely & rationally. Seems of a nervous temperament.
" 11 April 11/94. Slept only 2 hours, last night; was very restless for 6 hours. AM. Pulse 72 R 20 T 98.6. — Appetite only fair; walks about considerably; talks freely; says he is not as nervous as he was yesterday. —
" 12 April 12/94. Slept poorly, only 2 hours, last night; very restless the greater part of the night. AM. P 72. R 16. T 98.6. Has been very nervous all day; wants to kill himself. Has delusions; said they were going to put handcuffs on him. April 13/94. Restless & disturbed all last night; slept none at all. — Appetite poor, but bowels are regular. Has been very nervous & restless all day; "wants to commit suicide". —
" 14 Pulse, today, 74. April 14/94. Was given 2 sleeping doses last night, but slept & rest were not improved any; was restless for 5 hours, sleeping but 2 hours. Has been crying nearly all the day. — Pulse, this AM, 74. Still shows delusions; "thinks his mother is down stairs". "Wants to kill himself". —
" 15 April 15/94. Again passed a poor night; restless 6 hours, sleeping but 2 hours. AM. Pulse 74. Is very restless today, continually walking the hall; "hallooing" and tearing his hair; "wants somebody to give him poison".
" 16 Has eaten nothing all day. April 16/94. Was given hypnotic last night; slept only 4 hours; was restless for 4 hours or so. AM. Pulse 76. Has been very restless all day: ate nothing at dinner or supper. Writes occasional letters (see those, of recent date, attached, which purport to be a history of his life, his habits &c and also tend to show the many delusions he holds). April 17/94. Was restless & noisy for 8 hours, last night, slept none at all. AM. Pulse 74. Ate scarcely anything all day. Seems to have "fainting spells", at times; falling & throwing himself about in the benches & chairs. April 18/94. Slept somewhat better (6 hours) last night, though was restless for 2 hours or so. Is usually given one or 2 hypnotics each night. AM. P 72. Seems to be a little brighter today; ate a light dinner & supper. Still holds delusions; also has hallucinations.
" 19 talks at some imaginary person, at times. April 19/94. Restless 4 hours, sleeping 4 hours, last night. AM. Pulse 76. Ate a good dinner & supper today. Has been restless today; went to W in afternoon.
" 20 April 20/94. Restless 3 hours or so, but slept 5 hours, last night. AM. Pulse 74. Appetite fairly good. Is restless & singing this morning; took off his clothes this p.m. & wanted to go to bed. Mental state has been one of confusion, with melancholy character. April 21/94. Restless 3 hours, but slept 5 hours,

1894

Apl 21 (cont'd) last night. AM. Pulse 76. Restless & nervous today; walking the hall; singing, at times, and, at other
" 22 times, swearing, cursing and crying. April 22/94. Was fairly restful, sleeping 7 hours, last night. —
" 23 AM. Pulse 72. Appetite fairly good; in other respects no material change to note. April 23/94. Was restless for 5 hours, sleeping but 3 hours, last night. AM. Pulse 76. Appetite poor. Patient is restless & disturbed,
" 24 also much confused. April 24/94. Was restless all night and slept none. Very restless also today. —

Summary. On admission, patient talked quite freely and sensibly; a few days afterward, became nervous & restless and, at times, excited: pounding at the doors. Wanted to kill himself; also wanted [illegible] hallucinations. Appetite poor, most of the time. Is now improving. [illegible] away today. April 26/94. Was crying, at times, [illegible] il 27/94. Has been crying & walking the hall, most [illegible] been nightly, restless from 2 to 5 hours, sleeping only [illegible] walking the floor; crying & pounding at the doors. At times, also, is much excited. —
[illegible] hours, noisy 1 hour & slept only 3 hours, last night & sleeps, most of the time. May 24/94. Noisy in morning, good deal of the time, each day. Eats but little. Talks [illegible] still manifests delusions. — . ——
[illegible] patient has eaten nothing the past 3 days. Was fed by the [illegible] ally, says "there is something wrong with his mind" — [illegible] whole of the day. Appetite poor. Drinks milk quite freely, [illegible] appetite has improved & he now eats enjoyable. June 1/94. His [illegible] changed very much from that reported last month. Still, [illegible] continually & showing delusions. Lies about at the benches: [illegible] ?, in the past month). July 1/94. About as last generally [illegible] & talks some, even when addressed. Lies about in settees, [illegible]; bowels regular. Doesn't walking daily, but does no work. [illegible] sleeps poorly. Very noisy, at times, by day. Wants to have [illegible] piece of glass in his mouth & was trying to eat it; [illegible] mouth, today. Aug 22/94. Very noisy, today. Destroyed [illegible] an eruption on face & hands. Aug 31/94. Sleeps [illegible] Restless & noisy by day, & annoying to the others [illegible] ances in this way. Eats well, sometimes; again, eats [illegible] nothing. Voices conversation. [illegible] eruption on face & hands. Talks incoherently & has delusions; Habits fair. Does not seem to improve any & physical condition deemed poor.
Sept 1/8 Sept 1/94. Wt 140½ pds (a loss of 7 pds, in past month). Pulse 70. Sept 8/94. Has been very noisy
" 21 by day, during past week. Is vomiting, today. Sept 21/94. Has continued noisy by day. Seems to have some stomach trouble. Has vomited, more or less, each day, since 8th inst. Eats fairly.
" 28 Apparently is sleeping somewhat better of late. Is on medicine. Sept 28/94. No change to note. He has been detected, several times during the month, with small pieces of glass in his mouth. Is noisy all day. Sept 30/94. Has continued noisy every day. Appetite

(carried to page 148)

[illegible] one months to die, but, God, telling
[illegible] one; I hope that I may be able to
[illegible] endure the struggle while, but hope
[illegible] that it will be in a more rational
[illegible] manner. I forgive you,
[illegible] mother, dear, as I know you thought
[illegible] it for the best. Dear Tom, forgive me
[illegible] for the way I have treated you, but
[illegible] it was my terrible nervousness that
[illegible] made me so. They are going to take
[illegible] me to the dead house, as the physician
[illegible] thinks I have not the vitality to recover.
[illegible] and tie me down [illegible]
[illegible] only the terrible torture of dying that
[illegible] horrifys me. If they would give me
[illegible] an opiate and let me die easy I
[illegible] would be satisfied to leave this world
[illegible] after an ill-spent life. Thank, dear
[illegible] Mrs. Ball and Ethel for their great
[illegible] kindness in helping me when under

Personal and Medical History of Henry C. Reed.

1894

ISBERT, FOLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Chapel, with the following history. By occupation, a journeyman printer; he drinks to excess, and he has been habitually gambling for the past 6 years. There is no history of heredity. Supposed cause of this attack is his habits & dissipation: form, Chronic & depressed. There is no accompanying bodily disorder. First symptoms of disease were manifested about one year ago, by depression and moodiness. This is probably, the Second attack; he had a similar one at age of 17 years, lasting about 3 months. Insanity is now manifested by depression & suicidal tendencies. Patient has shown no disposition to injure others, but is suicidal. Attempted suicide

such a terrible strain. I hope to meet you all in another world brighter than this has been for me. I wish you, Lonie, a happy voyage through life, and I think you deserve it, as your life has been pure and noble. Had you understood the terrible nervous condition I labored under during the latter two or three years of my life you would have been a little more in sympathy with me. But of course, you didn't understand so will forgive you. Good bye and may God bless and keep you, from your son.

Henry.

130 Congress street
West St. Paul, Minn.

Rochester, Minn. April 12

I wish to make this statement for the benefit of medical science. I have studied my case ever since the first attack of what the doctors said was the result of self abuse. I had been a practitioner of such the same as all boys and found that it was undoubtedly such, as I grew much better and stronger after I abandoned the habit, which began at a very tender age. I was not responsible for the same as I experienced the sensation without at any time the excitement with out the use of the practice. At the age of 17 I had an other very nervous attack or a kind of mental trouble that the physicians said was attributed to excessive use of tobacco. I had never contracted any bad habits in dissipation until my 19th birthday, when I began to drink

falling & throwing himself about in the benches & chairs. April 18/94. Slept Some what better (6 hours) last night, though was restless for 4 hours or so. Is usually given one or 2 hypnotics each night. Appt. Fair. Seems to be a little brighter today; Ate a light dinner & supper. Still holds delusions: also has hallucinations. " 19 talks at some imaginary person, at times. April 19/94. Restless 4 hours, sleeping 10 hours, last night. Appt. Pulse 76. Ate a good dinner & supper today. Has been restless today; went to bed in afternoon. " 20 April 20/94. Restless 3 hours or so, but slept 8 hours, last night. Appt. Pulse 74. Appetite fairly good. Is restless & singing this morning; took off his clothes this p.m. & wanted to go to bed. Mental State has " 21 been one of confusion, with melancholy character. April 21/94. Restless 3 hours, but slept 8 hours,

Personal and Medical History of Henry C. Reed

1894

Apl 21 (cont'd) last night. Appt. Pulse 78. Restless & nervous today; walking the hall; singing at times, and at other " 22 times, swearing, cursing and crying. April 22/94. Was fairly restful, sleeping 7 hours, last night. — " 23 Appt. Pulse 72. Appetite fairly good; in other respects no material change to note. April 23/94. Was restless for 5 hours, sleeping but 3 hours, last night. Appt. Pulse 76. Appetite poor. Patient is restless & disturbed; " 24 also much confused. April 24/94. Was restless, all night and slept none. Very restless also today. — Summary. On admission, patient talked quite freely and sensibly; a few days afterward, became nervous & restless and at times, excited: pounding at the doors. Wanted to kill himself; also wanted Some n[illegible] [illegible]ations. Appetite poor, most of the time. Is on medicine " 26 Says [illegible]y. April 25/94. Was crying, at times, " 27 During [illegible] Has been crying & walking the hall, most " 30 of the [illegible]ty, restless from 2 to 5 hours, sleeping only from [illegible] floor; crying & pounding at the doors. Still [illegible], also, is much excited. —

May 1/2 May 1 [illegible] hour & slept only 3 hours, last night.
" 11/94 May 11 [illegible]t of the time. May 24/94. Noisy in morning
" 31 May 31 [illegible] the time, each day. Eats but little. Talks
in a [illegible]nifests delusions. — .. ——

June 2/ June [illegible]ates nothing the past 3 days. Was fed by the
" 7/8 tube, [illegible] "there is something wrong with his mind" —
" 10 June [illegible] the day. Appetite poor. Drinks milk quite freely,
" 18/ but [illegible]nipowed & is now fair considerable. June 1/94. His
" 30 appetit[illegible] much from that reported last month. Still,
restle[illegible] & showing delusions. Lies about at the benches:

July 2/31 July [illegible]t month). July 31/94. About as last generally
Decem[illegible] seen, even when addressed. Lies about in settees,
near[illegible]gular. Does not walk daily, but does no work.

Aug 2/19 Aug [illegible]. Very noisy, at times, by day. Wants to have
Some [illegible]glass in his mouth & was trying to eat it;
" 20/ Said [illegible]y. Aug 22/94. Very noisy, today. Destroyed
" 31 His [illegible]tion in face & hands. — Aug 31/94. Sleeps
poor [illegible] & noisy by day, & answering to the others'
Occa[illegible]t way. Eats well, sometimes; again, eats
nothing. Bowels constipated. Has considerable eruption on face & hands. Talks incoherently & has delusions; Habits fair. Does not seem disinclined to physical exertion. Seems poor.

Sept 1/8 Sept 1/94. Wt 140½ lbs (a loss of 7 lbs, in past month). Pulse 90. Sept 8/94. Has been very noisy
" 21 by day, during past week. Is vomiting, today. Sept 21/94. Has continued noisy by day. Seems to
" 28 have some stomach trouble. Has vomited, more or less, each day, since 8th inst. Eats fairly. Apparently is sleeping somewhat better of late. Is on medicine. Sept 28/94. No change to note. Is has been detected, several times during the month, with small pieces of glass
" 30 in his mouth. Is noisy all day. Sept 30/94. Has continued noisy, every day. Appetite

(carried to page 148)

Personal and Medical History of Henry C. Reed.

1894

This patient was brought here by Deputy Sheriff Chapel, with the following history. By occupation, a Journeyman-printer; he drinks to excess, and he has been habitually gambling for the past 6 years. There is no history of heredity. Supposed cause of this attack is his habits & dissipation: form, chronic & depressed. There is no accompanying bodily disorder. First symptoms of disease were manifested about one Year ago, by depression and moodiness. This is probably, the Second attack; he had a similar one at age of 17 years, lasting about 3 months. Dia- manifested by depression & suicidal tendencies. hist is suicidal. Attempted Suicide last Novem- has no filthy or destructive habits. No peculiar- story of any bodily disease or heredity. He has not general treatment for his present condition; bu-

Apl 9 On admis- ght; eyeballs; condition of skin good, tongue clean; behavior good). No eruptions or ulcers not- es for 4 hours or so, sleeping but 4 hours, last night. [illegible] no cough noticed. Relation is good: he is, though some- Seems of a nervous temperament.

" 11 April 11/94. s. AM. Pulse 72 R 20 Temp 98.6. — Appetite only f- as nervous as he was yesterday. —

" 12 April 12/94. eater part of the night. PM. P72. R 16. T 9 self". Has delusions: said they were

" 13 Going to put ll last night; slept none at all. — Appetite poor less all day; "wants to commit suicide" —

" 14 Pulse, to-day, night, but slept great deal not improved any- crying nearly all the day. — Pulse, this AM stairs." "Wants to kill himself." —

" 15 April 15/94. A- hut 2 hours. AM. Pulse 74. Is very restless today. his hair; "wants somebody to give him poison".

" 16 Has eaten not- ight; slept only 4 hours; was restless for 4 hours or- te nothing at dinner or supper. Writes occasional lett- be a history of his life, his habits &c

" 17 and also tend- as restless & noisy for 3 hours, last night. slept none at all. TM. Pulse 74. Ate scarcely anything all day. Seems to have "fainting spells", at times; falling or throwing himself about in the benches & chairs. April 18/94. Slept somewhat better (6 hours) last night, though was restless for 2 hours or so. Is usually given one or 2 hypnotics each night. AM. P72. Seems to be a little brighter today; Ate a light dinner & supper. Still holds delusions: also has hallucinations.

" 19 talks at some imaginary person, at times. April 19/94. Restless 4 hours, sleeping 4 hours, last night. AM. Pulse 76. Ate a good dinner & supper today. Has been restless today; went to bed in afternoon.

" 20 April 20/94. Restless 3 hours or so, but slept 5 hours, last night. AM. Pulse 74. Appetite fairly good. Is restless & singing this morning; took off his clothes this p.m. & wanted to go to bed. Mental State has been one of confusion, with melancholy character. April 21/94. Restless 3 hours, but slept 5 hours,

Personal and Medical History of Henry C. Reed

1894

Apl 21 (cont'd) last night. AM. Pulse 76. Restless & nervous today; walking the hall; singing, at times, and, at other

" 22 times, swearing, cursing and crying. April 22/94. Was fairly restful, sleeping 7 hours, last night. —

" 23 AM. Pulse 72. Appetite fairly good; in other respects no material change to note. April 23/94. Was restless for 5 hours, sleeping but 3 hours, last night. AM. Pulse 76. Appetite poor. Patient is restless & disturbed;

" 24 also much confused. April 24/94. Was restless all night and slept none. Very restless also today. — Summary. D- patient talked quite freely and sensibly; a few days afterwards, became

and dissipated generally. I never was addicted to the use of stimulants to a very great degree, but took the Hughes' treatment when the advice of my brother who thought it would be beneficial to my "nerves". At the age of 20 I contracted what the physicians ~~in~~ I first treated with pronounced syphilis, but the hospital physicians would not commit themselves as to the nature of the disease. I treated for about three months and it never appeared afterward only a slight sore in the mouth. I always thought it was syphilis. But as long as it did not appear again after a period of four years I hope I will be exonerated from the effects of such if such it be. My attacks were always the same of self, it always appearing to me very strange of my existence, thought, etc. It has been coming on in this last attack for about a year, although I had thousands of different little shocks that I fought off from sheer force of will. I was have been very morbid and melancholy since the age of 14 it appearing to me that I had no particular aim in life and that my folks did not love me as fondly as they did each other, all of which I of course, I knew to be groundless. I never took ~~any~~ opiates of any kind until the middle of December last, when I made an attempt at self-destruction, taking 3 grains of morphine, it only producing about 6 hours' sleep. I then took four ounces of laudanum and both inhaled and drank chloroform, but was discovered at the "eleventh hour" which was about 4 hours afterward, and given a "sick" bed in the institute (Hughes') where I had gone back to take treatment about a year afterward, because of drinking again as a result of the indescribable feelings produced upon my brain by the attack of "nervousness"

occasionally receives a black eye & some times a cut lip. Eats voraciously; bowels constipated. Has considerable eruption on face & hands. Talks incoherently & has delusions; Habits fair. Does not know Duration or any Physical condition deemed poor.

Sept 1/8 Sept 1/94. Wt 140½ lbs (a loss of 7 lbs. in past month). Pulse 90. Sept 2/94. Has been very noisy

" 21 by day. during past week. Is vomiting, to-day. Sept 21/94. Has continued noisy by day. Seems to have some stomach trouble. Has vomited, more or less, each day, since 8th. inst. Eats fairly.

" 25 Apparently, is sleeping somewhat better of late. Is on medicine. Sept 25/94. No change to note. Has been detected, several times during the month, with small pieces of glass

" 30 in his mouth. Is noisy all day. Sept 30/94. Has continued noisy every day. Appetite

(carried to page 165)

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Chapel, with the following history. By occupation, a journeyman printer; he drinks to excess, and he has been habitually gambling for the past 5 years. There is no history of heredity. Supposed cause of this attack is his habits & dissipation: found, chronic & depressed. There is no accompanying bodily disorder. First symptoms of disease were manifested about one year ago, by depression and moodiness. This is probably the 2nd attack; he had a similar one at age of 17 years, lasting about 3 months. [illegible] manifested by depression & suicidal tendencies, but is suicidal. Attempted suicide last November. [illegible] seems filthy & destructive habits. No special [illegible] history of any bodily disease & or head injury. He has not [illegible] general treatment for his present condition; [illegible]

Apl 9 On admission, patient talked quite freely and sensibly; a few days afterwards, became [illegible] and at times excited; [illegible] one months to die, but, God, killing [illegible] night; expelled; condition of skin good, [illegible] one; I hope that I may be able to [illegible] now clean; behavior good). No eruptions or ulcers not [illegible] endure the struggle while, but hope [illegible] hours or 2 to 3 sleeping but 4 hours, last night. [illegible] it will be [illegible] manners, I forgive you, [illegible] irrational; no caught noticed. Behavior is good: is is, though som[illegible] mother, dear, as I know you thought [illegible] seems of a nervous temperament.

" 11 April 11/94. it for the best. Dear Lou, forgive me [illegible] Pulse 72 R 20 T 98.6. —

Appetite only [illegible] for the way I have treated you, but [illegible] as nervous as he was yesterday. —

" 12 April 12/94. it is now my terrible nervousness that [illegible] greater part of the night. A.M. P 72.

R 16. T 98/ made me so. They are going to take [illegible] self". Has delusions: said they were

" 13 Going to put me to the dead house, as the physician [illegible] all last night; slept none at all. —

Appetite poor thinks I have not the stability to recover, [illegible] less all day; "wants to commit suicide" —

" 14 Pulse, today, and tie me down until I die! [illegible] night, but slept & rest now not

improved any only the terrible torture of dying that [illegible] been crying nearly all the day. —

Pulse, this A.M horrifys me. If they would give me [illegible] stairs. "Wants to kill himself". —

" 15 April 15/94. A an opiate and let me die easy I [illegible] but 2 hours. A.M. Pulse 74. Is very

restless today, would be satisfied to leave this world, [illegible] his hair; "wants somebody to give him poison".

" 16 Has eaten not after an ill-spent life. Thank, dear [illegible] night; slept only 4 hours; was restless

for 4 hours to Mrs. Ball and Ethel for their great [illegible] te nothing at dinner or supper. Writes

occasional lett kindness in helping me when under [illegible] be a history of his life, his habits &c

" 17 and also tend [illegible] as restless & noisy for 3 hours, last night.

slept none at all. A.M. Pulse 74. Ate scarcely anything all day. Seems to have "fainting spells", at times;

" 18 falling or throwing himself about in the benches & chairs. April 18/94. Slept somewhat better (6 hours) last night, though was restless for 4 hours or so. Is usually given one or 2 hypnotics each night. A.M. B72.

Seems to be a little brighter today; Ate a light dinner & supper. Still holds delusions: also has hallucinations.

" 19 talks at some imaginary person, at times. April 19/94. Restless 4 hours, sleeping 4 hours, last night.

A.M. Pulse 76. Ate a good dinner & supper today. Has been restless today; went to bed in afternoon.

" 20 April 20/94. Restless 3 hours or so, but slept 5 hours, last night. A.M. Pulse 74. Appetite fairly good.

Is restless & singing this morning; took off his clothes this P.M & wanted to go to bed. Mental state has

" 21 been one of confusion, with melancholy character. April 21/94. Restless 3 hours, but slept 5 hours,

Apl 21 cont'd last night. A.M. Pulse 76. Restless & nervous today; walking the hall; singing, at times, and, at other

" 22 times, swearing, cursing and crying. April 22/94. Was fairly restful, sleeping 7 hours, last night. —

" 23 A.M. Pulse 72. Appetite fairly good; in other respects no material change to note. April 23/94. Was restless

for 5 hours, sleeping but 3 hours, last night. A.M. Pulse 76. Appetite poor. Patient is restless & disturbed,

" 24 also much confused. April 24/94. Was restless all night and slept none. Very restless also today. —

Summary. On admission, patient talked quite freely and sensibly; a few days afterwards, became [illegible] and at times excited; [illegible]

I have been employed upon the Dispatch, a paper in St. Paul for about eight years, and would have been on the editorial staff, had I been more steady. I wrote 3 articles in the Globe St. Paul Times to try and divert my mind, and was under a horrible nervous strain at the time. I know that decomposition has set in and therefore have no hope or desire to live further. If it is pronounced syphilis as the result of death I hope that I will be forgiven as I was a victim to misfortune the same as thousands are. I feel satisfied that God will release my soul cleansed from the foul body of weak suffering. I have never committed any act of forgiveness knowingly to any human being. I loved my mother, and brothers and sisters as dearly as I did any [illegible] like when not afflicted with "nervousness" I certainly had a brilliant future before me if I could only have survived, as I had very good ability as an actor or journalist as competent critics said. I think that the direct cause of this terrible affection

was the result of the Hughes' system, as it did and produces the same results as it did upon other patients, bringing on convulsions during the treatment and ever since I have suffered the most horrible [illegible] I have received very good attention from the hospital attendants, and I feel particularly under obligations to Mr. I convey for his kind consideration, [illegible] letter given me by Dr. Costello, editor in chief of the Dispatch, which is now in the superintendent's hands, and it will tell far greater than I can on this horrible condition of any character. I have supported myself ever since I was 12 years of age, and contributing to the wants of my dear mother as far as it was in my power to do so. I contracted the terrible

working. Bowels Constipated. Has considerable eruption on face & hands. Talks incoherently & has delusions; Habits fair. Does not seem Dangerous any & physical condition seems Poor.

Sep 1/8 Sept 1/94. Wt 140½ lbs (also of 4 lbs, in past month). Pulse 70. Sept 2/94. Has been very noisy

" 21 by day, during past week. Is vomiting, today. Sept 21/94. Has continued noisy by day. Seems to have some stomach trouble. Has vomited, more or less, each day, since 8th inst. Eats fairly

" 25 Apparently, is sleeping somewhat better of late. Is on medicine. Sept 25/94. No change to note. Has been detected, several times during the month, with small pieces of glass in his mouth. Is noisy all day. Sept 30/94. Has continued noisy, every day. Appetite

(carried to page 178)

1894

This patient was brought here by Deputy Sheriff Chapel, with the following history. By occupation, a Journeyman painter; he drinks to excess, and he has been habitually gambling for the past 6 years. There is no history of heredity. Supposed cause of this attack is his habits & dissipation: form, Chronic & depressed. There is no accompanying bodily disorder. First symptoms of disease were manifested about one year ago, by depression and moodiness. This is probably, the Second attack; he had a similar one at age of 17 years, lasting about [illegible] manifested by depression & suicidal tendencies [illegible], but is suicidal. Attempted suicide last Novem[illegible] has no filthy & destructive habits. No [illegible] history of any bodily disease &c or headaging. He has not [illegible] general treatment for his present condition; t[illegible]

April 9 On admi[illegible] right; eyeballs; Condition of Skin good, has some r[illegible] w clean; behavior good). No eruptions or ulcers no[illegible] es for 4 hours or so, sleeping but 4 hours, " 10 last night. [illegible] no cough noticed. Behavior is good: he is, though som[illegible] g. Seems of a nervous temperament. " 11 April 11/94. [illegible] s. AM. Pulse 72 R 20 T 98.6. — Appetite only [illegible] as nervous as he was yesterday. — " 12 April 12/94. [illegible] eater part of the night. AM. P 72. R 16. T 9[illegible] self". Has delusions: Said they were " 13 Going to put [illegible] ll last night; Slept none at all. — Appetite Poo[illegible] ess all day; "wants to commit suicide" — " 14 Pulse, to day [illegible] night, but Slept more now not improved an[illegible] been crying nearly all the day. — Pulse, this AM [illegible] Stairs". "Wants to kill himself". — " 15 April 15/94. [illegible] ut 2 hours. AM. Pulse 74. Is very restless today [illegible] his hair; "wants somebody to give him poison". " 16 Has eaten no[illegible] ight; Slept only 4 hours; was restless for 4 hours or [illegible] e nothing at dinner or supper. Writes occasional let[illegible] be a history of his life, his habits &c and also tend[illegible] s restless & noisy for 8 hours, last night, " 17 Slept none at all. AM. Pulse 74. Ate scarcely anything all day. Seems to have "fainting spells", at times; " 18 falling & throwing himself about in the benches & chairs. April 18/94. Slept some what better (6 hours) last night, though was restless for 4 hours or so. Is usually given one or 2 hypnotics each night. AM. P72. Seems to be, a little brighter, to day; Ate a light dinner & supper. Still holds delusions: also has hallucinations. " 19 talks at some imaginary person, at times. April 19/94. Restless 4 hours, Sleeping 2 hours, last night. AM. Pulse 76. Ate a good dinner & supper today. Has been restless today; went to bed in afternoon. " 20 April 20/94. Restless 3 hours or so, but slept 5 hours, last night. AM. Pulse 74. Appetite fairly good. Is restless & singing this morning; took off his clothes this P.M & wanted to go to bed. Mental State has " 21 been one of Confusion, with melancholy character. April 21/94. Restless 3 hours, but slept 5 hours,

fascination for gambling on race horses and would give 1/2 of my salary per week to play them. I have always made resolutions to do better from one week to another, always failing because of the loss of will power. I hope my operation will [illegible] some new feature in medical science as it will. I hope it will be beneficial to suffering humanity. I cannot say any more now as I am too excited, the only hope for death, which I think will come to [illegible] as I shall leave it close.

I will have it close.

Henry Clay Reed

1894

April 21 (cont'd) last night. AM. Pulse 76. Restless & nervous today; walking the hall; singing, at times, and, at other " 22 times, swearing, cursing and crying. April 22/94. Was fairly restful, sleeping 7 hours, last night. — " 23 AM. Pulse 72. Appetite fairly good; in other respects no material change to note. April 23/94. Was restless for 5 hours, sleeping but 3 hours, last night. AM. Pulse 76. Appetite poor. Patient is restless & disturbed; " 24 also much confused. April 24/94. Was restless all night and slept none. Very restless also today. — Summary. On admission, patient talked quite freely and sensibly; a few days afterward, became nervous & restless and, at times, excited: pounding at the doors. Wanted to kill himself; also wanted some one to poison him; manifest delusions; also hallucinations. Appetite poor, most of the time. Is on morphine " 26 Says "he was bitten by a mad dog - Tried to run away, today. April 26/94. Was crying, at times, " 27 during the night, and pounding at the door. April 27/94. Has been crying & walking the hall, most " 30 of the day. April 30/94. Since last noted, has been nightly, restless from 2 to 5 hours, sleeping only from 3 to 6 hours, each night. Restless by day; walking the floor; crying & pounding at the doors. Still shows delusions, also hallucinations. At times, also, is much excited. —

May 1/2 May 1/94. Wt 134 pds. Pulse 82. May 2/94. Restless 5 hours, noisy 1 hour & slept only 3 hours, last night. " 11/24 May 11/94. Is stubborn; lies about on the benches & sleeps, most of the time. May 24/94. Noisy in morning " 31 May 31/94. Restless & excited & walking the floor, a good deal of the time, each day. Eats but little. Talks in a rambling & incoherent manner. He still manifests delusions. — : —

June 2/7 June 2/94. Wt 136 pds. Pulse 88. June 5/94. Patient has eaten nothing the past 3 days. Was fed by the " 7/8 tube, to day. June 7/8/94. Restless & talking continually; says "there is something wrong with his mind" — " 10 June 10/94. Talks all the time; very noisy, either part or whole of the day. Appetite poor. Drinks milk quite freely, " 18/21 but does not eat much solid food. June 18/94. Appetite has improved & is now quite considerable. June 21/94. His " 30 appetite is becoming ravenous. June 30/94. Has not changed very much from that reported last month. Still restless, excited & noisy at times; talking almost continually & showing delusions. Lies about on the benches.

July 2/31 July 2/94. Wt. 144 pds (a gain of 8 pounds in weight, in the past month). July 31/94. About as last generally described, though, of late, he has become very reticent & talks none, even when addressed. Lies about on settees, nearly all of the time, when indoors. Appetite good; bowels regular. Does not walking daily, but does no work.

Aug 2/14 Aug 2/94. Wt 147½ pds. Pulse 102. Aug 9/94. Sleeps poorly. Very noisy, at times, by day. Wants to have " 20/ someone kill him. Was today, found with a piece of glass in his mouth & was trying to eat it; 31 said "he wanted to die". Aug 20/94. Visited by mother, today. Aug 24/94. Very noisy, today. Destroys his clothes. Transferred to C 3rd. Patient has an eruption on face & hands. Aug 31/94. Sleeps poorly, at night; frequently noisy & restless. Restless & noisy, by day, & annoying to the others: occasionally receives a black eye & some bruises in this way. Eats well, sometimes; again, eats nothing. Bowels Constipated. Has considerable eruption on face & hands. Talks incoherently & has delusions; Habits fair. Does not seem to improve any & physical condition deemed poor.

Sept 1/8 Sept 1/94. Wt 140½ pds (a loss of 7 pds, in past month). Pulse 90. Sept 8/94. Has been very noisy " 21 by day, during past week. Is vomiting, today. Sept 21/94. Has continued noisy by day. Seems to have some Stomach trouble. Has vomited, more or less, each day, since 8th. Past. Eats fairly. Apparently is sleeping somewhat better of late. Is on medicine. Sept 28/94. No change " 28 to note. He has been detected, several times during the month, with small pieces of glass in his mouth. Is noisy all day. Oct 30/94. Has continued noisy, every day. Appetite

(carried to page 48)

Personal and Medical History of Thomas Johnson

ROBERT, FULLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3686.
Residence, Blooming Prairie, Minn
Date Admission, 11th April 1894.
Admitted by, Dr. Eby — Hour, 12 M
How Sent, Dr. B. Hardwicks Jo P., Steele County
Sex, Male
Age, 58
Civil Condition, married
Children, none
Age Youngest Child, —
Occupation, Farmer
Degree Education, probably limited
Profession Religion, is a church member
Habits, Good, so far as known
Nativity, Norway —
Physicians Committing, J. Palmer Johnson and J. H. Hair
Correspondents, Mrs. Barbo Johnson (wife)
Care of L. O Lower, ~~Blooming~~ Prairie Minn.

No. for Year, 256.
Insane Relatives, one brother
Cause Exciting, Family troubles
Cause Predisposing, hereditary
Form,
Accompanying Bodily Disorder, none Stated
Suicidal or Not, not known —
Date of this Attack, 10th April 1894.
Duration, only one day
No. of Attack, 1st (of which time is any history).
No. of Admissions, 1st
Age First Attack, 58 (?)
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Exd by Dr. Eby. April 11/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish,
MEMORY:
Past Events, Good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Quite active
Correct or Illusive,
REASONING POWER:
Ordinary Subjects,
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Complains of soreness and dizziness. Thinks his wife is unfaithful & has been trying to kill him for the last 15 years. —

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, somewhat;
DELUSIONS:
Systematized or Not, of persecution by wife.
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, free

Personal and Medical History of Thomas Johnson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 5 in. WEIGHT, 154 pds NUTRITION, Good.
WOUNDS OR ABNORMALITIES, See "S. R", on next page.
TONGUE, Tremors, slight deviation to left Coatings, some coating Promptness Movement, Prompt
PUPILS, Equality, Equal Size, normal
Response Light, very little response Accommodation, slight
SIGHT, Quite impaired.
HEARING, good
COORDINATION, Arms, Fingers normal, Eyes shut. Good for an old man.
Legs, standing, eyes shut, Slight Swaying.
TREMORS, Hands, none Tongue, slight —
Facial Muscles, General, No special tremors; is a weak old man.
REFLEXES, Patellar, Impossible to test, owing to failure of patient to relax muscles. —
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, 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,") } no history obtainable
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

HERBERT, FIGLER & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy Sheriff John Thorsen, with the following history. By occupation a farmer; habits good, so far as known. Some heredity; one brother insane. Supposed cause of this attack is family troubles. Some acute; no accompanying bodily disorder mentioned. Date of this attack is of yesterday (April 10/94); was found wandering about the streets of Owatonna, shouting and indined to be violent. This is the first attack of which there is any history. Insanity is now shown in that his jealousy of his wife & declares her to be determined to get all his property. Also declares wife to be a strumpet. Think he was not disposed to injure others, except when violent at the inception of this acute attack. No history of any attempts at suicide are obtainable; he has no filthy or destructive habits, so far as known. Patient suffered from influenza, a year and a half ago; no further history available. Has not been restrained or confined except by police during this attack. Has had no medical treatment except during above attack of "La Grippe".

Apl 11 On Admission, was put on B 3 (S.R. Complexion dark; hair gray; eyes blue; Condition of skin good; has a bunch in right leg, below the knee; third finger right hand is off; has also a scratch on right shoulder. Bodily Condition dirty. Patient is nearly bald; came in, tied with a rope, but has been quiet since in the ward).

" 12 Pulse 60. R 28 Te 99+ Is stubborn & contrary. April 12/94. Was noisy for 3 hours. Slept 4 hours, last night. Am. Pulse 70. Te 99.2. Did not eat any breakfast, but ate a good dinner & supper. Bowels have moved. Patient has some cough. Is quiet & fairly well behaved, today, though somewhat stubborn and contrary: has been lying down, mostly all day. Shows delusions. "Thinks his wife is unfaithful to him & that she has been trying to kill him." Complains of being sore, all over his body, but mostly across his breast. ——

" 13 April 13/94. Slightly noisy, during the night, for 4 hours or so; slept about 5 hours. Am. Pulse 62. Te 99 - so, today, quite noisy & vulgar in his language; very stubborn; when out walking, would not keep with the rest.

" 14 April 14/94. Rested fairly well, sleeping 7 hours, last night; only restless for a couple of hours; Am. Pulse 60. 2 (c) refused. Appetite Good; bowels apparently regular. April 15/94. Was noisy for 2 hours, but slept 5

" 15 hours, last night. Appetite is good; bowels move. April 16/94. Restless about 2 hours, but slept 7 hours,

" 16 last night. Appetite fairly good; occasionally refuses to eat for one or 2 meals. Bowels are regular. - Is still stubborn & noisy, at times. April 17/94. Slight noisy for 4 hours, but slept 5 hours, last night.

" 17 Appetite fairly good; bowels regular; was vaccinated today. April 24/94. During past week, patient

" 24 has been slightly noisy for a couple of hours, but has been sleeping 6 to 7 hours, each night. Appetite has been

" 25 good; bowels regular. Is more quietly behaved, of late. April 25/94. Was today, transferred to B 3d. - Pulse 70. R 30. Behavior quiet, but sullen. Talks readily, but still shows delusions. Is jealous of his wife (who is 60 years of age); imagines she tried to get people to kill him. Appetite good; bowels seem regular. No cough observed. Is lonely, & wishes books to read. (Had a black eye when received at this ward).

Summary. Patient appears to be of a sullen and obstinate disposition, which was more pronounced during the first week, than lately; he seems, now, to have quieted down considerably & is thoroughly alive to his environments. Eats & sleeps well & appears to be in good physical health. He is of a jealous nature

" 30 and still holds delusions in regard to his wife, as above mentioned. - April 30/94. Appetite good; bowels regular; no cough noted. Is quietly behaved; makes no complaints. Talks very little, but is inclined to be abusive in his remarks about his surroundings & is dissatisfied with the Hospital, generally. He is in fairly good bodily health. Habits are clean. —— " —— " ——

May 1/31 May 1/94. Wt 149 lbs. Pulse 60. May 31/94. Is a quarrelsome patient & a loud talker; subject to delusions & occasionally violent. Makes no complaints. No injuries to report. Is cleanly in his habits. —

June 1/30 June 1/94. Wt 155 pounds; (has made some gain in flesh). Pulse 76. June 30/94. No change to note since last report.

July 2/31 July 2/94. Wt 149 lbs (has lost some in past month, without apparent cause) Pulse 74. July 13/94. Has his left arm, at elbow-joint, swollen: patient attempted to run away while out in the grove, today, and when brought back probably received this injury accidentally. July 31/94. There seems to be no change in either his mental or physical condition during the past 3 months. Is apparently in good health. Habits are cleanly. -

Aug 1 Aug 1/94. Wt 137 pds. (keeps losing in flesh, without apparent known cause; has lost 10 lbs in the

" 31 past month. Does not complain of any ill feeling) - Pulse 98. Aug 31/94. Apparently, eats and sleeps well, at night. Appetite good; bowels regular - Appears therein good bodily health. — Behavior is good, for the most part, but at times, he is noisy & abusive - to complaints or injuries to report. Talks freely but incoherently & has delusions. - Is cleanly in his personal habits.

Sep 1/30 Sept 1/94. Wt 141 pds (a slight gain). Pulse 72. Sept 30/94. No alteration in condition of patient, either physically or mentally, since last report. Was today transferred to B 3 3 ward. —

" 30 Sept 30/94. Since coming at this ward, no change observed in either his physical or mental condition, except that he seems to be getting more fleshy. Personal habits are good & clean.

Oct 1/6 Oct 1/94. Wt 161 pds (a marked gain in flesh). Pulse 74. Oct 6/94. Has not partaken of any food,

" 7 during the day. Oct 7/94. Did not eat any breakfast but ate a good dinner & supper. At

" 31 times will not eat for a few meals. Oct 31/94. Occasionally refuses meals. Otherwise no change -

Nov 1/30 Nov 1/94. Wt 136 pds. Pulse 78. Nov 30/94. Appetite good, at times & again he will go 3 & 4 days without food - Becomes easily excited & is then very noisy - Dec 1/94. Wt 165 pds. P. 71. Jan 1/95. Wt 157 pds.

Dec 1 Pulse 96. Jan 31/95. Appetite very changeable - Still refuses a good many meals - Has a very bad temper,

Jan 2/31 often getting provoked at nothing; at the same time, being very noisy & nothing will quiet him until he get over his anger & madness. Habits are clean. He does not work any. Feb 1/95. Wt 157 pds. Pulse 92

Feb 1 Feb 28/95 Appetite good: bowels regular. Behavior, at times, very noisy & he is easily provoked. Will go

" 28 for 3 a 4 meals, without eating any food - Habits clean. No work. Mar 1/95. Wt 152 1/2 pds. BP. Mar 31/95. No change

Mar 1/31 Apl 1/95 Wt 153 pds. Pulse 84. Apl 30/95: No change especially & generally noticeable in his condition.

Apl 1/30 May 1/95. Wt 152 " " 96. May 31/95. Was struck by patient R. Relph, causing nose to bleed &

May 1/31 discoloring his eyes. May 31/95: Appetite fairly good. Bowels regular: behavior, at times, fairly good.

" 31 Gets angry very often, when he becomes very noisy, talking incoherently: sometimes he refuses food, for 4 or 5 meals. Habits clean. He does no work. June 1/95. Wt 144 pds. P 74. June 30/95: No change.

June 1/30 July 1/95. Wt 146 pds. Pulse 80. July 31/95. No change noticeable in any way. Health seems good.

July 1/31 Aug 1/95. Wt 146 " " 96 Sept 2/95. Wt 132 pds. P 102. Oct 1/95. Wt 135 pds. Pulse 84.

Aug 1 Oct 31/95. Patient quite often refuses food: Aug 17th had refused food for 8 meals: & at

Sept 1 times will go 3 days without eating food: has the delusion it is poisoned, especially

Oct 1/31 what meat he gets. (This will account for his loss of flesh). Talks incoherently, and is very noisy at times. Habits clean. Nov 1/95. Wt 141 pds. Pulse 78. Nov 30/95. Becomes very

Nov 1/30 angry & noisy, occasionally: abusing the nurses & officials in his native language (he cannot talk English): still refuses meals from time to time holds this delusion that "the food is not fit to eat" & that they are trying to feed him on human meat &c". Habits clean: he does not work. Physical health seems good.

Dec 1/31 Dec 1/95. Wt 142 pds. Pulse 68. Dec 31/95 keeps about the same, all the time. Still has delusions.

1895 Jan 1/31 Jan 1/96. Wt 141 " " 88. Jan 31/96. Transferred to B 1 (on account of a general change of wards)

" 31 Jan 31/96. No special change. Gets into fights & receives bruises occasionally. Health seems good

carried to Female Ward A page 273

Personal and Medical History of Charles Bloomquist #2

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3690.
Residence, Faribault, Minn.
Date Admission, 13th April 1894.
Admitted by, Dr Kilbourne Hour, 4.30 PM.
How Sent, L. A. Mott, Jof C. Rice County
Sex, Male
Age, 23 —
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Carpenter —
Degree Education, not given.
Profession Religion, Lutheran (supposed)
Habits, Intemperate.
Nativity, Sweden —
Physicians Committing, J. D. Seeley and D. M. Cook
Correspondents, August Swanson, Silver Creek Wright Co. Minnesota

No. for Year, 260.
Insane Relatives, not known
Cause Exciting, masturbation
Cause Predisposing, probably intemperance
Form,
Accompanying Bodily Disorder, none
Suicidal or Not, not known, has frequently expressed a wish to die.
Date of this Attack, not known; apparent since last August
Duration, about 8 months
No. of Attack, 1st so far as known
No. of Admissions, 1st
Age First Attack, about 22
Time of Leaving, Apr. 26. 1900
Time in Hospital, 12 D. 2 M.
Result, Transferred to Hastings.

EXAMINATION ON ADMISSION.

Early D. Ely, April 21/94.

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm, Normal & Calm
Indifferent,
Exalted,
Depressed, some
DELUSIONS:
Systematized or Not, none noted now
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, yes

GENERAL DESCRIPTIVE REMARKS:
Complains of a "pumping" in chest over heart, says "blood goes too fast"; "feels it over body like rheumatism" — says "thinking about girls too much was what set him off" —

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7½ WEIGHT, 171½ lbs. NUTRITION, Good.
WOUNDS OR ABNORMALITIES, see "S. R." on next page.
TONGUE, Tremors, quite tremulous Coatings, slight coating Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, seems good
HEARING, Good
COORDINATION, Arms, } Romberg's none, eyes shut, good.
Legs, } Good, by usual tests, the "standing" with eyes shut, shows slight unsteadiness.
TREMORS, Hands, slight Tongue, coarse
Facial Muscles, none General, — none —
REFLEXES, Patellar, equal — about 3 —
Other Reflexes,
ARTICULATION, Hesitating, Norsepi accent Slurred,
FACIAL EXPRESSION, somewhat blank. —
SENSIBILITY, normal
HEART, Sounds good; quite frequent
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 living
Father or Pat. Relations, Father dead; probably phthisis
Brothers or Sisters, 1 sister;
} no relatives known to be insane —

Personal and Medical History of Charles Bloomquist #2

1894

This patient was brought here by Wm Geiger, Chief of Police, with the following history. Habits are intemperate: not known if any history of heredity. Supposed cause of this attack is masturbation; form is chronic. No accompanying bodily disorder. When first symptoms of the disease were manifested is not known; he has been in Faribault since last August, and they were apparent then. This is 1st attack, so far as known. Insanity is now shown by perverted sexual ideas. There is no disposition to injure others, so far as known: if suicide has been attempted is not known, but he has frequently expressed a wish that he might die. Has no filthy or destructive habits; nor is there history of any bodily disease or injury to head. He has not been restrained or confined, so far as known. Says he has been treated by Physicians of St Paul & Minneapolis."

April 13 On admission, was put on B[3] (S.R. Complexion dark; hair black; eyes gray; condition of skin good. Has a scratch on left arm. Bodily condition only. Behavior good; but is very stupid & disinterested). —

" 14 April 14/94. Slept 8 hours, last night; was quietly behaved. AM. Pulse 80 (Int). Rig. Appetite good; — bowels have moved; no cough noticed. PM. Has been quiet during the day, but became frightened at bed- — time and had a spell of screaming. Talks none. No complaints or injuries to report. April 15/94. Slept

" 15 all night. AM. Pulse 82. (Int.) Appetite good. Bowels seem regular. Behavior very good; talks little. Is

" 16 much confused & bewildered. April 16/94. Restful, sleeping 7 hours, last night. AM. Pulse 78. Appetite

" 17 good; behavior quiet; went out walking today. April 17/94. Slept well, again, last night. Appetite good;

" 18 bowels regular. Is quietly behaved; talks very little; had a "crying spell" today. April 18/94. Complains some

" 19 of headache. Talks rationally but hesitates. Goes out walking with the rest. April 19/94. Is quietly — behaved; makes no complaints. Talks only when spoken to; answers in a rational manner, but

" 27 still has a hesitating way about him. April 27/94. Since last noted, patient has continued to rest and sleep well at night, about 7 hours each. Has been uniformly quiet & well-behaved by day. Appetite has been good; bowels regular. Was received on ward in a stupid condition; did not talk or seem to realize what was said to him. In the course of 2 or 3 days, however, brightened up somewhat, and commenced to answer questions, though in a hesitating manner. Talks a little more freely now & quite rationally. Reads some; writes occasional letter; goes out walking. Complains a little of headache & constipation & of a peculiar sensation in the region of the heart. Works on ward; is obedient & quiet. Physical condition seems good: mental condition considerably improved.

" 30 April 30/94. Continues well-behaved; obedient & quiet. Improvement seems to continue, also.

May 6 May 1/94. Wt 174 pds. Pulse 76. May 5/94. Patient has been well-behaved since coming on ward. He sleeps

" 15 soundly; eats well; talks quite rationally. May 15/94. Keeps about as usual: works a little each day, on the ward, but is not very active. Makes no complaints. Was transferred to B[1] at 5 PM, this evening —

" 31 May 31/94. He is not so stupid, as he was on coming here. Is quiet & well-behaved. Is more lively & active, and talks more freely. Continues to improve. Appetite good; bowels regular. Habits cleanly.

June 1/29 June 1/94. Wt 174 pds. Pulse 83. June 29/94. For some days, patient has been quite noisy; would go about the ward, crying & laughing & at times, would yell out. Cannot be induced to work. Moved to B[3] today.

" 30 June 30/94. Continues quite noisy, at times; crying & talking incoherently. Habits clean. Does no work.

July 1/31 July 1/94. Wt 179 pds. Pulse 80. July 31/94. Has relapsed into his dull & stupid condition: he can hardly be induced to move. Talk incoherently; laughs to himself; cries, at times; is not inclined to help with the work. Habits are cleanly.

Personal and Medical History of Charles Bloomquist #2

1894

Aug 1/29 Aug 1/94. Wt 183½ pds. Pulse 84. Aug 23/94. Has been restless & noisy for from 5 to 6 hours, each

" 31 of past 2 nights; last night was so extremely noisy that he had to be moved out of dormitory, as he was keeping the rest of the patients awake. Aug 31/94. Quite frequently restless & noisy at night, sleeping poorly; singing & talking to himself. Talk is incoherent. Habits are clean. He does not work any. More today, [illegible] kicked by a fellow patient (Peter Lorado) in the forehead, causing a mark there.

Sep 1/30 Sep 1/94. Wt 189 pds. Pulse 78. Sep 30/94. Above notes still hold good, at this date. —

Oct 1/— Oct 1/94. Wt 190 pds. Pulse 70. Patient has been steadily gaining in flesh the past few months.

" 31 Oct 31/94. Patient does not seem to change any mentally. Conduct & behavior about as last decided.

Nov 1/30 Nov 1/94. Wt 193 pds. Pulse 74. Nov 30/94. Appetite good; bowels regular. Behavior good. Talks fairly

Dec 1/31 rationally. Habits clean. Does not work any. Dec 1/94. Wt 189 pds. Pulse 90. Dec 31/94. No special change.

1895 Jan 2/31 Jan 2/95. Wt 182 pds. Pulse 80. Jan 19/95. Transfered to the Annex. Jan 31/95. Patient is restless & uneasy; seldom sits down; walks the floor in an abstracted manner; talks a little and quite

Feb 15 rationally. Is obedient. Works in dining-room. Feb 15/95. very nervous & restless, walks the floor a great deal, in an excited manner: talks a little but rather irrationally. Works in dining room. Always trying

" 24 the doors & see if they are locked. Frequently desires to go home. Feb 24/95. Escaped from dining room this evening. was found in town & brought back. Says "that he will run away at 1st opportunity."

" 28 Transferred to B[3] East. Feb 28/95. No special change noticeable. Annoys to get away. Does no work.

Mar 1/30 March 1/95. Wt 178 pds. Is gradually losing a good deal in flesh. Pulse 84. March 30/95. Appears to be getting more silly, than before. Continually laughing to himself; very restless, walking about ward, and hardly ever sitting down, unless requested to. Talks incoherently, at times. Apparently is growing worse right along. Habits clean, but his is rather slouchy in dress. Does not work. Health seems good

Apl 1/30 April 1/95. Wt 176 pds. Pulse 104. Apl 15/95. No change to note. Apl 24/95. Transferred to Annex.

" 30 Apl 30/95. Patient's condition remains about same as described in above note of Feby 28th.

May 31 May 31/95. Patient is restless: walks the floor a good deal; talks some, but irrationally. Works on ward. Habits clean: dress rather untidy; health good: he is inclined to make his escape.

June 30 June 30/95. No change noticeable. He has been working some, outside, of late.

July 2/31 July 2/95. Escaped today: later, was found & brought back: was put on B[3]. July 9/95. Claimed he was kicked by patient, A. Wangler, in the side; complains that it pains him considerably.

" 31 July 31/95. Appetite good: bowels regular. Is very restless; laughing to himself & acting silly; works some on ward, at times. Habits are clean. Aug 1/95. Keeps about his usual flesh.

Aug 1/ Sep 1 Sep 1/95. Wt 173 pds. Pulse 102. Oct 1/95. Wt 175 pds. Pulse 94. Oct 28/95. Kicked in the mouth and slightly cut by A. Swenson. Oct 31/95. No change noted. Is restless: acts foolishly: laughs

Oct 1/ " 31 to himself: talks incoherently: habit clean: works a little on ward, at times. Health is good.

Nov 1 Nov 1/95. Wt 176½ pds. Pulse 92. Dec 2/95. Wt 174 pds. Pulse 88. Dec 31/95. No change noted. Is foolish

Dec 2/ 1896 Jan 1/31 acting: laughs to himself: talks incoherently: bothers other patients. Indolent & does no work.

Jan 1/96 Jan 1/96. Wt 173 pds. Pulse 80. Jan 18/96. Apparently growing worse: acting very foolishly: at times,

" 18 sitting very quiet, for long intervals as tho' he was meditating upon something. Jan 21/96. Was

" 31 transferred to B[1] (on account of general change of wards). Jany 31/96. Seems on the decline, mentally.

Feb 1 Feby 1/96. Wt 174 pds. Pqr. Mar 2/96. Wt 176 pds. P76. Apl 1/96. Wt 179½ pds. P76. (PM note: Healthy,

Mar 2/ Apl 1/30 silly & demented). Apl 30/96. Behavior somewhat troublesome: that he be watched closely: acts somewhat silly: likes to be "boss" under other patients to do so & so, which usually ends in a quarrel. Habits untidy. Is lonely - misses

See Wangler Book "D" Page 306.

Personal and Medical History of August Butzner (Bushman)

ROBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3693. 263

Residence, St. Paul, [illegible]

Date Admission, 16th April 189[illegible]

Admitted by, Dr. Phelps Hou[illegible]

How Sent, Hon. J.M. Shelis, Judge

Sex, Male

Age, + 41.

Civil Condition, + married

Children,

Age Youngest Child,

Occupation, Butcher

Degree Education,

Profession Religion, + R.C.

Habits, Intemperate

Nativity, + Prussia.

Physicians Committing,

Correspondents,

+ These particulars from patient 4/16/94.

[illegible]ives, sister & mother

[illegible]ng,

[illegible]sposing, previous attack

[illegible]ng Bodily Disorder, fits (?)

[illegible]ot,

[illegible] Attack,

[illegible], probably many

[illegible]sions, 1st few (was in hosp in N.Y. in 1881.

[illegible]ack,

Time of Leaving, Apr. 26. 1900

Time in Hospital,

Result, Transferred to Hastings. OK JW

EXAMINATION ON ADMISSION.

Exby Dr. Eby Apl 17/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Good

Recent Events, Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, Not good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says he was Cook and Butcher at Mare's Island Navy Yard became sick for a month, at that time, but recovered. Grandfather died as noted + sister, in Sister's Asylum. Says he was intoxicated + mad.

EMOTIONAL STATE:

Normal, Calm, Normal & Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, Systematized

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Voluble

Personal and Medical History of August Butzner (Bushman)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 10 in WEIGHT, 206 pds NUTRITION, Good

WOUNDS OR ABNORMALITIES, see "S. R." on next page.

TONGUE, Tremors, some coarse Coatings, slight + tooth marked Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, yes Accommodation, yes

SIGHT, Good —

HEARING, Good —

COORDINATION, Arms, finger to nose, eyes shut, some incoordination

Legs, standing, eyes shut, Hands steady.

TREMORS, Hands, none Tongue, coarse

Facial Muscles, none General, none

REFLEXES, Patellar, Equal — normal. —

Other Reflexes,

ARTICULATION, ~~Hesitating,~~ good — Slurred,

FACIAL EXPRESSION, normal

SENSIBILITY, normal.

HEART, Sounds good

LUNGS, Sounds good

EXAM. URINE.

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, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations,

Father or Pat. Relations, Father's father died on Blackwell's island - Father never was a hard drinker

Brothers or Sisters, Sister died in Sister's asylum

Personal and Medical History of August Buhmer (Bushman)

ROBERT, FICKLAR & CHAMBERS, DAVENPORT, IOWA

1894

This man was brought here by Deputy Sheriff M. N. Goss, with following history. Patient is committed here under order of Hon. John W. Willis, District Judge, Lancaster County. He was indicted of the Crime of Grand Larceny in the 2nd degree, but found insane by the Jury and was so adjudged. From evidence of witnesses in behalf of defendant, at said trial, the following particulars were brought out; viz; Patient's sister was insane & mother was insane when she died: father's mental condition is good; (he is now 86 years old). Patient was in an Asylum in New York in 1881, for a year or more; was then all right for a while, but got fits: would sit up in bed at nights; laugh to himself & talk foolishly: showed delusions & hallucinations. Is violent & dangerous when intoxicated. Is considered very weak minded. Has previously committed similar thefts, and has done many foolish acts; would believe anything that was told him: has been quite often in Jail, during past 5 or 6 years. While in Jail (just before coming here) his actions were strange. - (See Testimony of Dr. Stocker, attached to papers). -

Apl 16 **On Admission**, was put on B2. (S.R. Complexion light; hair light brown; eyes blue; condition of skin clean; some bruises on left leg. Bodily condition clean; behavior good); no eruptions or ulcers observed. -

" 17 April 17/94. Was restless for 4 hours, sleeping but 4 hours, last night. AM. Pulse 96. R 20. T(o) 99.6. Appetite good; bowels regular. Quiet and well-behaved; talks freely: no delusions or hallucinations noted. No complaints or injuries to report. PM. Pulse 92. T(o) 99. April 18/94. Was restless, last night; sleeping 6 hours. Appetite good;

" 18 bowels regular. Well-behaved; talks freely; goes out walking. April 19/94. Quiet and slept 8 hours, last night.

" 19 AM. Pulse 88. R 20. T(o) 99.2. Conduct & behavior about as usual. PM. Pulse 94. T(o) 99.4. April 20/94. Was restless 2 hours or so, but slept 6 hours, last night. AM. Pulse 86. R 18. Is constipated, at times. Talks

" 20 freely; plays games. Works around the yard. PM. Pulse 88. April 21/94. Again rested well last night, and slept 8 hours. AM. Pulse 86. Behavior good. Plays games. Goes walking; works in the round dining room. -

" 21 April 22/94. Was restless for a couple of hours, but slept 6 hours, last night. AM. Pulse 90. Habits are clean -

" 22 April 30/94. During this, the 2nd week of patient's stay, he has been generally restless for 2 hours or so, each

" 30 night, but has slept, as a rule, about 6 hours, nightly. Pulse has now become about normal. Behavior has been of the best. Talks freely; no delusions have been noted. Plays cards; reads some; does walking quite regularly; and has been working quite steadily in the dining room. ———

May 30/ May 1/94. Has increased some in flesh & is in good Physical Condition. May 30/94. Does not change much. Is quiet & well-behaved. Works, occasionally, in the main kitchen. Habits are cleanly. -

June 10/30 June 10/94. For some days, has been working steadily & well in the kitchen. June 30/94. Continues quiet and well-behaved. Works daily in the kitchen. When on hall, reads some, but does not take any part in games &c. Physical condition is good. Patient seems quite contented here. Habits clean. -

July 2/16 July 2/94. Keeps in good flesh & physical health. July 16/94. About as usual. Works steadily in kitchen.

" 31 Was today transferred to B1. — July 31/94. Uniformly quiet & well behaved. Always happy & contented, while at his work in the kitchen. No "spells" have been noted. Is in good physical condition -

Aug 1/19/31 Aug 1/94. Wt 220 pds. Pulse 100. Aug 19/94 Working in kitchen, today. Aug 31/94. Uniformly quiet & well-behaved. Has delusions and laughing "spells". Has not worked in the kitchen since August 1st - quit work then "because," he said, "he had been here over 4 months & had not received the pay coming to him for such work." (figuring up the same). Is in very good Physical health.

Sep 3/17 Sep 3/94. Wt 219 pds. Pulse 102. Sep 17/94. Commenced, today, to work in the kitchen with the

Personal and Medical History of August Buhmer (Bushman)

1894

Sep 20 laundry-man. Sep 20/94. Has continued to work with the laundry-man; does not seem to change in any respect. Is quiet, well-behaved. Has many delusions & "laughing spells". Health is good. -

Oct 2 Oct 2/94. Wt 211 pds. Pulse 79. His working is taking off some of his superfluous flesh. P 79.

" 31 Oct 31/94. Works outside (as above) fairly regularly, but he has "spells" when he will not to work. -Wants his "pay for working". - Has delusions about the people, & many other things. - Continues quiet & well-behaved. Habits clean & tidy. - Patient is in very good physical condition -

Nov 2/3 Nov 2/94. Wt 209 pds. Pulse 82. Nov 3/94. Commenced working in kitchen. - Is troubled with

" 20 sore legs, & a rash on legs. Same treated & are doing nicely. Nov 20/94. Feeling unwell; has a

" 27 pain in bowels. Did not work today. Nov 27/94. Feeling much better & again working in kitchen. Still shows

Dec 3/31 delusions. Poor appetite; bowels are regular. Dec 3/94. Wt 210 pds. P 90. Dec 31/94. No change to note -

Jan 3/31 Jan 3/95. Wt 211 pds. Pulse 100. Jan 31/95. Is quiet & well-behaved. Appetite is now good; bowels regular -

Febr works in the kitchen. Still shows delusions. Habits clean - Feb 2/95. Wt 212 pds. Pulse 96.

" 26 Works daily, in kitchen. Feb 26/95 Complained of pain in stomach & diarrhoea. Feb 27/95 Feeling much

" 28 better. Feb 28/95. Appetite good; bowels regular. Still has delusions; talks freely; Works in the kitchen.

Mar 3/31 March 3/95 Wt 211 pds. P 98. March 31/95. No change noticeable. He still works in kitchen, daily.

Apl 1/30 April 1/95. Wt 210 " " 100. Apl 30/95. No change to note.

May 1/31 May 1/95. Wt 204. " " 98. May 31/95. a rather foolish & somewhat simple-minded patient, but still very well-behaved and a very good worker, working in kitchen, part of the time. Is not quarrelsome or noisy - somewhat restless when on ward, walking up & down hall a good deal.

June 30 June 1/95. Wt 202 pds. Pulse 76. June 30/95. No special improvement noticed; works outside, part of

July 31 the time. July 1/95. Wt 200 pds. Pulse 74. July 31/95. No apparent change in condition of patient. Very foolish in his talk & actions. Seems to have no particular delusions, but is simple & has a poor memory. Is in the best of physical condition. Ate now & work very little, outside

Aug 1 Aug 1/95. Wt 209 pds. Pulse 76: Sept 1/95 Wt 212 pds. Pulse 90: Oct 1/95. Wt 209 pds. - Pulse 82. -

Sept 1 Oct 6/95. Tried to escape, while out walking, today; resisted considerably, when being brought back

Oct 6 threatens to make another attempt. Oct 31/95. A very slow lazy & indolent patient: big & fat:

" 31 foolish & simple in his conversation & still holds delusions. Scatters, at times, walking the hall.

Nov 1 does no work: does not even care to keep himself neat. Nov 1/95. Weight 207 pds. Pulse 90.

Dec 1 Dec 1/95 Wt 208 pds. Pulse 92. Dec 31/95. Always quiet & well-behaved on ward: makes hair watch-chains.

1895 Works in main kitchen; It is noticed that he is somewhat unsteady as to feet. Health is good.

Jan 10 No change specially noticeable in his mental condition. Jan 10/96. Keeps in good flesh, as usual.

" 31 Jan 31/96. Transferred to B2. (on account of a general change of wards). Jan 31/96. Patient

appears to be growing worse: talks very foolish & silly: shows delusions; does not work much in the kitchen, of late: does not care to keep himself neat or clean. Makes no complaints. Would like to go home.

Feby 1 (Wt Jan 1st 207½ pds. Pulse 90). Feb 1/96. Wt 210 pds. P 98. Mar 1/96. Wt 209 pds P 92. Mar 31/96. Patient

Mar 2 does not know: foolish: laughs & talks to himself & has delusions. Behavior, while on ward, good. Physical

Apl 1/30 condition good: Works in kitchen, every day. Habits neat & clean. Apl 1/96. Wt 208½ pds. P 88. Apl 30/96. No change.

May 1/96 Summary Notes by Dr. Phelps. Patient works considerable: In quite strong & healthy: Worked at first for

to the butcher & baker at the kitchen: Has mild dementia but will answer questions with fair accuracy: Talks & laughs

Dec 27/97 to himself: Wt. 209 to 214 lbs.

See Folio 356 Transfer Book A.

Personal and Medical History of Jacob Anderson

EMERY, PICKLE & CHAMBERS, DAVENPORT, IOWA

Whole No. 3694.
Residence, Bancroft Minn
Date Admission, 17th April 1894. —
Admitted by, J Shelton — Hour, 7 PM.
How Sent, Herman Blackmer, Jof P, Kossuth County
Sex, male
Age, 32
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Farmer
Degree Education, not stated
Profession Religion, Church member
Habits, Temperate and moral
Nativity, Denmark
Physicians Committing, Skwirk Thuren and F. A Blackmer
Correspondents, Anton Larsen, Albert Lea, Minn
J P. Jensen, Clarks Grove "

No. for Year, 264.
Insane Relatives, none
Cause Exciting, Religion
Cause Predisposing, not given
Form,
Accompanying Bodily Disorder, Rupture. (Trau.)
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, 32 years.
Time of Leaving, 19th April 1894.
Time in Hospital, — 2 days —
Result, Died. —
Acute periencephalitis

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: Patient has been coming to weak + excited condition to make any detailed 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 Jacob Anderson

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.,

Too weak + excited Condition to make examination

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 Jacob Anderson

1894

This patient was brought hereby Deputy Sheriff W. C. Mitchell and J. P. Jensen, with the following history. Habits are temperate and moral; there is no history of heredity. Supposed cause of this attack is religion; form of attack, acute, depressed. Has a rupture: (also T 100.). First symptoms of the disease were manifested about 6 weeks ago, when he began to be insane on religious subjects. This is 1st attack. Insanity is now shown on religious and thinks everybody is angry at him. Patient is not disposed to injure others, nor suicidal, nor filthy nor destructive. There is no history of any bodily disease &c nor urging to head. He has not been restrained or confined. Has taken opiates, for sleep, but will not take medicine now. He attended revival meetings about the time of the attack and was baptized about 2 months ago.

April 17 On admission, was violent and excited; had to be carried up to C². (the 'Sick Ward'), and put to bed there, and restraint sheet used. It was impossible to get his height & weight taken. (S.R. Complexion light; hair light brown; eyes blue; condition of skin good. Bodily condition dirty. Is very stubborn).

" 18 T (behind ear) 103.4. April 18/94. Very restless, sleeping but 4 hours, last night. F.M. Pulse 108. R 30. T (rectal) 104. Is very restless & excited today; still kept restrained in bed. Took 2 pints of eggnog; bowels have moved freely. B.M. Pulse 166. R 34. T (behind ear) 104⅘. Has passed his urine. 6 P.M. He appears to be failing rapidly. Friends notified of his critical condition.

" 19 April 19/94. Patient continued, during the night, to sink rapidly, and died at 12.50 this A.M.

Summary. This patient was in a very excited condition on arrival here & also when put in ward; perspiring profusely: bodily condition very dirty; was given hot bath & ice applied to head. This seemed to have a quieting effect for a time only; but he again became much excited, and continued to fail rapidly.

— Died —

from 320.

Ole. H. Bye

1900

Febr. Feby 7/1900. Wt 176#. P84. July 20. Vaccinated; result good. July 31. Very little Change. Physical

July 29/31 condition fairly good; is somewhat anaemic & troubled with asthma, at times, for which he has been on medicine. Has worked some in tailor-Shop: well-behaved: usually, of a rather joking disposition: quite tidy in habits & dress. Somewhat demented: talks to himself: rather irrational. Aug 1. Wt 173#. P76. Aug 29. Physical condition good: answers some

Aug 29/31 questions fairly intelligently. Does no work.

Was today, transferred to Hastings Hospital —

Personal and Medical History of Bernhardt Evermann

From 44

Aug 2 July 31 Patient has considerable eruption on neck & body. Is quite noisy, at times, & inclined to be ugly, but is more quiet than during previous month. Habits are fair. There is some improvement to be seen, in this case. —

Aug 1/31 Aug 1/94. Wt 171 lbs. Pulse 80. Aug 31/94. Appetite very good; bowels regular. Physical condition is very good. Is very well-behaved. Talks quite rationally. Reads some; writes a few letters; plays games &c and works in the ward. Habits are neat & clean. Patient has improved considerably, during the month.

Sep 1/14 Sep 1/94. Wt 154 lbs. (a gain of 18 pounds in flesh, in past month). Pulse 80. Sep 15/94. Behavior has continued very good. Patient was today, taken to the County Fair & seemed much enjoy the sights.

" 15 Sep 15/94. He was taken to a theatrical entertainment, in town, this evening. Willingly works at mine,

" 16 when asked to. Talks rationally; behaves well. Sep 16/94. 8 P.M. Complains of feeling sick. Pro.

" 17/22 Sep 17/94. Feels better this morning. Is taking medicine. Sep 22/94. The past few days, he has been

" 30 complaining of pains in the bowels; given medicine; "feels all right" today. Sep 30/94. Behaves very well: talks rationally. Habit neat & clean. A willing worker. Is improving mentally & physically.

Oct 1/31 Oct 1/94. Wt 180 lbs. Pulse 76. Oct 31/94. Improvement keeps up, both mentally & physically —

Nov 1/30 Nov 1/94. Wt 191½ " " 86. Nov 30/94. Behavior is good. Talks & seems quite rational, here —

Dec 1/31 Dec 1/94. Wt 191 " " 76. Dec 31/94. Eats & sleeps well; bowels regular. Behavior is very good. Talks rationally — Habits neat. Still has eruptions on skin (Eczema). Physical condition apparently good —

1895 Jany 1/31 Jan 1/95. Wt 196½ lbs. Pulse 96. Jan 30/95. Complains of trouble with Knee-Joint. Jan 31/95. Physical Condition apparently good. Behaves well. Reads, writes, plays games; attends patients' entertainments.

Feb 1 Talks quite rationally — Shows no delusions — Habits are neat & clean — Feb 1/95. Wt 196 lbs. (Has

" 10 gained about 40 pounds, in flesh, since admission). Pulse 85. Febr 10/95. Behavior good; appetite also good. He talks rationally. Still complains some of weakness & pain in his Knee. —

" 20/28 Feb 20/95. Knee improving slowly. Feb 28/95. Knee still troubles him some. Condition in general is very much improved. Would like to go home some. Talks quite rationally. Health good

Mar 1/15 Mar 1/95. Wt 196 lbs. Pulse 78. Mar 15/95. Is becoming, of late, quite anxious to leave here — Does very well-behaved; clean, tidy & of good personal habits. Physical condition good. Talks rationally.

" 16 Mar 16/95. Was permitted to leave today.

— Discharged —

Personal and Medical History of Louis Wohlers

SUBLETT, FOLEY & CHAMBERS, DAVENPORT, IOWA

Whole No. 3695.

Residence, Town of Belvidere, Goodhue County.

Date Admission, 19th April 1894.

Admitted by, D. Phelps Hour, 7 PM

How Sent, S. J. Nelson, Court Comm'r

Sex, Male.

Age, 66 years.

Civil Condition, married

Children, — 15 —

Age Youngest Child, —

Occupation, Farmer; Wagon

Degree Education, not stated

Profession Religion, not a church me

Habits, — Good —

Nativity, Hanover, Germany

Physicians Committing, J. V. Anderem and B. Jacking

Correspondents, Lena Wohlers, Hay Creek
Goodhue Co Minn

No. for Year, 265.

Insane Relatives, not known if hereditary

George Heitmann
Zumbrota
Minn
Correspondent Louis Wohlers

Time in Hospital, 6 months & 9 Days.

Result, Died: Exhaustion in Senile Dementia

EXAMINATION ON ADMISSION.

Exly D. Herzog - April 26/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, somewhat Confused

Quick or Sluggish, sluggish

MEMORY:

Past Events, poor

Recent Events, fair

Special Subjects,

PERCEPTIVITY:

Alert or Dull, somewhat dull

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, fair

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, much Depressed

DELUSIONS:

Systematized or Not, unsystematized (see note).

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, somewhat incoherent

Voluble or Reticent, fairly voluble

GENERAL DESCRIPTIVE REMARKS:

Patient is very much depressed and Complains in a querulous tone of his illness & misfortunes and fears he will grow worse. His behavior is peculiar, looking about in an enquiring but frightened manner and still he does not know what he is seeking. He still entertains the delusion of his children having Diphtheria as mentioned in history. The fingers of the left hand are stiff from trauma, apparently during the time he has been abed. He has, evidently, been a hard working man.

Personal and Medical History of Louis Wohlers

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 3½ WEIGHT, 98½ lbs. NUTRITION, much emaciated; extremities cold.

WOUNDS OR ABNORMALITIES, slight ptosis of left lid, with occasional spasm of left orbicularis palpebrarum; purulent discharge from left eye. Patient states that all these symptoms have appeared since the kick of a horse.

TONGUE, Tremors, Yes, Coarse — Coatings, heavy yellow, at base Promptness Movement, slow

PUPILS, Equality, left larger; right contracted Size, left normal

Response Light, Ready Accommodation, Ready

SIGHT, Presbyopic —

HEARING, impaired —

COORDINATION, Arms, markedly impaired, by usual tests.

Legs, " " " "

TREMORS, Hands, yes Tongue, yes, coarse.

Facial Muscles, none General, none

REFLEXES, Patellar, Equal — S. —

Other Reflexes,

ARTICULATION, Hesitating, yes Slurred,

FACIAL EXPRESSION, Depressed

SENSIBILITY,

HEART, very weak & irregular, intermittent; no murmurs —

LUNGS, seem good, though supra-clavicular spaces are depressed —

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal, kept	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good, Reed	Poor,	Irregular,
PULSE, 56; weak & intermittent	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, Senile dementia of Father at 67.

Brothers or Sisters,

Personal and Medical History of Louis Wohlers

EGBERT, FULLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3695.

Residence, Town of Belvidere, Goodhue County

Date Admission, 19th April 1894.

Admitted by, D. Phelps Hour, 7 PM

How Sent, S. J. McElew, Court Comm. Goodhue County

Sex, Male.

Age, 66 years.

Civil Condition, married

Children, — 15 —

Age Youngest Child, —

Occupation, Farmer; wagon maker

Degree Education, not stated

Profession Religion, not a church member

Habits, — Good —

Nativity, Hanover, Germany —

Physicians Committing, J. V. Anderson and B. Jaehning

Correspondents, Lena Wohlers, Hay Creek Goodhue Co Minn

No. for Year, 265.

Insane Relatives, not known if hereditary

Cause Exciting, feeble-minded for many years, kick

Cause Predisposing, Feeblemindedness

Form,

Accompanying Bodily Disorder, None mentioned

Suicidal or Not, Suicidal; propensity active

Date of this Attack, during last winter.

Duration, About 5 months.

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 65th

Time of Leaving, 28th October 1894

Time in Hospital, 6 months & 9 Days.

Result, Died: Exhaustion in senile Dementia

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exly D. Herzog - April 20/94.

MENTAL ACTIVITY:

Clear or Confused, somewhat Confused

Quick or Sluggish, sluggish

MEMORY:

Past Events, poor

Recent Events, fair

Special Subjects,

PERCEPTIVITY:

Alert or Dull, somewhat dull

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, fair

Own Mental State, fair

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, much Depressed

DELUSIONS:

Systematized or Not, unsystematized (see note).

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, somewhat incoherent

Voluble or Reticent, fairly voluble

GENERAL DESCRIPTIVE REMARKS:

Patient is very much depressed and complains in a querulous tone of his illness & misfortunes and fears he will grow worse. His behavior is peculiar, looking about in an inquiring but frightened manner and still he does not know what he is seeking. He still entertains the delusion of his children having diphtheria as mentioned in history. The fingers of the left hand are stiff from mince, apparently during the time he has been abed. He has, evidently, been a hard working man.

Personal and Medical History of Louis Wohlers

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

pds. NUTRITION, Much emaciated; extremities cold.

with occasional spasm of left orbicularis palpebrarum; purulent

states that all these symptoms have appeared since the kick of a horse —

yellow, at base Promptness Movement, slow

Size, left normal

Accommodation, Ready

ual tests.

Tongue, yes, coarse.

General, none

REFLEXES, Patellar, Equal — S. —

Other Reflexes,

ARTICULATION, Hesitating, yes Slurred,

FACIAL EXPRESSION, Depressed

SENSIBILITY,

HEART, very weak & irregular, intermittent; no murmurs —

LUNGS, seem good, though supra-clavicular spaces are depressed —

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal, kept	Constipated,	Irregular,
APPETITE, Good, Recd	Medium,	Poor,
SLEEP, Good,	Poor,	Irregular,
PULSE, 56; weak & intermittent	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, senile dementia of Father at 65.

Brothers or Sisters,

Personal and Medical History of Louis Wohlers

1894 GIBERT, FOLEY & SHAUBERG, DAVENPORT, IOWA

This man was brought here by Adolph Grosse, County Commissioner + M. Andreason, with the following history. A former + wagon maker by occupation. Habits good. Acts to heredity; not known; He has been feeble minded for many years; was injured in the head by a kick from a horse, last September + from that time he became gradually worse. Form is Chronic, depressed. No accompanying bodily disorder. First symptoms of disease manifested during the past winter; Distrusts all members of the family. This is the 1st attack. He now claims that the entire family is sick with diphtheria. He has shown no disposition to injure others; propensity to suicide is now active; attempted to hang himself April 16th 94; it is also suppose that he attempted to starve himself. Is inclined to be filthy. Was injured at the head as above stated; a horse kicked him in the face, striking the frontal and right sup. maxilla; was unconscious about an hour. Patient has not been restrained or confined; has been given tonics to improve his general condition and bromides for nervousness; but derived no benefit from them. ——

Apl 19 On admission, was put on C4 (S.D. Complexion light; hair gray; eyebrows; Condition of skin, good; no marks, scars or bruises noted. Has hernia; bodily Condition clean. Behavior good.) Patient is very weak.

" 20 April 20/94. Slept 6 hours, last night; lay away for 3 hours, but was quiet. HM. Pulse 59, irregular + intermittent. R 19. Appetite very poor; took only a cup of coffee. Bowels moved this morning; no cough noticed. Is quietly behaved: is in a very depressed state of mind; knows he is in an Hospital + is observant of what is going on. —

" 21 Answers questions readily. No complaints or injuries to report. April 21/94. Last night, slept but 3 hours; lay awake quietly during rest of the night. HM. Pulse 80, intermittent. R 24. Appetite very poor; ate nothing; no cough has been observed; has had no movement of bowels since yesterday morning. Quietly behaved; still

" 22 very despondent; seems unwilling to talk. April 22/94. Restless, last night; slept none. Ate a fair amount of food, this morning. HM. Pulse 76. R 24. Bowels were loosed yesterday afternoon; Complains of heat in Stomach. Continues quietly behaved. Says "he expected to be taken out of Hospital, last night". Is under the belief that friends will come for him today. Is always looking around, in a frightened, startled, manner. —

" 23 April 23/94 Slept none; was restless all night. HM. Pulse 62. (irregular). R 19. T 98.6. Appetite is poor; bowels costive. Is slightly restless; anxious to get out of bed + have his clothes on. Still imagines his

" 24 friends are coming to take him out of Hospital. April 24/94. Slept, in all, 4 hours, during the night; was restless + uneasy, wanting to get out, during the remainder of night. HM. Pulse 88. R 17. T 99.9. — Is restless + uneasy today. Talks to himself in an incoherent and rambling way; has "Crying Spells". Appetite is much improved; he took 2 fair meals, yesterday, + a good breakfast, this morning. Bowels still constipated.

" 25 April 25/94. Slept a good part of yesterday; but last night, slept only 4 hours; restless + crying for 2 hours. Slept some this morning. HM. Pulse 88. (irregular); R 26. Could not take temperature for restlessness of patient. Has taken almost no food, since yesterday morning; was given beef peptonoids this morning. Bowels badly Constipated. Patient is restless + excited; wont stay in bed, when awake. Is subject to delusions + hallucinations. thinks he sees and hears his family + others round him. Is very despondent and wishes some one to cut his head off + end his trouble. Is melancholiac + suicidal. Has to be forced to take his food (so much force was required yesterday that Attendant refrained from using it for fear of injury to patient). Has hoarseness

" 26 and difficulty in talking. April 26/94. Slept considerably yesterday, + last night. Slept about 2 hours. HM. Pulse 82. R 17 T 99 2/5th. Appetite poor, but he was induced to eat dinner + supper yesterday + breakfast this morning. all fairly good meals. Had a movement of the bowels. No cough has been observed. Is very restless,

Personal and Medical History of Louis Wohlers

1894 April 26/94 cont'd with "Crying Spells". Is very depressed. Still subject to delusions. April 27/94. Sleep continues very restless and much disturbed. HM. Pulse Set. R 20. T 99 4/5. Appetite poor; has to be forced to eat. Has had no movement of the bowels, since yesterday morning. Is still very restless during the day; appears to be getting exhausted. Talks constantly about his family, and says "that nothing can be done for him here"

" 28 very depressed; "wishes to die". Complains of his treatment. No injuries to report. April 28/94. Was a little restless for about 2 hours, last night; slept or lay quiet 7 hours; HM. Pulse 95. R 20. T 99 2/5th. Appetite fair; has to be fed with a spoon. Had a movement of the bowels yesterday afternoon. Is quieting down some, but still is slightly restless, by day. Is still under the hallucination that he hears his wife's voice in

" 29 the ward &c. No cough noticed; hoarseness has gone. April 29/94. Slept well (9 hours) last night; was restless for only about an hour. HM. Pulse 78 R 25 T 99.1. Appetite fairly good, when fed with spoon. Is restless by day + exhausting himself. Talks very despondingly, with suicidal tendencies. Bowels are

" 30 somewhat more regular. April 30/94. Was restless for 3 hours, but slept 7 hours, last night. Am. P 88. R 22. T 99°. Appetite fairly good; must be fed with a spoon, against his will. Is quieter than formerly; still talks of hearing his wife's voice in the hall. "Thinks we wish to kill him &c". Bowels slightly Constipated.

May 1 May 1/94. Was restless for 6 hours, would not stay in bed, slept but 3 hours, last night. HM. Pulse 80. R 18 T (refused. Appetite much improved. Behavior is slightly quieter. Talks as very much depressed in spirits. "Thinks his wife + son were killed here, last night". Makes no Complaints. Wt today 91 lbs.

" 2 May 2/94 Slept only about 2 hours, during the night; he sleeps, however, considerably in the daytime. HM. Pulse 84. R 21. T (9 9/5th. Appetite improving + he is now taking food, without so much persuasion. Has had a movement of the bowels. Is now fairly quietly behaved by day. Talks Constantly about

" 3 his family + still thinks they are in the ward. May 3/94. Slept fairly well last night, though he complains of the noise + says he can't sleep. HM. Pulse 82. R 24. Took an extra quantity at dinner and supper yesterday; ate only a little breakfast this morning. Bowels fairly free. Is now, more quietly behaved, each day, than on the preceding one. Still talks in a rambling, incoherent manner. —

Summary. This patient, when received in ward, was very weak: refused food; was despondent with melancholia and suicidal tendencies. He is still weak though not so much so as when admitted. He now takes his food more readily, but still requires to be fed. His talk is rambling + incoherent; he is subject to both delusions + hallucinations + is a very troublesome patient to deal with. Is cleanly in his habits. On the whole, his improvement, physically if any, is very slight indeed;

" 4 while, mentally, he does not seem to have improved any. May 4/94. Patient in bed: is quite restless;

" 14 groaning, at times; but makes no complaints. Appetite fair; bowels regular. May 14/94. No special Change.

" 29 Was taken out, in a roller-Chair, for a while, today. May 29/94. Was visited, today, by wife and brother-in-law.

" 31 May 31/94 No noticeable change in patients condition. He is still in bed + quite weak. ——

June 1/94 June 1/94. Wt 83 lbs. Pulse 94. June 9/94 Appetite fair, but he has to be fed. Bowels regular. He is

" 19 whining all the time anyone is doing anything for him. He is very thin in flesh. June 19/94. Was visited

" 28/30 by nephew + niece, today. June 28/94. Brother, wife + family visited him, today. June 30/94. No special Change.

July 2 July 2/94. Wt 83 lbs. Pulse 81. 1030 Am. Moved to C2 the "sick ward" + put to bed. Ate very little dinner;

" 17 moans considerably, at times. Ate a good supper. July 17/94. Patient has been sleeping in the average, nightly, about 6 hours, since coming in this ward. Appetite is now good, though he has had to be,

" 20 and still is, fed by the nurse, daily. July 20/94. He is in bed steadily. Eats fairly well now, if urged.

(carried to page 280)

Personal and Medical History of Julian Olson

ROBERT, FICKE & CHAMBERS, DAVENPORT, IOWA

Whole No. 3697.
Residence, Ricelan, Freeborn County, Minn
Date Admission, 23rd April 1897. —
Admitted by, D. Phelps Hour, 7 P.M.
How Sent, Herman Blackmer, Jo P, Freeborn County.
Sex, Male.
Age, 38
Civil Condition, Single
Children, None
Age Youngest Child, —
Occupation, Farmer
Degree Education, not stated
Profession Religion, Yes; Lutheran
Habits, Good
Nativity, Wisconsin —
Physicians Committing, Herrick Nissen & M.C. Wedge.
Correspondents, None given in papers

No. for Year, 267.
Insane Relatives, None.
Cause Exciting, not known
Cause Predisposing, "Chronic"
Form,
Accompanying Bodily Disorder, none, so far as known
Suicidal or Not, not
Date of this Attack, probably 18 or 20 years ago
Duration, some 18 or 20 years
No. of Attack, 1st (continuous)
No. of Admissions, 1st
Age First Attack, about 18
Time of Leaving, Dec. 22-1896.
Time in Hospital, 2 yr. 7 mo. 29 d.
Result, Discharged May 5: 97. Improved.

Exd. by D. Ehy. May 2/97.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Not very quick
MEMORY:
Past Events, good
Recent Events, good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, good
Own Mental State, good
Special Subjects,

EMOTIONAL STATE:
Normal, Calm, Normal & Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Not free except in answer to questions

GENERAL DESCRIPTIVE REMARKS:

During examination, patient was trying his shoes; everything had to be just so, or he would undo it and do it over. Patient thinks over what he is going to say, & then uses the biggest words at his command. Asked his opinion of his mental condition, states "that he did not think it was of as high a standard as it might be"; "that there were deficiencies & weak points". Patient is very restless during examination, jumping up & fussing with clothes &c.

Personal and Medical History of Julian Olson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet WEIGHT, 153 lbs. NUTRITION, Quite good
WOUNDS OR ABNORMALITIES, (See Supervisors Report)
TONGUE, Tremors, Very tremulous Coatings, Some coating Promptness Movement, prompt
PUPILS, Equality, Equal Size, Normal
Response Light, Yes Accommodation, Yes
SIGHT, Somewhat impaired
HEARING, Good
COORDINATION, Arms, Good: finger to nose, eyes shut, Correct.
Legs, Standing, eyes shut, Remarked swaying.
TREMORS, Hands, None Tongue, Yes
Facial Muscles, None General,
REFLEXES, Patellar, Equal — about ++ —
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Depressed.
SENSIBILITY, Normal
HEART, Sounds quite faint; no murmurs heard.
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,

Kept / Kept

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother living — healthy —
Father or Pat. Relations, Father living — healthy —
Brothers or Sisters, 1 brother & 1 sister. one sister dead — died of some sort of fever —

Personal and Medical History of Julian Olson

1894

This man was brought here by Deputy Sheriff Torgeson, with the following history. By occupation a farmer; habits are good; there is no history of heredity; cause of this attack is not known. Form is chronic, depressed, paranoyeal: no accompanying bodily disorder, so far as known. First symptoms of disease were manifested 13 years ago, in Michigan; he was arrested, supposed to be insane; do not know in what way; has been somewhat insane ever since; attack has been continuous since the beginning. Is, now, at times, violent, ugly, wilful; has pretended to build a house for himself, consisting of a cellar and a roof; "call it his home"; in the middle of his father's farm, without his permission. Has disposed to injure his parents, from sudden passion. Is not suicidal, nor filthy, nor destructive. No peculiarities of disposition &c were noted previously shown. He has not been subject to any bodily disease &c or any injury to head. He has not been restrained or confined since he was first taken insane; at that time was confined for about 3 weeks. Has not been under medical treatment. (Evidence shows that he has not been in sound mind, since he left school, 15 or 20 years ago; supposed to have studied too hard, at that time).

April 23 On admission, was put in B². (S. R. Complexion light; hair light; eyebrows; condition of skin good; has some marks on forefinger on left hand; bodily condition clean. Behavior good). April 24/94. Was restful & slept 7 hours, last night. AM. Pulse 86 R 18. T 98.8. Appetite fairly good; bowels slightly constipated; no cough noticed. Is well-behaved; no delusions noticed. PM. Pulse 86 R 17. T 99.2. No complaints or injuries.

" 25 April 25/94. Has restless for a couple of hours, but slept 6 hours, last night. AM. Pulse 84 R 17 T 99.

" 26 Appetite good; behaves well. Is somewhat nervous. PM. Pulse 78 R 17. T 98.8. April 26/94. Restless 4 hours, sleeping but 4 hours, last night. AM. Pulse 80. R 18. T 98.6. Appetite & behavior are good. Talks quite freely when addressed. PM. " 82 " 17 " 98.6. Works some on the ward.

" 27 April 27/94. Slept only 3 hours, last night; was restless 9 hours. AM. Pulse 82. Behaves well; makes no

" 28 complaints. Seems nervous & sometimes restless. April 28/94. Restful, sleeping 7 hours, last night.

" 29 AM. Pulse 80. Continues well-behaved. Works willingly on the ward. April 29/94. Quite restless for 6 hours last night; slept but 2 hours. AM. Pulse 86. Continues somewhat restless by day. Works well.

" 30 April 30/94. Was restless all night; slept none. AM. Pulse 86. Is well-behaved, tho' still restless.

May 1 May 1/94. Restless 3 hours, sleeping but 5 hours, last night. AM. Pulse 88. Is restless & excited today. Works.

" 2 May 2/94. Slept only 2 hours; was restless 6 hours, last night. AM. Pulse 90. Otherwise about as yesterday. Wt today, 147½ pds. (has lost about 7½ pounds since coming, but does not complain of any ill feeling)

" 3 May 3/94. Restless a couple of hours, but slept 6 hours, last night. AM. Pulse 90. Still nervous and

" 4 excited. Makes no complaints. Works well, on the ward. May 4/94. Restless 7 hours, sleeping only 1 hour, last night. AM. Pulse 84. Nervous & excited. Works all the time, blacking shoes, brushing clothes &c

" 5 May 5/94. Slept 5 hours, restless 3 hours, last night. AM. Pulse 86. Always occupying himself by day.

" 6 May 6/94. Restless 2 hours, but slept 6 hours, during the night. AM. Pulse 84. Still restless & nervous.

" 7 May 7/94. Slept but 4 hours; very restless 12 hours, last night. AM. Pulse 84. Restless, nervous &, at times, excited by day; works well & willingly; goes out walking. Is on medicine. Habits are cleanly.

Summary. This patient was quiet on admission, but afterwards became quite nervous and

" 18 excited, at times. Talks quite freely, though speech is somewhat hesitating. Makes no complaints; working & plugging himself, all the time. Appetite fairly good. May 18/94. No special change, since last note. Behaves well; works. Was today transferred to B².

Personal and Medical History of Julian Olson

1894

May 31 May 31/94. Is a quiet & well-behaved patient; willing to do anything asked of him. Memory is poor. He has some silly ways about him, eg. gathering up all sorts of rubbish & putting it into his pockets. Habits are cleanly.

June 1/30 June 1/94. Wt 156 pds. (has been gaining in flesh). Pulse 76. June 30/94. Does not change, seemingly, in any respect. Always quiet & well-behaved. Goes through silly & foolish movements, twisting his head &c.

July 1/31 July 1/94. Wt 154 pds. Pulse 78. July 31/94. No material change in either condition, conduct or behavior, at this date.

Aug 1/31 Aug 1/94. Wt 166 pds. (a gain of 12 pds. in past month). Pulse 80. Aug 31/94. Patient keeps about the

" today, almost. Has silly ways; laughing & himself & making

" writing" - Is a good and willing worker on the ward.

Sep 30/94. Quiet & well-behaved. No "spells" or delusions have

" writing"; but there is no sense to it. He is hard to reason with & it

d what he says. Works well & willingly - Health seems good.

Oct 31/94. No particular change to note, in any respect

r 30/94. No special change - Is rather silly in manner. Works well. appetite good.

Dec 31/94. Appetite good; bowels regular. Works some. Otherwise about same.

Jan 31/95. Behaves well. Is inclined to help himself. Is very good &

al of writing. Appetite keeps good; bowels normal. He does no work.

b 28/95. Appetite good; bowels regular. No Complaints. Behavior good.

opies articles out of paper. Talks but little unless addressed.

March 31/95. Does not care to go out walking. Sits in room, all the day.

Mentally, no improvement noted. Has delusions, talks but little.

& nurses. Behaves good. April 1/95. Wt 168 pds. Pulse 90.

is in patient's condition, for several months past. Does no work.

May 31/95. Appetite good; bowels regular. Works some on the ward.

neat, about his appearance. June 1/95. Wt 165 pds. Pulse 80.

eable. Has good physical condition. Goes out walking.

July 31/95. There is no change noticeable, in any way.

May 31/95. Wt 160 pds. Pulse 76.

Aug 31 Aug 1/95. Wt 158 pds. Pulse 96. Sep 1/95. Wt 158 pds. Pulse 86. Oct 1/95. Wt 153½ pds. Pulse 84

Sep 1 Oct 31/95. A very quiet patient; makes no troubles, altho' wants his own way, a good deal. Neat and

Oct 1/31 clean in appearance. Has many foolish ways & actions, & talks very foolishly. Sly & sneaky in his disposition: sits in room; reads & writes, most part of time: seems contented. No improvement noted, mentally.

Nov 1 Nov 2/95. Wt 156 pds. Pulse 70. Dec 1/95. Wt 155½ pds. Pulse 90. Jan 2/96. Wt 154 pds. Pulse 88.

Dec 1 1896 Jan 18/96. While out walking, patient found a pocket-knife: did not want to give it up: so it had

Jan 2 to be taken from him by force. Jan 21/96. Transferred to B² (On account of general changes of ward).

" 2/31 Jan 31/96. No change noticeable, mentally or physically. Still write his peculiar "letters &c".

Feb 1 Feb 1/96. Wt 153 pds. P 86. March 2/96. Wt 153½ pds. Pulse. Apl 1/96. Wt 154 pds. P 88. Apl 30/96. Is a very

Mar 2 quiet & queer acting patient; remains in room all day, except when out for a walk: writes about different

Apl 30 happenings on ward. Talks & acts silly: habits neat & clean: physical condition good. Does not do any work.

May 1/96 Summary. Nurses Notes by Dr. Phelps. During latter part of 96 patient did fairly well upon ward, staying a good deal

to of the time in his room. Occasionally was a little irritable. Always somewhat silly. December 27 was allowed to

Dec 27/96 go home with his brother.

Second Minn. Hospital 3/1-95

[Sworn Jr. Olsen - (B.I.E)

Dr. C. B. Phelps: Dear Sir: you will recollect I called you into our room [No. 15] in May - [5/25] (to post you up) June - 10th Dr. R. Phelps asked - (me) how J was getting along? (now) set J. said: Oh you can - Judge - DR - we haven't had a Doctor - inside our room since - NEW YEARS (guess me aint so sick (in there) J - here ask your favor (MR) Doctor - (for above insinuation) J - take it all - back (those words were spoken hastily)

(over)

1894

EBERT, FICKE & CHAMBERS, DAVENPORT, IOWA.

This man was brought here by Deputy Sheriff Torgeson, with the following history. By occupation a farmer; habits are good; there is no history of heredity; cause of this attack is not known. Form is chronic depressed, paranoimal: no accompanying bodily disorder, so ... as known. First symptoms of disease were manifested 13 years ago, in Michigan; he was ... showed to be insane; do not know in what way; has been somewhat insane ever since ... since the beginning. Is now, at times, violent, ugly, wilful; has pret... himself, consisting of a cellar and a roof; calls it "his home"; ... without his permission. Was disposed to injure his parents, now ... now filthy, nor destructive. No peculiarities of disposition ... been subject to any bodily disease &c or any injury to head. ... since he was first taken insane; at that time was confined for a ... medical treatment. (Evidence shows that he has not been in ... 18 or 20 years ago; supposed to have shocked too hard, at th...

April 23 On admission, was put in B[2]. (S. R. complexion light; hair ... some marks on forefinger of left hand; bodily condition cha... Slept 7 hours, last night. Ill. Pulse 86 R 18. Tem 98.8. A... no cough noticed. Is well-behaved; no delusions noticed. ...

" 25 April 25/94. Has rested for a couple of hours, but s... 99.

" 26 Appetite good; behaves well. Is somewhat nervous. ... Rested 4 hours, sleeping but 4 hours, last night. Ill. ... behavior are good. Talks quite freely when addressed. Ill ... the ward.

" 27 April 27/94. Slept only 3 hours, last night; was restless 5 hours. ... well; makes no

" 28 complaints. Seems nervous & sometimes restless. April 28/94. Rested ... hours, last night.

" 29 Ill. Pulse 80. Continues well-behaved. Works willingly on the ward. April 29/94. ... restless for 6 hours last night; slept but 2 hours. Ill. Pulse 86. Continues somewhat restless by day. Works well.-

" 30 April 30/94. Was restless all night; slept none. Ill. Pulse 86. Is well-behaved, tho' still restless.-

May 1 May 1/94. Restless 3 hours, sleeping but 5 hours, last night. Ill. Pulse 88. Is restless & excited by day. Works.

" 2 May 2/94. Slept only 2 hours; was restless 6 hours, last night. Ill. Pulse 90. Otherwise about as yesterday - Wt today, 147½ pds. (has lost about 7½ pounds since coming, but does not complain of any ill feeling)

" 3 May 3/94. Restless a couple of hours, but slept 6 hours, last night. Ill. Pulse 90. Still nervous and excited. Makes no complaints. Works well, on the ward. May 4/94. Restless 7 hours, sleeping only 1 hour, last night. Ill. Pulse 84. Nervous & excited. Works all the time, blacking shoes, brushing clothes &c

" 5 May 5/94. Slept 5 hours, restless 3 hours, last night. Ill. Pulse 86. Always occupying himself by day.

" 6 May 6/94. Restless 2 hours, but slept 6 hours, during the night. Ill. Pulse 84. Still restless & nervous.

" 7 May 7/94. Slept but 4 hours; very restless 12 hours, last night. Ill. Pulse 84. Restless, nervous & at times, excited by day; works well & willingly; goes out walking. Is on medicine. Habits are cleanly.

Summary. This patient was quiet, on admission, but afterwards became quite nervous and Excited, at times. Talks quite freely, though speech is somewhat hesitating. Makes no complaints; working & occupying himself, all the time; Appetite fairly good. —

" 18 May 18/94. No special change, since last note. Behaves well; works. Was today transferred to B[3]. —

1894

May 31 May 31/94. Is a quiet & well-behaved patient: willing to do anything asked of him. Memory is poor. He has some silly ways about him, eg. gathering up all sorts of rubbish & putting it into his pockets. Habits are cleanly.-

June 1/30 June 1/94. Wt 156 pds (has been gaining in flesh): Pulse 76. June 30/94. Does not change, seemingly, in any respect. Always quiet & well-behaved. Goes through silly & foolish movements, twisting his head &c. —

July 31/94. Wt 161 pds. Pulse 78. July 31/94. No material change in either condition, conduct or behavior, at this date.

Aug 31/94. Wt 166 pds (a gain of 12 pds, in past month). Pulse 80. Aug 31/94. Patient keeps about the same from month to month & day to day, almost. Has silly way of laughing & himself & making queer faces. Does a great deal of "writing". Is a good and willing worker on the ward.

Sept 30/94. Wt 168½ pds. Pulse 64. Sept 30/94. Quiet & well-behaved. No "spells" or delusions have been noted. Does a great deal of "writing", but there is no sense to it. Has hard dreams with it is difficult, at times, to understand what he says. Works well & willingly. Health seems good. —

Oct 31/94. Wt 158½ pds. Pulse 74. Oct 31/94. No particular change to note, in any respect.

Nov 30/94. Wt 167½ " " 90. Nov 30/94. No special change. Is rather silly in manner. Works well. Appetite good.

Dec 31/94. Wt 167½ " " 102. Dec 31/94. Appetite good; bowels regular. Works some. Otherwise about same.

Jan 31/95. Wt 163 " " 70. Jan 31/95. Behaves well. Is inclined to be by himself. Is very good & silly in his ways. Does a great deal of writing. Appetite keeps good; bowels normal. He does no work.

Feb 28/95. Wt 165 pds. Pulse 71. Feb 28/95. Appetite good; bowels regular. No complaints. Behavior good. Sits in his room, most of the time & copies articles out of papers. Talks but little unless addressed.

March 31/95. Wt 157 pds. Pulse 82. March 31/95. Does not care to go out walking. Sits in room, all the day. March 31/95. Physical condition good. Mentally, no improvement noted. Has delusions, talks but little. Writes several nonsensical letters to nurses. Behavior good. April 1/95. Wt 158 pds. Pulse 90.

April 30/95. No change noticeable in patient's condition, for several months past. Does no work.

May 31/95. Wt 163 pds. Pulse 88. May 31/95. Appetite good: bowels regular. Works some on the ward. Is simple & foolish. Very clean & neat, about his appearance. June 1/95. Wt 165 pds. Pulse 80.

June 30/95. No change, noticeable. Has good physical condition. Goes out walking.

July 31/95. Wt 160 pds. Pulse 78. July 31/95. There is no change noticeable, in any way.

Aug 31/95. Wt 158 pds. Pulse 96. Sept 1/95. Wt 158 pds. Pulse 86. Oct 1/95. Wt 153½ pds. Pulse 84

Oct 31/95. A very quiet patient: makes no trouble, altho' wants his own way, a good deal. Neat and clean in appearance. Has many foolish ways & actions, & talks very foolishly. Sly & sneaky in his disposition: sits in room; reads & writes, most of time: seems contented. No improvement noted, mentally.

Nov 30/95. Wt 156 pds. Pulse 70. Dec 1/95. Wt 155½ pds. Pulse 90. Jan 2/96. Wt 154 pds. Pulse 88.

Jan 18/96. While out walking, patient found a pocket-knife: did not want to give it up: as it had to be taken from him by force. Jan 21/96. Transferred to B[2] (On account of general changes of ward).

Jan 31/96. No change noticeable, mentally or physically. Still write his peculiar "letters &c".

Feb 1/96. Wt 153 pds. Pulse 86. March 2/96. Wt 153½ pds. Pulse. Ex. April 1/96. Wt 154 pds. Pulse. April 30/96. Is a very quiet & queer acting patient: remains in room all day, except when out for a walk: writes about different happenings on ward. Talks & acts silly: habits neat & clean: physical condition good. Does not do any work.

Summary Nurses Notes by Dr. Phelps During latter part of 96 patient did fairly well upon ward, staying a good deal of the time in his room. Occasionally was a little irritable. Always somewhat silly. December 27 was allowed to go home with his brother.

Personal and Medical History of Carl Liverson

HERBERT, FISHER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3698.

Residence, Westfield, Minn

Date Admission, 21st April 1894.

Admitted by, D. Kilbourne Hour, 5 P.M.

How Sent, E. J. Way, Jof P, Dodge County.

Sex, male

Age, 28 —

Civil Condition, single

Children,

Age Youngest Child, —

Occupation, Artist

Degree Education, probably good

Profession Religion, Lutheran

Habits, good —

Nativity, Norway

Physicians Committing, S. H. Faulkner, J. Bennett & C. O. Wright

Correspondents, Jacob S. Bixby
Bixby, Minnesota

No. for Year, 268.

Insane Relatives, none; says "no heredity" —

Cause Exciting, has studied very hard. —

Cause Predisposing, not stated

Form,

Accompanying Bodily Disorder,

Suicidal or Not, suicidal,

Date of this Attack, Last

Duration, about 5

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, 28

Time of Leaving, 21st August 1894

Time in Hospital, 3 mos; 28 Days.

Result, Died; acute melancholia

Kasson Republican: Last Tuesday, Sheriff Houston and two assistants—Eugene Gardiuier and J. Bixby—had a "parrot and monkey time" in taking a raving maniac to the insane asylum at Rochester. His name is Carl Liverson, of Westfield. They took the train at Blooming Prairie, and, notwithstanding the prisoner was heavily manacled, he was almost a match for all three. The journey was a perpetual tussle.

EXAMINATION ON ADMISSION.

Exd. by Dr. Eby May 1/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Slightly Confused.

Quick or Sluggish, Sluggish —

MEMORY:

Past Events, seems good

Recent Events, quite good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, correct

REASONING POWER:

Ordinary Subjects, Fair

Own Mental State, Impaired

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient on admission was in a very excited state, but has now quieted & seems in a sort of dazed condition. He has the delusion that he is a fine suicide & drinks considerable. He is now in a melancholic condition.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Depressed

DELUSIONS:

Systematized or Not, not systematized —

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none

ILLUSIONS: none

CONVERSATION:

Coherent or Incoherent, Coherent and

Voluble or Reticent, not very voluble

Personal and Medical History of Carl Liverson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9 1/4 WEIGHT, 151½ lbs. NUTRITION, Good.

WOUNDS OR ABNORMALITIES, See Superviser's Report on next page.

TONGUE, Tremors, slight Coatings, Yes; marked Promptness Movement, prompt

PUPILS, Equality, Equal Size, dilated

Response Light, Yes Accommodation, Yes

SIGHT, seems good

HEARING, Good

COORDINATION, Arms, no incoordination; fingers & nose, eyes shut, quite accurate —

Legs, Standing, eyes shut, Stands Steady —

TREMORS, Hands, slight Tongue, slight

Facial Muscles, none General, none

REFLEXES, Patellar, Equal — about 6 —

Other Reflexes,

ARTICULATION, Hesitating, quite good Slurred, —

FACIAL EXPRESSION,

SENSIBILITY, normal

HEART, Sounds good; is rapid —

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, 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 Carl Liverson

Whole No. 3698.
Residence, Westfield, Minn
Date Admission, 21st April 1894.
Admitted by, D. Kilbourne Hour, 5 P.M.
How Sent, E. J. Way, Jof P, Dodge County.
Sex, Male
Age, 28 —
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Artist
Degree Education, probably good
Profession Religion, Lutheran
Habits, good —
Nativity, Norway
Physicians Committing, S. H. VanSlyck, J. Bryant & C. O. Wright
Correspondents, Jacob S. Bixby
Bixby, Minnesota

No. for Year, 268.
Insane Relatives, none; says "no heredity" —
Cause Exciting, has studied very hard.
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, none
Suicidal or Not, suicidal; attempted it last Saturday
Date of this Attack, Last Thursday
Duration, about 5 days.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 28
Time of Leaving, 21st August 1894
Time in Hospital, 3 mos; 28 Days.
Result, Died; acute melancholia

EXAMINATION ON ADMISSION.

Exd. by Dr. Eby May 1/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, slightly Confused
Quick or Sluggish, sluggish —
MEMORY:
Past Events, seems good
Recent Events, quite good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, correct
REASONING POWER:
Ordinary Subjects, Fair
Own Mental State, Impaired
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Depressed
DELUSIONS:
Systematized or Not, not systematized —
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent and
Voluble or Reticent, not very voluble

GENERAL DESCRIPTIVE REMARKS:
Patient on admission was in a very excited state, but has now quieted & seems in a sort of dazed condition. He has the delusion that he is going to commit suicide & drinks considerable. He is now in a melancholic condition.

Personal and Medical History of Carl Liverson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9¼ WEIGHT, 151½ lbs. NUTRITION, Good.
WOUNDS OR ABNORMALITIES, See Supervisor's Report on next page.
TONGUE, Tremors, slight Coatings, Yes; marked Promptness Movement, prompt
PUPILS, Equality, Equal Size, dilated
Response Light, Yes Accommodation, Yes
SIGHT, seems good
HEARING, Good
COORDINATION, Arms, no incoordination; fingers & nose, eyes shut, quite accurate —
Legs, standing, eyes shut, Stands Steady —
TREMORS, Hands, slight Tongue, slight
Facial Muscles, none General, none
REFLEXES, Patellar, Equal — about 6 —
Other Reflexes,
ARTICULATION, Hesitating, quite good Slurred, —
FACIAL EXPRESSION,
SENSIBILITY, normal
HEART, Sounds good; is rapid —
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.,

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,

1894

This man was brought here by W. A. Houston, Sheriff, attended by G. Gardner and Jacob Bixby, with the following history of case. Habits are good: there is no history of heredity; patient has studied very hard, which is the supposed cause of this attack; form is acute; first symptoms manifested last Thursday (about 5 days ago). This is 1st attack. Patient is disposed to injure others. Is suicidal. He tried to throw himself in front of a train, last Saturday. He is said to have never been sick a day, before. Has been confined & restrained since last Thursday. He has not been under medical treatment.

April 24 On admission, was put to bed. (S.R. Complexion light; hair light; eyes blue; condition of skin good; some marks on left knee; wrists bruised and swollen; bodily condition clean; was quite stubborn but not ugly. Patient was brought here in hand-cuffs and anklets). Pulse 98. April 25/94. Slept but 3 hours during the night; was out of bed & noisy, the rest of the time. Afm. Pulse 100. Appetite only fair; has had no movement of the bowels, since coming; no cough observed. Has been very violent & noisy today; had to be held by 2 or 3 men, nearly all day. Has delusions: "Fears fire and poison". Both ankles are bruised; this was not noted on admission. April 26/94. Was given hypnotic at 10. P.M. Slept but 3 hours; was noisy & restless for 6 hours. Afm. Pulse 92. Appetite poor. Is very restless & noisy today; has had no movement of the bowels; talks incoherently; shows delusions. Was vaccinated today. April 27/94. Was restful, and slept 7 hours, last night. Afm. Pulse 96. Appetite still poor; bowels constipated. Is restless & stubborn today; had to be held a good part of the day. "Fears fire, poison & death"; refuses medicine. April 28/94. Slept 5 hours, last night. Has no appetite; constipation persists. Is very restless & troublesome; "fears fire or heat in food & water". April 29/94. Was restless for 2 hours, noisy 3 hours & slept but 2 hours, last night. Appetite still very poor. Bowels have moved. Continues restless & troublesome; has many delusions. April 30/94. Noisy for 3 hours; slept only 4 hours, last night. Appetite fair; behavior more quiet, than on previous days. Still "has fears of fire, heat & electricity". Patient is found, every morning, lying on the floor, naked, without bed clothing.

May 1 May 1/94. Slept 6 hours, noisy for 2 hours, last night; is not now so noisy or troublesome, by day. Eats, also, better. " 2 Still has delusions & the "fears" above mentioned. May 2/94. More quiet, sleeping 6 hours, last night. Appetite is fair; has had no movement of the bowels, today; behavior is improving; he is still, however, full of his delusions. " 3 May 3/94. Fairly restful, sleeping 7 hours, last night. Appetite very good; bowels have moved. Is now quietly behaved. Talks quite rationally, at times. Complains of the noise & vowels like to go where it is more quiet. " 4 May 4/94. Was restless 4 hours, but slept 5 hours, last night. Was found quiet, and in bed, this morning. Appetite good; bowels moved. Is quietly behaved. At times, acts bewildered. Went out walking, today. " 5 May 5/94. Quiet and slept 7 hours, last night. Sleeps now in his bed. Appetite good; bowels seem regular. Behavior is good. Talks more rationally. Goes out walking quite regularly. — " 6 May 6/94. Again slept quite well, 7 hours, last night. Behavior very good. Talks quite rationally, most of the time. " 7 May 7/94. Restless 4 hours, slept 5 hours, last night. Quiet & well-behaved. " 8 Talks very little, today. May 8/94. Slept well, last night. Quiet & well-behaved. Talks rationally.

Summary. Patient came on ward in a very excited and troublesome condition. Had many delusions in regard to "fire, heat & electricity" &c. Physical condition seemed to have run down; suffered from constipation; was unable to sleep; had no appetite. (Bowels moved on 5th day, by aid of Cathartics). He commenced to improve on the 6th day, as to appetite & sleep: less restless. Mental condition commenced to improve on 9th day. Is now very quiet; eats & sleeps quite well. Does not talk much, but answers quite rationally, when spoken to. Does not seem to have

1894 Cont'd

May 8 much energy. Has considerable eruption on body, developed since admission. Wt (1st test) 141 lbs. Pulse 62. (Patient has lost 10½ pounds since admission). May 9/94. Has a "contrary spell" today; is dazed and bewildered. " 10/11 May 10/94. Very stubborn, though not ugly. May 11/94. Is very contrary & stubborn, today; refuses medicine; bowels have not moved for 3 days. " 14 May 14/94. No change, the past 2 days: bowels have moved by aid of Cathartics. Is very stubborn today; also seems stupid. Appetite continues only fair. " 15/16 May 15/94. No special change. May 16/94. Stubborn & contrary; does not want to wear his clothes; urinates on the floor. " 17 May 17/94. Is stupid & difficult to manage. Appetite poor; wants to lie on the floor; does not talk or complain. " 18/19 May 18/94. No change; bowels are badly constipated. May 19/94. Was allowed to remain in bed; rests there quietly; appetite poor; though Cathartics were given, there has been no movement of the bowels. " 20 May 20/94. Sick in bed, today. Ate nothing; is stupid. Bowels badly constipated yet. " 21 Is restless, continually disarranging bed clothing. May 21/94. Still sick & in bed: restless; does not Eat or drink anything. No movement of bowels yet. " 22 May 22/94. Sick in bed; appetite poor; eats nothing. Visited by brother, today. " 23 May 23/94. Still confined to his bed. Is constipated. May 24/94. Still in bed; ate a fair breakfast; refuses medicine; ate fair dinner & supper; seems brighter. " 25 May 25/94. Is restless & will not stay in bed. Ate no solid food but drank about 1½ pints of milk; bowels have moved. " 26 May 26/94. Sick in bed, still; ate no breakfast or dinner; took about ½ pints of milk for supper; lies in bed, eyes closed; head covered; will not talk. " 27 May 27/94. Was noisy & restless for 6 hours, during the night; restless also today; will not stay in bed nor in room; Catwell; but does not talk. " 28 May 28/94. Noisy & restless, 5 hours, during the night. Is up & in the hall today; very contrary; does not want to wear his clothes. " 29 May 29/94. Slept only 3 hours, last night. Contrary, stubborn & melancholy, today; " 30 appetite only fair. May 30/94. Restless 4 hours, sleeping but 5 hours, last night. Appetite poor. Is helpless & " 31 stupid; also has "spells of crying. May 31/94. Restless & noisy for 5 hours & slept only about 3 hours, last night. Bowels moved. Will not stay in bed, nights; prefers to lie on the floor & without covering. Appetite keeps poor. Patient is stupid & contrary; has "spells of crying. He seems to have failed considerably, both mentally & physically. Habits are dirty. No improvement noticed, in this case. —

June 1 June 1/94. Wt 132 pounds. (a loss of 9 pounds, in the past month). Coughs & raises much phlegm. Habits are dirty. Is very stupid & stubborn. Has "spells" of crying. Will not eat; is fed by tube. " 2 June 2/94. Slept none, last night. Very stupid & stubborn today; prefers to lie on the floor. Does not talk. " 3 Will not eat; has to be fed by tube. June 3/94. Slept only 3 hours, last night. Drank some milk for breakfast; " 4 and ate a very good dinner & supper. Continues dull & stupid. June 4/94. Restless 6 hours, sleeping only 3 hours, last night. He has had no movement of bowels, since 1st test. Is stupid; does not talk. Fed by tube in morning, ate dinner but refused supper; habits very dirty; urinates on floor. —

" 5 June 5/94. Still fed by tube; bowels badly constipated; stupid; wants to lie on floor. Urinates in his clothing. " 6 June 6/94. Has to be fed, daily. Does not talk: bowels have not yet moved. Habits are very dirty. — " 7/8 June 7/94. No noticeable change. Still has to be fed. June 8/94. Bowels still constipated. Is fed daily by the nurse. Stupid; does not talk; refuses medicine. Urinates in his clothing.

" 8 June 8/94. 5 Pm Came on "Sick-Ward" from C3 & was at once, put to bed. Was fed 1 quart of " 9 milk at Supper-time. June 9/94. Was awake nearly all night, but quiet. 5:30 Am bowels moved. 7. Am Was fed a quart of milk. 6 Pm. After considerable urging, ate a light supper.

" 11/12 June 11/94. Ate a fair breakfast. June 12/94. Was quite wild & excited out of bed, a good

(carried to page 193)

Personal and Medical History of Murton Waldron (supposed)

EBERT, WILLAM & CRAMBERS, DAVENPORT, IOWA

Whole No. 3702.
Residence, near Rochester, Minn (supposed)
Date Admission, 25th April 1894.
Admitted by, S. P. Phelps Hour, 7 P.M.
How Sent, S. S. Washburn, Jo. Co., Mower County
Sex, Male.
Age, not known
Civil Condition, not known
Children, " "
Age Youngest Child, " "
Occupation, not known
Degree Education, " "
Profession Religion, not known
Habits, " "
Nativity, not known —
Physicians Committing, Emma M. Washburn & A. Macdonald
Correspondents, as attached "Clipping"

No. for Year, 272.
Insane Relatives, not known
Cause Exciting, not known
Cause Predisposing, not given.
Form,
Accompanying Bodily Disorder, Spinal incoherence
Suicidal or Not, not —
Date of this Attack, not stated
Duration, not stated —
No. of Attack, not known
No. of Admissions, 1st (two)
Age First Attack, not given.
Time of Leaving, Apr 26th 94
Time in Hospital, 1 day,
Result, Unimproved

EXAMINATION ON ADMISSION.

Ed by Dr Harvey. April 26/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: see note
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: see note
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS: " "
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: " "
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

Note Patient is a deaf mute & it is impossible to get any information from him. He does not seem to understand the "finger language" & seems dull of comprehension. He can write the name "Merton Waldron" but does not seem to understand writing. He is probably congenitally defective.

Personal and Medical History of Murton Waldron

Merton Waldron, the son of David Waldron, who lives north of this city about six miles, came here last Sunday and made a visit at the home of Ed Lawerence in East Rochester. In the afternoon he strayed away from the house and has not been heard from since. He is deaf and of unsound mind, not capable of taking care of himself or even telling as to the whereabouts of his friends and relatives. Any information regarding him will be gratefully received.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

6½ WEIGHT, 161½ lbs NUTRITION, Good
ORMALITIES, Deaf & Dumb; (See S. R. next page.)—
slight Coatings, none Promptness Movement, prompt
Yes Size, normal
ht, normal Accommodation, normal
SIGHT, seems good
HEARING, — is Deaf —
COORDINATION, Arms, } Good, Lynneal test. —
Legs, }
TREMORS, Hands, none Tongue, slight
Facial Muscles, none General, none
REFLEXES, Patellar, 6 — equal —
Other Reflexes,
ARTICULATION, Hesitating, no Slurred, —
FACIAL EXPRESSION, Imbecile —
SENSIBILITY,
HEART, Sounds are good
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.

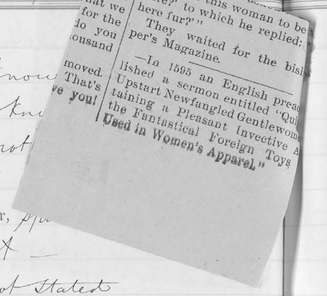
LENGTH OF INVASION, Unknown ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} Unknown

Personal and Medical History of Murton Waldron (supposed)

HERBERT, PUTNAM & CHAMBERS, DAVENPORT, IOWA

Whole No. 3702.
Residence, near Rochester, Minn (supposed)
Date Admission, 25th April 1894.
Admitted by, S. P. Phelps Hour, 7 P.M.
How Sent, S.S. Washburn, Jo. Co., Mower County
Sex, Male.
Age, not known
Civil Condition, not known
Children, " "
Age Youngest Child, " "
Occupation, not known
Degree Education, " "
Profession Religion, not known
Habits, " "
Nativity, not known —
Physicians Committing, Emma A. Washburn & A. Macdonald
Correspondents, as attached "clipping"

No. for Year, 272.
Insane Relatives, not known
Cause Exciting, not known
Cause Predisposing, not
Form,
Accompanying Bodily Disorder,
Suicidal or Not, not —
Date of this Attack, not stated
Duration, not stated —
No. of Attack, not known
No. of Admissions, 1st (hee)
Age First Attack, not given
Time of Leaving, After 26th '94
Time in Hospital, 1 day.
Result, Unimproved


emo-
suppose
hat we
for the
to you
ousand
moved.
That's
e you!
the service ... thou take this woman to be wife?" to which he replied: here fury". They waited for the bish per's Magazine.
—In 1595 an English preac lished a sermon entitled "Qu Upstart Newfangled Gentlewo taining a Pleasant Invective A the Fantastical Foreign Toys Used in Women's Apparel."

EXAMINATION ON ADMISSION.

Exd by Dr Harvey Apl 26/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY: see note
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: see note
Normal, Calm,
Indifferent,
Exalted,
Depressed,
DELUSIONS: " "
Systematized or Not,
Special Subjects,
Transitory or Not,
HALLUCINATIONS: " "
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,

NOTE Patient is a deaf mute & it is impossible to get any information from him. He does not seem to understand the "finger language" & seems dull of comprehension. He can write the name "Merton Waldron" but does not seem to understand writing. He is probably congenitally defective.

Personal and Medical History of Murton Waldron

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6½ WEIGHT, 161½ lbs NUTRITION, Good
WOUNDS OR ABNORMALITIES, Deaf & Dumb; (see S. R., next page.)—
TONGUE, Tremors, slight Coatings, none Promptness Movement, prompt
PUPILS, Equality, Yes Size, normal
Response Light, normal Accommodation, normal
SIGHT, seems good
HEARING, — is Deaf —
COORDINATION, Arms, Legs, } Good, Gymnal tests. —
TREMORS, Hands, none Tongue, slight
Facial Muscles, none General, none
REFLEXES, Patellar, 6 — equal —
Other Reflexes,
ARTICULATION, Hesitating, no Slurred, —
FACIAL EXPRESSION, Imbecile —
SENSIBILITY,
HEART, Sounds are good
LUNGS, " "
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

CRANIAL MEASUREMENTS,

HISTORICAL.

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

Personal and Medical History of Murton Waldron

1894 EBBERT, FICLAS & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here, in due form, by a deputy Sheriff, with the following history.- He was found wandering about Mower County, and the history accompanying him is very meagre.- Nothing is known as to residence, age, civil condition occupation, religion, habits, if any heredity, or cause of attack. Form of this attack is depressed; accompanying bodily disorder is typical incoherence; As to number of attack, or if any previous ones, is unknown. Insanity now shown by depressed spirits, aimless wandering, ambling shuffling gait. Patient is not disposed to injure others, nor suicidal, nor of filthy or destructive habits. Patient is deaf & dumb. Not known if he has been under medical treatment.

Apl 25 Apl 25/94. On admission, was put on Bd (S.R. Complexion fair; hair dark brown; eyebrows; Condition of skin good; no marks scars or bruises noted; bodily condition duty; patient is a deaf mute). Behavior is good.—

" 26 April 26/94. Slept quite well (9 hours), last night. AM. Pulse 77 R 20. Tm 98°. Appetite good; bowels are constipated. No cough observed. Patient is deaf & dumb. Is quiet & cheerful. Has an awkward and slightly shambling gait. No complaint or injuries to report.

This patient (whose parents live about 5 miles from this Hospital), had evidently wandered away from home. They, and friends, had been searching for him the past few days, and found him here. A Mr. Lawrence, from Rochester, called & took patient home with him, this evening.

—Discharged—

Peter Dalen

1896 From 1v.

May 21 Patient appears all right in the morning, but at 12 30, had a fit of Coughing & severe hemorrhage from the lungs.

" 22 Was put to bed: hot applications to feet. May 22/96. Rested well, during night. 9 15 am. Transferred to I.W.

" 24 appeared weak: was given bath & put to bed. May 24/96. 2 00 Pm. had hemorrhage of lungs. May 26/96. Appears

" 31 29 to be gaining strength, daily, but no mental improvement noticed. May 31/96. Out of bed, several times, during day &

June 2 appeared excited. June 2/96. Visited by brother. June 6/96. Has continued to improve. Up & Dressed, To day.

" 8 June 8/96. Wt 146 lbs. June 9/96. Transferred to D2. (See attached record of this illness).

July 1/96 to Aug 1/97 Summary Nurses Notes by Dr. Phelps. Patient in fairly good physical condition: rather restless & troublesome: rather melancholy. at times noisy & obstinate. At times talks to himself. During last few months has been at annex where he has been occasionally noisy & in fairly good condition. Aug 31/97 Wt. 143 lbs. Oct. 20 Health good: Quiet in behavior: Is somewhat noisy at times in talk. Commenced working on farm to day.

Jan 3 1899 Intervening notes show no change of importance. Has worked in various places: & is at present at soap house. Feb 1 - July 31 (Dr Wanous) Wt. 170 lbs Mchs. Red. slight bruise on nose.

Mch 11. Eyes very much inflamed. May 30 & 31. Visited by brother & friend July 31. Works on farm: General condition good. Is subject to irritable spells. Aug 1 - Jan 31 1900 (Dr Chapple) Sept. 17. Ran away from farm. Ret'd. Returned.-

Nov 31 1899. Is rather restless: talks a good deal of going home. Very incoherent & deluded. Behavior female

1900 Cleanly in habits. Works some about ward. Feb 6/1900. Wt 174 lbs. Phl. July 10. Vaccinated: result

Feb 6 July 10 Negative. July 31. No change. Physical health appears excellent. Seldom does any work. Is restless and erratic in behavior. Conversation irrational: Has delusions; "hears voices". Behavior usually good, but will try to run away. Habits filthy.

Carried to Transfer Book A. page 192

Personal and Medical History of Heinrich Schulze

From 212.

1894 June 6 June 6/94. Patient is about as yesterday. June 7/94. Ate little to day, but drank freely of milk & eggs. Slept an hour & a half during the forenoon. June 8/94. Patient is failing very fast. Is very weak.

" 9 heel broke & discharged a considerable amount of blood, at about 8 Pm. June 9/94. Continues to fail very rapidly. Would take no nourishment but milk & eggs. Friends & relatives have been advised of patient's

" 10 Critical condition. June 10/94. Took nothing but milk & eggs; did not wish to take even that; is sinking rapidly. June 11/94. Patient continued to fail very rapidly: Died at 9 10 Pm, last night

—Died—

William H. McCann

From 308.

1894 Oct 18 Oct 18/94. Slept but little, during the night. Seems much brighter than usual, this morning.

" 19 Oct 19/94. Rested & slept somewhat better, last night. Appetite good; bowels have moved.-

" 20 Oct 20/94. Slept none, during the night. Was noisy 2 hours, or so. Sleeps some during day time.

" 21 Appetite, now, very good.- 5 Pm. Visited by mother and sister.- Oct 21/94. Appetite good; bowels fairly regular. Again visited by mother & sister, this morning. They were very

" 22 anxious to take him home with them.- Oct 22/94. Restless & disturbed & slept but 1 hour, last night. Again visited by mother & sister to day and arrangements made for patient going home with them, an attendant from the Hospital, accompanying them. He left, this morning. (See attached Nurse's record).—

Discharged Feb. 6th 95.

Personal and Medical History of Henry Bartels

(Now before as Henry Bodle -)

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3703

Residence, Mount Pleasant Tp. Wabasha County

Date Admission, 28th April 1894

Admitted by, D. Phelps Hour, 1.30 PM

How Sent, Malcolm Kennedy, Jo. Co. Wabasha Co.

Sex, Male -

Age, 32 -

Civil Condition, married

Children, - 5 -

Age Youngest Child, —

Occupation, Farmer

Degree Education, not stated

Profession Religion, In a church member

Habits, usually good

Nativity, Germany —

Physicians Committing, C. D. Vilas and W. J. Wilson

Correspondents, Mrs Caroline Bartels (wife)
Lake City, Minn

No. for Year, 273.

Insane Relatives, none, so far as known

Cause Exciting, not clear; possibly regret at loss of horse

Cause Predisposing, previous attack

Form,

Accompanying Bodily Disorder, none discernible -

Suicidal or Not, not known.

Date of this Attack, in fall of 1893

Duration, about 6 months -

No. of Attack, 2nd probably

No. of Admissions, 2nd - here (previously in Asylum 5 mos) under name of Henry Bodle.

Age First Attack, about 29 -

Time of Leaving, Sept 24th '94

Time in Hospital, 4 mo. 26 ds.

Result, Improved

EXAMINATION ON ADMISSION.

Ex'd by D. Herzog, April 29/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Fairly quick

MEMORY:

Past Events, } Seems Good
Recent Events, }
Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Seems good

Own Mental State, defective

Special Subjects,

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Slightly

DELUSIONS:

Systematized or Not, unsystematized; of persecution

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, fairly voluble

GENERAL DESCRIPTIVE REMARKS:

The patient asserts that he feels well; denies that he ever had suspicions of his wife's fidelity; tells a somewhat disconnected story of the neighbors bothering him & stealing food &c from his house. States that he was here before in the fall of 1890, for a period of 2 months, at which time he felt just as he does now & was no better nor worse, when discharged.

Personal and Medical History of Henry Bartels

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7½ WEIGHT, 153½ pds NUTRITION, Fair —

WOUNDS OR ABNORMALITIES, ✓

TONGUE, Tremors, some fine (Tooth marked. Flabby, somewhat anaemic.) Coatings, brown at base Promptness Movement, somewhat sluggish

PUPILS, Equality, Yes Size, normal

Response Light, normal Accommodation, Do

SIGHT, seems good

HEARING, " "

COORDINATION, Arms, good; by usual tests.

Legs, good; " "

TREMORS, Hands, slight Tongue, Yes

Facial Muscles, no General, no

REFLEXES, Patellar, — 2 - Equal -

Other Reflexes,

ARTICULATION, Hesitating, normal Slurred, —

FACIAL EXPRESSION, slightly depressed —

SENSIBILITY, ✓

HEART, rapid; 2nd Sound at apex rough: weak -

LUNGS, seem good

EXAM. URINE. Sp. gr. 1037. acid; clear brownish-yellow; no sugar; no albumen.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good,	Medium,	Poor,
SLEEP, Good, Record kept	Poor,	Irregular,
PULSE, 108. weak	RESP.,	TEMP.,

CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother died at 60 — Cancer of Stomach —

Father or Pat. Relations, Father aged 60 — living — healthy —

Brothers or Sisters, 1 sister living — good health — 1 brother died in infancy

} no history of insanity obtainable

Personal and Medical History of Henry Bartels

1894

ERKENT, FICKAR & CHAMBERS, DAVENPORT, IOWA

This man was brought here by Deputy Sheriff W. H. McMillan, with following history. By occupation, a farmer; habits usually good. No history of heredity, so far as known. Cause of this attack is not clear; one element, however, in the causation, is possibly regret over loss of a horse. Form of this attack is depressed & paranoiacal: no bodily disorder discernible. First symptoms manifested in fall of 1893, by declining to work & neglecting to provide for his family; by accusing his wife of infidelity, and of complicity with the neighbors in a plot to rob him; by accusing innocent neighbors of shooting at him &c. This is not 1st attack; probably 2nd; one occurring about 3 years ago, when he was in an Insane Hospital for about 6 months. Insanity is now shown by delusions of persecution, as described above, and by neglecting the care of his family. Has shown disposition to injure others, probably due to sudden passion, but brought about by uncertain and fancied wrongs. If suicidal, not known: nor acts his being filthy & destructive. There is no history of any severe disease or injury to head. Has only been restrained & confined as above (in hospital): and think he has had no treatment but this. — . — . —

Apl 28 On admission, was patient 13th (S.D. Complexion light; hair light brown; eyes bluish gray; condition of skin good; no marks, scars, or eruptions noted; bodily condition clean; quiet & well-behaved on admission).
" 29 April 29/94. Slept nearly all last night. Appetite fairly good; bowels regular. No cough noticed. Behavior is quiet & peaceable. Does not talk much; only when asked questions, to which he responds readily & promptly; also sensibly. No complaints or injuries to report. April 30/94. Slept 9h last night; lay awake 1 hour, but was quiet. Appetite good; bowels free. Quietly behaved; inoffensive. Talks but little; "thinks there is nothing the matter with him". Habits are clean.
May 1 May 1/94. Rested & slept well (8 hours) last night. Appetite fairly good; bowels regular. Is very quietly behaved. Talks but little, yet in a rational manner. Makes no complaints. "Thinks he is all right & wishes to get home." Pulse (this Am) 96. R 20. T (R) 98 to 10th. Wt today, 154½ lbs. Transferred to B1 at 7 this evening
" 2 May 2/94. A quiet patient; much inclined to be by himself: has little to say. Pulse 84. Habits are clean.
" 3/4 May 3/94. Am. Pulse 106. Keeps about the same. Appetite, however, is poor. May 4/94. Am. P 96. Uniformly quiet & well-behaved. Has no "spells"; always keeps to himself; seems more contented.
" 5 May 5/94. About as usual; not inclined to work. Will say nothing about his troubles. Pulse 94.
" 6 May 6/94. Has been somewhat restless all day; walking the floor. Has nothing to say. Appetite poor.
" 9 May 9/94. Was quite restless, in the forenoon: would not speak, except when spoken to; then his
" 12 answers were very short. May 12/94. Apparently quiet & restful at night: Appetite good and bowels regular. Is somewhat more free in conversation, the past few days. Habits are good.

Summary. Has always behaved well, since onward. Though quite restless, at first, at he is now more quiet. Would not work or have much to say; now, talks more freely & also helps with the work around; Conversation seems quite rational; appetite, at first poor, has since become good. Bowels are regular. Pulse has become about normal, the past few days. Says he
" 31 always feels well. Patient seems to be improving. May 31/94 Apparently Continues to rest & sleep well, at night. Appetite poor; bowels regular. Quiet & well-behaved. Reticent; seldom says anything. Always keeping by himself; seems melancholic. Insolent; not inclined to work any.
June 1/10 June 1/94. Wt 154 lbs. (a gain of 12½ lbs, in the past month). Pulse 87. June 10/94. Had trouble with
" 20 a fellow-patient (Philip McGovern) today & received a cut on right Eye. — June 30/94. Continues

Personal and Medical History of Henry Bartels

1894 Cont'd

June 30 quiet & well-behaved. No "spells" have been noticed. Looks same as the ward & appears to be doing nicely. —
July 31/ Aug 1/31 July 1/94. Wt 173 lbs (a further gain of 5 lbs). Pulse 76. July 31/94. No special Change to note. — Aug 1/94. Wt 179 lbs (another gain of 6 lbs). Pulse 120. Aug 31/94. Apparently eats & sleeps well, at night. Uniformly quiet & well-behaved. Is making no improvement. Has had no "spells" now, for some time. Is much inclined to be alone. Appetite fair; bowels regular. He does no work. — " —
Sep 3/24 Sep 3/94. Wt 182½ lbs (a further gain, during the past month). Pulse 120. Sep 24/94. Has continued quiet & well-behaved. No "spells" or delusions have been noted. Seems much improved, mentally, and physical health is very good. — . —
Was today visited by his wife & allowed to return home with her. —

Discharged Feb. 6th 95.

Gust Dohling

1895 Drew 140.
Mar 2/3 Mar 2/95. Wt 84 lbs. Mar 3/95. Has bed-sore on left elbow; looks bad; same dressed. Patient groans
" 8 and cries frequently, during day & night. On milk diet. Mar 8/95. Slept none: was extremely noisy,
" 11 all night. Arm dressed daily & is doing nicely. Mar 11/95. Sent up in Roller-chair, every day. Is quite
" 21 noisy, at times, both by day & night. Sleeps 5 to 6 hours, nightly. Mar 22/95. Is given a Sponge-bath, every day; is on usual milk diet; fed by nurse, 3 times a day. Moans & groans frequently. Sent up in Roller-chair, every day. Arm dressed daily & is doing quite well. March 31/95. Sleeps 6 & 7 hours, nightly: arm still dressed daily & is improving. Patient up in Roller chair, every day. Otherwise, about same.
Apl 9/10 Apl 9/95. Wt 85 lbs. Apl 15/95. Has been sleeping about 6 hours, nightly, though still restless, at night. Bowels not regular. On liquid diet (1 quart milk, 3 times daily). Receives spray baths; also massage-treatment, 2 times weekly. Sent up, in Roller-chair, every day. 3 to 5 hours. Wound on arm has healed entirely. Apl 30/95. No special change. Is at times, quite noisy; frequently moaning & groaning. Condition about same.
May 3 May 3/95. Wt 81 lbs. Patient lies steadily in bed. At times, quite noisy. Fed, as usual, by nurse.
" 12 Takes about the same amount of nourishment, daily. May 10/95. Bed-sore again has appeared on arm.
" 31 Massage-treatment & baths Continued. May 31/95. As a rule, sleeps about as usual. Lies steadily in bed. Baths & massage-treatment still given. Is quite noisy, at times, moaning & groaning. Generally, about same.
June 10 June 10/95. Lies steadily in bed: still has sore arm; passes urine in bed: moans & groans frequently.
" 16/20 June 16/95. Is quite noisy, at times. Pulse, taken morning & evening, about normal. June 20/95. Visited
" 30 by brother. June 30/95. No change in any way. Lies steadily in bed. Moans & groans & is quite noisy.
July 1/10 July 1/95. Wt 85 lbs. July 10/95. Lies steadily in bed: frequently moaning & groaning: has bed-sores, on both elbows, which look quite bad. Keeps eyes closed, most of the time. Sleeps well.
" 31 July 31/95. Lies steadily in bed: moans & groans: sleeps well. Is about the same, month after month.
Aug 10 Aug 10/95. Sleeps 6 & 7 hours, nightly. Arms are frequently dressed, & patient's skin rubbed with towel, every day. He lies steadily in bed, in same condition, day after day. Habits dirty & he soils his bed. Pulse, taken morning & evening, has been mostly normal, though occasionally somewhat accelerated.
" 24 Aug 24/95. Lies steadily in bed: keeps eyes closed, almost continually; quite noisy, at times, groaning and talking to himself. On liquid diet of eggnog. Arms, still have sores dressed. Pulse more nearly normal
" 31 Aug 31/95. Lies steadily in bed: and in same condition. (Carried to Transfer A page 210

Personal and Medical History of John Oleson #4

TABBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3707.
Residence, "No home"
Date Admission, 1st May 1894.
Admitted by, Dr. Phelps Hour, 7 Pm
How Sent, John B. Oliver, Jo. Co., Ramsey County
Sex, Male
Age, 50 years
Civil Condition, unknown.
Children, none
Age Youngest Child, —
Occupation, Laborer
Degree Education, not given
Profession Religion, Lutheran
Habits, Temperate
Nativity, Norway.
Physicians Committing, C. J. Hadley and Geo. J. Hanley
Correspondents, "no known residence of any relative or friend"

No. for Year, 277.
Insane Relatives, unknown
Cause Exciting, unknown
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, Orchitis
Suicidal or Not, not suicidal —
Date of this Attack, unknown —
Duration, unknown
No. of Attack, unknown
No. of Admissions, 1st
Age First Attack, unknown
Time of Leaving, June 29 1897
Time in Hospital, 3 yr. 1 mo. 28 da.
Result, Transferred to Fergus Falls.

jc/pm

EXAMINATION ON ADMISSION.

Exd by Dr Eby May 3/94

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm, Calm and
Indifferent,
Exalted,
Depressed, Depressed
DELUSIONS:
Systematized or Not, None brought out.
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent and
Voluble or Reticent, quite free.

Personal and Medical History of John Oleson #4

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 133½ lbs. NUTRITION, Quite Good —
WOUNDS OR ABNORMALITIES, None noted —
TONGUE, Deviates to left Tremors, Some coarse Coatings, Heavy Coating Promptness Movement, quite prompt
PUPILS, Equality, not equal; right irregular Size, right normal; left "pin-head"
Response Light, Slightly Accommodation, —
SIGHT, says sight good; reads without glasses.
HEARING, Good.
COORDINATION, Arms, Quite good; finger to nose, eyes shut, no incoordination
Legs, Standing, Eyes Shut, Some swaying.
TREMORS, Hands, None Tongue, Yes
Facial Muscles, None General, None —
REFLEXES, Patellar, Right about 4 — left 6 —
Other Reflexes,
ARTICULATION, Hesitating, Good — 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,	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, } Parents dead — No insanity in family
Father or Pat. Relations, }
Brothers or Sisters, 1 brother.

Personal and Medical History of John Oleson #4

1894

KEENEY, PUDLAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy Sheriff Chapel with the following history. Habits temperate; no history of heredity. Cause of this attack is unknown: form is chronic, depressed. Accompanying bodily disorder, sciatica. When first symptoms were manifested is unknown: was crying last summer; number of attack, unknown. Insanity now manifested by melancholy. Patient has shown no disposition to injure others; is not suicidal, nor filthy nor destructive: if any previous peculiarities manifested is unknown. He claims to have had gonorrhoea. He has not been restrained or confined, nor under medical treatment. ——

May 1/94. On admission, was put on B2 (S.R. Complexion light; hair gray; eyes blue; condition of skin good; no marks or scars noted. Bodily condition dirty. Behavior good). May 2/94. Was quite restful and slept 8 hours, last night. AM. Pulse 78. R 17. T 98.8. Appetite medium; bowels generally free, no cough noticed. Has been restless part of the day; seems depressed; talks quite freely, when questioned. PM. Pulse 76. R 18. T 99. No complaints or injuries to report. May 3/94. Restless for 2 hours, but sleeping 6 hours, last night. AM. Pulse 72. R 18. T 98.6. Appetite good. Is well-behaved: sits about on the benches; talks some with his fellow-patients: makes no complaints. PM. Pulse 74. R 17. T 98.8. Is on medicine

May 4/94. Quiet & restful, sleeping 8 hours, last night. AM. Pulse 70. R 17. T 99. PM. Pulse R – T 98.8.

May 5/94. Is about as yesterday. May 5/94. Slept fairly well, 7 hours, last night. AM. Pulse 70. Appetite is good.

May 6/94. Walks round about the hall. Talks quite freely, when addressed: makes no complaints. May 6/94. Slept 6 hours, was restless for 2 hours, last night. AM. Pulse 72. Appetite good; behavior good; seems much depressed.

May 7/94. Rested fairly well, sleeping 7 hours, last night. AM. Pulse 74. Walks about hall; the greater part of the time: seldom talks unless addressed; makes no complaints. May 8/94. Again, slept 7 hours, last night. AM. Pulse 68. Keeps about as usual. May 15/94. During this, the 2nd week of his stay here, patient has been uniformly resting well at night, sleeping 7 hours each. Pulse has been about normal. Appetite has been good; bowels apparently regular. Behaves well. Talks to patients some, answers questions fairly readily, but has little, otherwise, to say. Sits about on the seats, most of the time. Does not read, play games, or assist with the work. Is restless, at times, by day; seems very depressed. Does not complain any. Goes walking sometimes. Habits are clean. He is on medicines. –

May 31/94. Last note still holds good, at this date. Indolent, doing no work. Goes out walking.

June 7/94. June 7/94. Wt 138½ pds. Pulse 82. June 4/94. Complains of not feeling well. Appetite poor. Probably constipated.

June 8/94. Appetite still poor. June 30/94. Keeps about the same. Appetite still poor, at times. Manifests delusions; "imagines some one is trying to chloroform him". Still, does not help with the work. –

July 2/94. Wt 138½ pds. July 3/94. Appetite very poor: ate but one meal, today. July 7/94. Ate nothing, for the past 3 days. Is very restless today; trying to get away. July 31/94. Restless & cranky. Appetite not good; bowels are regular. Talks but seldom. Still holds delusions. Does not walking daily: habits are cleanly. –

Aug 31/94. Aug 3/94. Wt 135 pds. Pulse 60. Aug 31/94. Behavior good. Workseome. Otherwise about the same.

Sept 30/94. Sept 1/94. Wt 135 " " 74. Sept 30/94. Of late, has been having "cranky spells" when he will not talk or do anything asked of him. Though, as a whole, he is well-behaved. Physical health good.

Oct 31/94. Oct 1/94. Wt 133½ pds. Pulse 78. Oct 31/94. Depressed & shows delusions. Talks but little. Does no work. Makes no complaints. Continues quiet & well behaved. Seems good health. –

Nov 30/94. Nov 1/94. Wt 133½ pds. Pulse 84. Nov 30/94. Appetite poor. Restless, walking the floor a good deal. Talks none.

Dec 31/94. Dec 1/94. Wt 138 " " 66. Dec 31/94. Appetite now good. Is "cranky" & deluded – Also very restless –

1895

Jan 2/95. Jan 2/95. Wt 136½ pds. Pulse 68. Jan 31/95. No change noted. Appetite is generally good. Patient is restless, walking the floor. Also "cranky". Talks none. Still manifests his delusions. —

Feb 1/95. Feb 1/95. Wt 140½ pds. Pulse 64. Feby 9/95. Is "off" today; walking hall & talking. Works none; is talking to himself. Deluded. Feb 28/95. No change. Walks the hall. Is cranky and deluded.

March 2/95. March 2/95. Wt 139 pds. P 64. March 28/95. Is still "off". Walking hall: restless and talking.

March 22/95. Also somewhat excited, today: kicking the cuspidors & talking to himself. —

March 31/95. Appetite good. Still restless & walking hall, at times. Talks but little. Otherwise works none.

April 1/95. Wt 141 pds. P 68. April 30/95. Conduct, behavior & manner do not change any. Cranky. Works none.

May 1/95. No change specially to note. May 20/95. Transferred to Annex. May 31/95. Patient generally quiet, but stubborn: occasionally noisy & loud-talking, & will, at times, gesticulate wildly.

June 1/95. Habits clean: he does no work. Health is good. June 15/95. Keeps about the same, all the time.

June 30/95. Attendants have had trouble with him, several times, because of his stubbornness. Otherwise, no change to note. July 31/95. Patients' condition about same, from month to month during this quarter, patient's condition does not seem to have changed in any respect. Quiet, stubborn; does no work: talks to himself a good deal: habit clean: Health seems good. –

Nov 4/95. Nov 4/95. Wt 134 pds. Pulse 80. Nov. Dec & Jany 31/96. Patient, during this period, has not seemed to change any. He is quiet, but stubborn at times. Seldom speaking: indolent & does no work. Habits clean. Does not. Health good. Relives along quietly & seemingly contented by. him. –

Feb 4/96. Feb 4/96. Wt 132 pds. P 72. Feb March & April 30/96. No change noticeable, during the period. Quiet & generally well-behaved, but rather stubborn: seldom speaking: no work: habits clean: health is apparently good. –

May 1/96 to June 29/97. Summary Nurses Notes by Dr. Phelps. Patient stubborn & demented: usually quiet & inoffensive: Nov '96 Placed at annex where he would be occasionally noisy at night but on the whole fairly well behaved. June 29'97 Transferred to Fergus Falls

Personal and Medical History of James Watson

HERBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3712.
Residence, "not known"
Date Admission, 3rd May 1894.
Admitted by, Dr. Eby — Hour, 7 PM.
How Sent, Herman Blackmer, Jof C, Faribow County
Sex, Male.
Age, 30
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, Laborer
Degree Education, not given
Profession Religion, not a church member
Habits, unknown
Nativity, not known
Physicians Committing, A. N. Wilcox & J. C. VonBerg
Correspondents, none given in papers —
on brain is found purple prairie address — name of relatives etc etc

No. for Year, 282.
Insane Relatives, not known
Cause Exciting, Exposure & deprivation
Cause Predisposing, not known
Form,
Accompanying Bodily Disorder, none known
Suicidal or Not, not.
Date of this Attack, not known
Duration, probably short
No. of Attack, not known
No. of Admissions, 1st
Age First Attack, not known
Time of Leaving, June 29. 1897
Time in Hospital, 3 yr. 1 mo. 26 d.
Result, Transferred to Fergus Falls.

JK PM

EXAMINATION ON ADMISSION.

Ed by Dr. Herzog May 11/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, somewhat confused
Quick or Sluggish, Quick —
MEMORY:
Past Events, } Very poor
Recent Events, }
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, in the main Correct
REASONING POWER:
Ordinary Subjects, } Good, Considering station in life
Own Mental State, }
Special Subjects,

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Slightly
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects, } none noticed
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Slightly incoherent
Voluble or Reticent, fairly voluble —

GENERAL DESCRIPTIVE REMARKS:
Patient has, evidently, been exposed to the elements & has suffered, in general health, in Consequence. His answers, at times, are somewhat inconsequential. His memory is very defective & is the Chief sign of his mental aberration & the patient recognizes it as such. He is quiet in his behavior. He is unable to give any information concerning himself, his occupation age family, relatives address. —

Personal and Medical History of James Watson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 10½ WEIGHT, 137 lbs. NUTRITION, Fair; somewhat emaciated
WOUNDS OR ABNORMALITIES, Just back of glans appearance over whole body, as if bruises by a stick or strap. Hypospadrias urethra opening
TONGUE, Tremors, large coarse Coatings, heavy gray, at base Promptness Movement, prompt
PUPILS, Equality, Yes Size, normal
Response Light, normal Accommodation, normal
SIGHT, Seems good
HEARING, " "
COORDINATION, Arms, Good; finger & nose, eyes shut, good.
Legs, legs, very slightly impaired; Standing on foot good; Standing, eyes shut, sways slightly
TREMORS, Hands, no Tongue, Yes, Coarse
Facial Muscles, no General, no
REFLEXES, Patellar, Equal — 9 —
Other Reflexes, Slight ankle-clonus.
ARTICULATION, Hesitating, Good Slurred, —
FACIAL EXPRESSION, Somewhat reckless —
SENSIBILITY,
HEART, no distinct murmur; roughness of 1st sound, at apex.
LUNGS, Seem good.
EXAM. URINE.

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, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") } no history obtainable
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of James Watson

1894

This patient was brought here by Deputy Sheriff James M. Mitchell and accompanied by J. F. Chamberlain, with the following history. He seems to be a "Transient" and very little is known about him. He boarded a train at Oakland in this state, on May 1st 1894; conductor telegraphed to officers, in this place, to arrest him. His habits, nativity, if any insane relatives, if subject to any bodily disease, when first symptoms of disease were manifested; number of attack, all are unknown. Supposed Cause of the attack is exposure and deprivation. Insanity now manifested in no particular subject, excepting Colors, and hyperthesiness and dullness. Patient has shown no disposition to injure others, nor is he suicidal: wants, however, to undress himself much of the time. Has been confined in lock-up, in this city, for 2 days. He has been under treatment hypnotically. ——

May 3 On admission, was put to bed (L. R. Complexion dark; hair brown; eyes bluish gray; condition of skin white, marked with scars on surface, as if struck repeatedly with leather strap. Has a slight malformation of penis. Is well-behaved). May 4/94. Slept but 4 hours last night; lay awake for 5 hours, but was quiet. A.M. Pulse 71 R. 19 T. (R) 99 4/5 th. Appetite good; bowels free; no cough observed; is well-behaved; talks rationally; answers questions promptly; says "his memory is defective". No complaints or injuries to report.

" 5 May 5/94. Slept poorly last night. P.M. Pulse (after working) 88. R. 18. T. (R) 99 2/5 th. Appetite good;

" 6 bowels regular. Behaves well & talks in a sensible manner. May 6/94. Was restless for 7 hours, and slept but 2 hours last night. P.M. Pulse 78. R. 20. T. (R) 98 3/10 th; is quietly behaved, though slightly restless. Talks easily, but is not so collected in his manner, as yesterday. Appetite not so good, this morning; bowels free.

" 7 Complains of being sick. May 7/94. Slept only 4 hours, was restless for 5 hours or so, last night. A.M. Pulse 70 R. 19. T. (R) 98 4/10 th. Refused supper last night, but took breakfast this morning. Bowels are regular. Threw his bed and bedclothes about the hall, last night & would not dress himself this morning, without persuasion. Is quietly behaved, though he has "spells" of nervous excitement & restlessness. Thinks he has to undergo an

" 8 operation & says he is quite ready". May 8/94. Was restless all last night; slept almost none. A.M. Pulse 72. R. 15. T. (R) 98 3/10 th. Appetite fair; bowels free; makes no complaints. Fairly quietly behaved, but is becoming very restless & nervous. (was at Watercloset 5 times, today). Talks readily, but is evidently not so rational as on admission. May 9/94. Restless an hour or so, but slept 8 hours, last night. Appetite medium, bowels

" 9 " 10 regular. Pulse 70. R. 20. Is restless & uneasy; very nervous & excited. May 10/94. Was more restful, sleeping 8 hours, last night. P.M. Pulse 74. R. 14. Behavior quiet, but he is, at times, obstinate and "shows fight". Resents any enquiries, or questions asked. Walks about ward, without speaking to any one. Appears to be melancholiac. May 17/94. During this, the 2nd week, patient has been, nightly, restless,

May 17 for about 3 hours, but has slept 8 hours, in each. Pulse, taken each morning, has ranged from 72 to 96; (today 88). Appetite only fair; (is on extra diet); bowels fairly regular. Behavior is, for the most part, quiet, yet, at times, he is noisy & quarrelsome; restless & uneasy; talks rapidly, when excited: speech is incoherent & irrational. Has the delusion that he is being tried in court; also that an operation is to be performed upon him & others." Summary. Patient was more rational & collected in his mind, when admitted, than at present. He was very restless and excited for the first few days, and even into the 2nd week, but talked well & freely. The past few days, he has become quiet & phlegmatic, letting in one place, most of the day, & entirely oblivious to his environments. He speaks to no one; does not even answer to his name; eyes are widely opened & glaring, without appearing to observe anything. His physical condition is weak and debilitated. ——

Personal and Medical History of James Watson

1894

May 31 May 31/94. Apparently rests & sleeps well. Appetite is fair (he is on extra diet); bowels regular. Appears to be of a weakly Constitution. Is quiet & well-behaved: sits mostly, in the one place, all day; talks to no one. Makes no complaints. No injuries to report. He is cleanly in his habits. Is inclined to be melancholy. He does no work. —

June 1/94 Wt 138 pds. Pulse 72. June 30/94. No change in condition etc to report upon during the month.

July 31 July 2/94. Wt 139 " " 70 July 31/94. No noticeable change. Patient is still on extra diet. —

Aug 31 Aug 1/94. Wt 141 " " 66. Aug 31/94. Appetite rather poor; still gets extra Diet; bowels regular. No cough noticed. Patient appears weak, but has improved a good deal & is now eating better. He is very quiet & reserved. Sits in one place & position, most of the day, turns his face to the wall and is disinclined to speak with any one; will not answer questions reasonably. Is cleanly in his habits.

Sep 10/30 Sep 10/94. Moved to the Annex today. Sep 30/94. No change, and last general note still holds good.

Oct 5 Oct 5/94. Keeps in quite good physical condition; about the same mentally. Habits are cleanly

" 31 Oct 31/94. Does not seem to change in any respect. Quiet, well-behaved & keeps by himself.

Nov 30 During these 3 months, there is no special change observable. He is quiet, timid and shrinking

Dec 31 1894 from meeting with other patients. Seldom speaks. Habits clean; Dress neat. Health is apparently

Jan 31 good. Feby 28 to Apl 30/95. During this quarter, patient has been quiet; sober and melancholy;

to Apl 30 works a little in ward: seldom speaks. Habits clean. Dress neat. Does not seem to be in the best of health.

May 30 to July 31 During this Quarter, patient's condition does not seem to have changed, in any respect: he has been quiet & depressed; works a little; seldom speaks, except when spoken to. Health does not seem very good.

Aug 1 to Sept 30 Oct 31 During these 3 months, patient has been, for the most part, quiet, but will fight, on very little provocation. Never speaks, but will do as he is asked: works in ward: habits clean: Health has apparently improved —

Nov 4 to Dec 5 1895 Nov 4/95. Wt 148 pds. Pulse 64. Nov, Dec & to Jany 31/96. During this period, patient's condition has shown no change. Quiet & generally well behaved, but will fight, if disturbed: Works in ward. Seldom speaks, unless spoken to. Habits clean: health apparently good.

Jany 31 to Febry Feby 1/96. Wt 146 pds. P 76. Feb March & to Apl 30/96. During the period, patient has been generally quiet and

March to Apl 30 well behaved, but will fight, upon least provocation: Works in dining room: goes about unattended with fevered haste. Habits clean: Health apparently good. Seldom speaks unless spoken to. Lives along, entirely to here.

May 1/96 to June 29/97 Summary Nurses Notes by Dr. Phelps. Patient usually quiet: Works in dining room: Rather melancholy in manner: Health uniformly good: Wt. 141 to 147 lbs. Habits usually clean: June 29th 1897 Transferred to Fergus Falls.

Personal and Medical History of Heinricke Schulze

EBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3711.

Residence, Baytown, Washington Co. Minn

Date Admission, 5th May 1894.

Admitted by, D. Herzog — Hour, 7 30 PM

How Sent, Rudolph Lehnicke, Jof P. Washington County

Sex, Male

Age, about 65.

Civil Condition, married

Children, Three

Age Youngest Child, —

Occupation, Farmer

Degree Education, not stated

Profession Religion, German Lutheran

Habits, temperate; morals good.

Nativity, Hanover, Germany —

Physicians Committing, W. H. Caine and G. E. Clark

Correspondents, William Schultze (his son)
Lake Elmo, Washington County, Minn

No. for Year, 281.

Insane Relatives, a sister; none hereditarily

Cause Exciting, Peritonitis

Cause Predisposing, heredity —

Form,

Accompanying Bodily Disorder, none.

Suicidal or Not, very suicidal; is also homicidal

Date of this Attack, about 2 weeks ago

Duration, about 2 weeks.

No. of Attack, 2nd probably (1 about 12 years ago)

No. of Admissions, 1st (here)

Age First Attack, about 53. —

Time of Leaving, 11th June 1894.

Time in Hospital, 1 month; 6 Days

Result, Died; Exhaustion following acute Delirious mania.

EXAMINATION ON ADMISSION.

Ed by Dr. Herzog, May 6/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, } Poor
Recent Events, }

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Illusive

REASONING POWER:

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

GENERAL DESCRIPTIVE REMARKS:

Physical examination of patient difficult, owing to delirium. Complains of frontal & post-cervical headache, rigidity & tenderness of abdomen. Has occasional clonic spasm of right arm & a condition approaching Opisthotonos. Tries to write everything he wishes that he does do, but says he cannot help it —

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS:

Systematized or Not, } none noticed
Special Subjects, }
Transitory or Not, }

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent

Voluble or Reticent, fairly voluble.

Personal and Medical History of Heinricke Schulze

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 6 in WEIGHT, 140 pds NUTRITION, Poor

WOUNDS OR ABNORMALITIES, varicose veins; inguinal hernia, right side; femoral hernia, left side.

TONGUE, Tremors, Yes; large Coatings, heavy brown, Dry, fissured (Lordeda tests) Promptness Movement, Slow

PUPILS, Equality, Equal Size, Normal

Response Light, Yes Accommodation, Yes. —

SIGHT, ✓

HEARING, ✓

COORDINATION, Arms, } no tests made —
Legs, }

TREMORS, Hands, Yes Tongue, Yes

Facial Muscles, ✓ General,

REFLEXES, Patellar, no tests made

Other Reflexes,

ARTICULATION, Hesitating, Slurred,

FACIAL EXPRESSION, Delirious; partial paralysis of right side of face —

SENSIBILITY, ✓

HEART, no murmurs; sounds all weak & rough.

LUNGS, seem fair; examination difficult —

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal, Kept	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 Heinrich Schulze

GERLATT, PUCLAN & RHAMSEIER, DAVENPORT, IOWA

1894

This patient was brought here by George Greene, Deputy Sheriff, accompanied by Wm Ulrich, with the following history. Has been a temperate man and of good morals. There is sound history of heredity, a sister being insane. Patient had peritonitis & before attack was over the mental derangement was manifest. Form of attack is acute. There is no accompanying bodily disorder. This attack followed on one of peritonitis about 6 weeks ago; the mental derangement has existed about 4 weeks. This is not the first attack; after arrival in the United States twelve (12) years ago, he showed symptoms of insanity which were attributed to dependency. Insanity is now shown by fear of losing all his property &c. He has tried to kill his wife, from sudden passion: has also tried, several times, to suicide: has broken windows, furniture &c: has tried to destroy his clothing; no filthy habits. There is no history of any bodily sickness, except peritonitis. He has had no restraint except by tying his hands, to prevent his injuring himself or others; this, at home, for about one week. Has only been under treatment for peritonitis.

May 5 On admission, recipient C.H. (I.R. Complexion dark; hair gray; eyes gray; condition of skin good; has hernia; bodily condition dirty; has also enlarged veins; is excited & violent; was brought here in

" 6 restlets; tried to bite Attendant (Blair) when dressing him). May 6/94. Was restless all night; making almost ceaseless movements of the head; slept none. Mm. Pulse 84. R. 30. T. 99 4/10. Appetite poor; had to be fed on liquids; takes eggnog & peptonoids daily; had passage of the bowels (formed). Today, is restless, noisy & excited; tries to bite and spit on everyone around him; refused to lie in bed & was placed in restraint Sheet at 9 Pm. Talks incoherently

" 7 and cannot be understood. No cough noticed. Has pain in the head & great tenderness in abdomen. May 7/94. Slept none; was restless all night. Again, restless & excited today. Still secured in restraint Sheet. Bites & spits at everyone; is considerably exhausted, but fought, when being changed, this morning. Talks so as he can be partially understood. No movement of the bowels, since yesterday morning. Still complains of pains in

" 8 head & abdomen. (see Case record attached, for pulse T. & R. &c). May 8/94. Very restless & disturbed and slept but 1 hour, last night. Is more quietly behaved today. Is awake, today & consequently, not so restless. Still in restraint Sheet. Talks more sensibly & seems to realize his position. Attendant offered to remove the restraint Sheet last night but he (Patient) refused, saying "he would do damage & hurt himself". Had movement

" 9 of the bowels, this morning. Pains in head & abdomen continue. May 9/94. Restless for 8 hours; sleeping but 1 hour, last night. Is getting more subdued & quietly behaved, apparently through exhaustion. Talks sensibly, at times, though often incoherent. Is fed with liquids, such as peptonoids, milk & eggs, pap &c. no cough observed. No movement of the bowels yet. Still complains of pains in head & abdomen (for further particulars,

" 10 see "Case-Record", attached). May 10/94. Slept, since yesterday evening, at 7 Pm, till today, at 9 Am; in all, 8 hours; restless 3 hours; no movement of bowels; Mm. Pulse 66 R 40 T. 98 7/10 Behavior is, for the most part, quiet. Talks rather sensibly, at times; has hallucinations; today, Complains of

" 11 pains in head & arms. May 11/94. Was awake all night. Mm. Pulse 89 R 46. T. 98 3/5. Has had no passage of the bowels yet. Continues quietly behaved. There are hallucinations & rambling talk. Drinks liquid food readily, ie milk & eggs, peptonoids &c. Still complains of pains in left arm and side. -

" 12 May 12/94. Slept none last night but had some sleep, yesterday afternoon. Mm Pulse 83 R 47 T. 98 3/4 Swallows food given him, with an evident relish; bowels badly constipated. Is well behaved. Talks in a rambling manner & repeats 2 or 3 words, over & over, innumerable times. Cathartics, given last night, have not caused a movement of the bowels. Still complains of pains in left foot & leg, & knee.

" 13 May 13/94. Slept only 2 hours; restless for 9 hours, last night. At 7.30 Pm, last night Pulse 84. R 43 T. 100 1/5

Personal and Medical History of Heinrich Schulze

1894 Contd

May 13 At 6.30, this morning, Pulse 94. R 32. T. 99 5/10. Appetite good; still has to be fed, on liquids. Bowels still very much constipated. Is quietly behaved; still kept in restraint sheet. Talks, at times, rationally; then drops into incoherent mutterings & cries; no cough has been observed. Complains of great pain

" 14 in left leg. May 14/94. Slept only 3 hours last night; was awake for 6 hours; is very sleepy, this morning. At 7.30 last night, Pulse 86. R 44. T. 99 4/5; this morning, at 6 Am, Pulse 84. R 40. T. 98 2/5 Is still fed on eggs & milk, of which he consumes a fair quantity. Continues quietly behaved; kept in restraint Sheet, by his own request; talks in a rambling manner. He had a free, well formed, passage of the bowels, last

" 15 night. Still complains of great pain in legs. May 15/94. Had short intervals of sleep during yesterday, but slept only 2 hours, last night. At 7.30 Pm (last night) Pulse 82 R 48 T. 99 1/10; at 6 Am (this morning) Pulse 90. R 46. T. 99°. Appetite fair; fed on liquids solely; bowels again constipated. Behavior is very restless, today. Talks very incoherently. Continually complains of great pain in lower limbs.

" 16 May 16/94. Slept only 3 hours, last night; was restless for 6 hours; is very sleepy this morning. At 6.30 Pm, last Evening, Pulse 82 R 40. T. 99 3/5. Appetite fair; fed on liquids only; bowels seem free, today. Is restless & sometimes noisy. Talks in a rambling manner, but is, occasionally, rational. Pains, in

" 17 lower limbs, still persist. May 17/94. Slept for some hours, yesterday afternoon, but slept none, last night; was noisy 6 hours & restless 3 hours. At 6.30 Pm, yesterday P. 82 R 39 T. 98 3/4; and at 6.30 Am, today, P. 82 R 36 T. 98 3/10. Behavior has been, for the last 24 hours, noisy, restless and

" 18 sometimes quiescent. Talks unintelligibly, most of the time. May 18/94. Slept some, yesterday afternoon, and 4 hours, last night: was also resting quietly 4 hours, last night. at 7 Pm, last night, P 84. R 36 T. 98°: at 6.30 Am today, P 80. R 40. T. 98 3/10. Appetite fair; took some solid

" 19 food, today. Bowels active. He has pains in abdomen & lower limbs. Behaved more quietly, during yesterday & last night. Still talks very incoherently. May 19/94. Restless; slept none, last night. 6.30 Pm, Yesterday, Pulse 76 R 40 T. 98. At 6.30 Am, today, Pulse 79 R 38 T. 98 2/5. Had a movement of the bowel, this morning. Is also restless & uneasy, today. Talks incoherently;

" 20 Appetite fair; took some solid food, again, this morning. Still complains of pain in chest.

Summary. The patient has been in a weak State of health, physically, since admission. He was in a most excited state, when received in ward; biting, spitting, throwing things about & tearing up his clothes, bed-clothing &c., with his teeth. He has gradually quieted, through exhaustion, want of sleep, and general debility. Has had to be fed on liquid food until within the past 2 days & has continually complained of great pains in the lower limbs & abdomen; also in breast. He speaks rationally, at times, but is often incoherent & unintelligible. The patients temperature had not been abnormal, at any time, (ranging between normal & 99 1/5). He is unable to obtain natural rest owing to the nervous excitement from which he is suffering. - (See attached Case-record for more full details)

" 20 May 20/94. Patient is still kept in restraint, day & night. He has a bed sore on back and black spot on outside of each heel. Appetite is fair; bowels regular. May 26/94. Patient is still kept in restraint.

" 28 Appetite fair; bowels constipated. May 28/94. Still in restraint. Takes no solid food, now; has trouble in swallowing; is fed on milk & eggs. Bowels are quite loose. ——

June 1/94 June 1/94. Wt 124 lbs Pulse 88. (Has been gradually failing in flesh & strength) June 4/94. His

" 5 bowels have been very loose the last few days. Appetite is no better than before. June 5/94. Appetite is somewhat better. Drank milk & eggs but refused other. Bowels becoming somewhat more regular.

(Carried to page 199

Personal and Medical History of Joseph Wallerious

ROBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3715.

Residence, New Trier, Dakota Co

Date Admission, 7th May 1894.

Admitted by, D. Phelps Hour, 7

How Sent, Thos. P. Moran, Jo P. D

Sex, Male

Age, Eighteen (18)

Civil Condition, single

Children,

Age Youngest Child, —

Occupation, none; lives with his

Degree Education, probably good

Profession Religion, Catholic, Chur

Habits, very moderate, as regards temperance

Nativity, New Trier, Dakota County, Minn

Physicians Committing, H. VanBeeck & J. E. Finch

Correspondents, E. N. Wallerius, Vermillion, Dakota Co Minn

ar, 285.

latives, none

iting, self-abuse

disposing, not stated

ying Bodily Disorder, Constipation

r Not, not stated.

is Attack, about a Year ago about a year

ack, 1st

missions, 1st

Attack, about 17.

eaving, Oct. 23rd '94

Time in Hospital, 5 mo 16 ds

Result, Improved

EXAMINATION ON ADMISSION.

Exd by D. Ely, May 10/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Some impaired

Recent Events, Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Has emissions &c, frequently washed himself, clothing &c.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Depressed.

DELUSIONS:

Systematized or Not,

Special Subjects, /

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Fairly Free

Personal and Medical History of Joseph Wallerious

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in WEIGHT, 152½ lbs. NUTRITION, Good. —

WOUNDS OR ABNORMALITIES, —

TONGUE, Large & flabby Tremors, very slight Coatings, some coating Promptness Movement, prompt

PUPILS, Equality, equal Size, slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, (wears Concave glasses) —

HEARING, Good

COORDINATION, Arms, Good; (finger to nose, eyes shut, Good.

Legs, Good; (standing eyes shut, no swaying). —

TREMORS, Hands, none Tongue, Very slight

Facial Muscles, none General, none

REFLEXES, Patellar, equal — about. —

Other Reflexes,

ARTICULATION, Hesitating, Good - Slurred,

FACIAL EXPRESSION, somewhat blank.

SENSIBILITY, Normal

HEART, Sounds good —

LUNGS, Sounds good —

EXAM. URINE.

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, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, mother living — healthy — } no relatives known to be insane —

Father or Pat. Relations, father dead; some lung disease — } no relatives known to be insane —

Brothers or Sisters, 1 Brother; 3 sisters; all well — } no relatives known to be insane —

Personal and Medical History of Joseph Wallerious

1894 EGBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff John Wasser accompanied by E.M. Wallerius, with the following history. Habits are temperate. No history of heredity. Cause of attack is self-abuse. Form is Chronic: accompanying bodily disorder, constipation. First symptoms of disease were manifested about one year ago, by excessive fear of being defiled. This is the 1st attack. Insanity is now shown by constant fear of being defiled, in every way. Washing his clothes, whenever he fears they are soiled. The above propensities are especially active after emission. Disposed to injure his mother and sister from sudden passion. If suicidal, is not stated. He destroys his clothing, when he thinks it is soiled. There is no history of any bodily disease &c or injury to head. Patient has not been restrained or confined, nor under medical treatment. ——

May 7 On admission, was put on Ward B. (S.R. Complexion fair; hair dark brown; eyes gray (wears glasses); Condition of skin good; no marks or scars noted. Bodily condition clean; behavior good). May 8/94. Slept 6 hours; was restless for 2 hours, last night. Am. Pulse 60. R 17. T. 98°. Appetite good. Is well-behaved. Plays billiards, reads &c. Talks freely; no delusions or hallucinations noticed; no cough observed. Pm. Pulse 56 R 18. T. 98.2°. No complaints or injuries to report, today. " 9 May 9/94. More restful, sleeping 7 hours, last night. Am. Pulse 50. R 18. T. 99. Appetite is good. Conduct & behavior good, talks quite freely when addressed. " 10 Passes the time in playing games, reading &c. Pm. Pulse 52; T. 98.6°. May 10/94. Slept 8 hours, last night. Am. Pulse 47. R 17. T. 98.8°. Pm. Pulse 50. R 16. T. 98.6°. Is about as yesterday. — " 13 May 13/94. Has been since last note, sleeping about 8 hours, nightly; Pulse, taken each day, has been 56. 60. the past 2 mornings & 68 this Am. Behaves well; Makes no complaints. Talks freely; Shows no delusions. Works some in the ward; also goes walking, with the rest. Seems quite contented here. — " 17 May 14/94. Was restless for a couple of hours, but slept 6 hours, last night. Am. Pulse 72. — " 21 May 21/94. During this the 2nd week of his stay, patient has continued quiet & restful, at night, sleeping 7 to 8 hours, nightly. Pulse has been about normal. Appetite good; he has been well behaved, from the first. Talks quite freely & sensibly; if he holds any delusions he has never expressed them, or shown them. Plays billiards; reads some. Mental condition seems about the same as when he came on ward " 28 Physical condition is good. He helps some with the ward-work. Habits cleanly. May 28/94. Still shows " 31 delusions. To-day, took his coat off and threw it in the corner; "thinks it is not clean." May 31/94. Appetite good; bowels, as a rule, are free. He makes no complaints. Talks freely. Still shows his delusions; works some. June 2/94. Wt 152½ pds. Pulse 80. Transferred to B. today. June 30/94. Quiet & well-behaved. Acts somewhat stupid, at times. Seldom cares for any breakfast. Still shows his peculiar delusion. Is inclined to be in the wash-room, washing his face & hands & will do so, all day, if allowed. Helps with the work in ward. — July 1/94. Was visited by two of his relations, today. July 4/94. Wt 145 pds. (has lost some in flesh without any " 15 apparent cause); pulse 84. July 15/94. Continues about as usual. Was, to-day, transferred to A. East. — " 31 July 31/94. Does not change in any way, within the past 2 months. Quiet & well-behaved. Talks freely; but still shows his peculiar delusion. Takes part in games &c. Began working in kitchen ward 25th & works there daily now. Aug 2/31 Aug 2/94. Wt 151 pds. Pulse 86. Aug 31/94. Apparently, rests and sleeps well, at night. Appetite good; bowels regular. Uniformly quiet & well-behaved. Still holds to his delusions & wishes to be washing himself, a good deal of the time. Occasionally works in kitchen. Physical health good. Sept 4/ Sept 4/94. Wt 153½ pds. Pulse 80. Sep 30/94. At times, refused his breakfast. Appetite, however, is fair. 30 Still holds to his delusions. More than half the time, gets up during night & washes himself in the

Personal and Medical History of Joseph Wallerious

1894 Cont'd

Sep 30 urine vessel. Somewhat indolent of late & does not care to work any. Entirely Rochester free, today.
Oct 2/95 Oct 2/94. Wt 153½ pds. Pulse 64. Oct 15/94. No special Change to note. Has improved some —
" 22 Oct 22/94. Visited by mother & sister today; they seemed anxious to take him home & give him a trial.
" 23/24 Oct 23/94. Again visited by them, today. Oct 24/94. Patient allowed to go home with them, this morning.
Note by Dr. H. Patient has considerably improved since admission, but not recovered. He is still possessed with the "dominant Idea of defilement." —

Discharged Feb. 6th 95.

Emery L. Abert

1895 From 136.
Mar 15 at times; crying frequently - March 15/95. Has delusions - "Imagines certain pities have vanished
" 31 or been destroyed" - March 31/95. Appetite good; bowels regular - Is gaining, very apparently, in flesh. Works on ward considerably & is much brighter & less melancholy, than heretofore. Habits are cleanly -
Apl 9 Apl 9/95. Wt 115 pbs. Patient quite despondent - Works on ward some. Cries, also, at times.
" 15 Apl 16/95. Quite depressed. "Crying spells" frequently. Eats & sleeps well, at night. Very willing and
" 30 obedient on ward & helpful with work. Goes out, every day, on the grounds. Habits are neat & clean -
Apl 30/95. No special Change noted - Is still very despondent at times & has "spells" of crying.
May 1 May 1/95. Patient up, on ward. Appetite fairly good, but will not eat unless urged - Bowels are regular.
" 2 Talks quite freely - But, at times, is very despondent and says "he wants to die" - May 2/95. Wt 116 pbs.
" 4/ May 4/95. Was given massage-treatment on 2nd & 4th inst. May 25/95. Patient sleeps well. Is given
" 31 bath, quite often. May 31/95. Patient quite despondent; crying frequently. "Wants to be killed".
Often refuses food, unless very much urged to do so. Physical health fairly good. Habits are clean.
June 1/ June 1/95. Wt 116½ pbs. Pulse normal - June 5/95. At times, very despondent. Says "he is tired of living
" 13 and wants to be killed" - June 13/95. Works on ward some: Most of time is cheerful: walking. Goes out
" 30 on grounds every day. June 30/95. No special change. Appetite fair; eats heartily much urging, at times, to eat and will rest. Comes in the dining-room until forced to do so. Health seems fair. -
July 3/ July 3/95. Wt 115 pbs. July 1/95. Patient is despondent & melancholy; at times, needs considerable
" 16 urging before eating - Bowels in good condition. July 16/95. Works some on ward: Goes out on the
" 25 grounds, every day. July 25/95. Is somewhat more cheerful of late. Appears to take much in-
- terest in the "Girls", frequently asking "how are all the girls?" (This seems to be his delusion) -
" 31 July 31/95. Remains about the same, day after day. Works some on ward. Health is fair.
Aug 5/ Aug 5/95. Wt 117 pbs. Aug 19/95. Remains steadily up on ward. Eats well: bowels in good condition. He is
" 21 generally quite dejected. Works on ward some. Goes out on grounds daily. Aug 21/95. Patient tried to
" 31 Escape while out walking this Am. Aug 31/95. Seems about the same, from day to day, "always asking to be Killed". Goes out on grounds daily. Habits are clean. Sept 5/95. Patient asks, continually,
Sep 5 "to be roasted"; requires continual attention while at meals, in order to get him to eat.
" 12/ Sept 12/95. Wt 119 pbs. Sept 20/95. Is quiet, although friendly & quite talkative. Works on ward
" 30 Sept 30/95. Seems to be doing nicely: Still holds to the idea that he should be "roasted": Requires much urging & at times there is much difficulty in getting him to eat. Still walks
Oct 10/ Oct 10/95. Wt (Dressed) 115 pbs. Oct 31/95: About same, for several months back. Still holds good.
30 (Carried to 91)

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Personal and Medical History of James Leach



Whole No. 3716.

Residence, 456. E. 6th St. St. Paul

Date Admission, 9th May 1894

Admitted by, D. Phelps Hour, 7

How Sent, John B. Oliver, J. & P. Co.

Sex, Male.

Age, 40.

Civil Condition, Married

Children, - 4 -

Age Youngest Child, —

Occupation, Laborer -

Degree Education, Probably limited

Profession Religion, Roman Catholic

Habits, Has been a drinker

Nativity, Ireland -

Physicians Committing, A. B. Ancker and J. M. H. Gravel

Correspondents, Wife Mrs. Mary Leach 456. E. 6th St. St. Paul.

Year, 256.

Relatives, Not known

Exciting, Sunstroke (in last Summer)

Predisposing, Previous attack.

Accompanying Bodily Disorder, None

Cut his throat with razor, Apl 13/94.

Of this Attack, First Symptoms about Oct 1893.

Has been insane for 2 years

No. of Attack, 1st (probably, Continuous).

No. of Admissions, 2nd

Age First Attack, about 37.

Time of Leaving, Sept. 16. 1898

Time in Hospital, 4yr. 4m. 7d

Result, Discharged Feb. 8. 1898 Unimproved.

EXAMINATION ON ADMISSION.

Exd. by Dr. Ely - May 17/94

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Not very quick

MEMORY:

Past Events, Poor

Recent Events, Poor

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

"Thinks he was crazy when here the other time" — Patient says "he cannot tell" to a good many questions asked him, when we are quite sure he could give information desired, if he wished.

EMOTIONAL STATE:

Normal, Calm, Normal & calm

Indifferent,

Exalted,

Depressed,

DELUSIONS: None noted

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Not very voluble

FORM NO. 3.

...D COUNTY HOSPITAL, ST. PAUL, MINN. Register No. 11165

...NICAL HISTORY SHEET.

Born in Ireland ... Discharged ... Eloped ... Died ... 189

RESIDENCE: 12 BUCKINGHAM Pl

Jas Leach,
In case of death Telegraph
Thos. Bunker,
Funeral Director.
73 W. SEVENTH STREET,
TELEPHONE 447-2, 1231
ST. PAUL, MINN.

...thyroid cartilage - DR. Ancker -

...r part of Larynx - so that at first he was ...d on swallowing, after tracheotomy had been ...erted, the ingested food would regurgitate and come out through the tube. When admitted he was well nourished and was able to walk. He obeyed all orders; but when his wound was dressed and he saw the razor he said he could not bear the sight of it. He tells me that he has not done much work for the past two years - because he did not like shoveling and that he could not get a job in the machine where he would like to work. He also states that he got into trouble with some of the boys but will not tell what the trouble was nor who the boys were. He says that they came after him and were going to send him to Rochester again - that he made it lively for some and made one man go down stairs pretty lively, that he'd rather kill himself than go back to Rochester and be locked up again. While here he has not shown any violence nor any inclination to disobey orders — But whenever he was questioned about his past life - he is always suspicious - that we are trying to find out something and send him back to the Asylum.

His wife tells me that he originally belonged to the Knights of Labor - and that he refused to work because he was afraid the Knights of Labor would kill him if he worked any.

April 13. 94 he was again summoned to court to be examined when he committed the violence on the jurors who tried to bring him to court, by striking them with chairs, threatening to shoot them and and finally had recourse to the use of the razor he carried with him - threatening to cut the throat of if he came near him but instead cut his own throat.

The wounds were sutured and closed by Dr Ancker and his mental condition improved after the tube was removed - but lately he is becoming more suspicious of all the movements the doctors do - and frequently asks what will they do with me? will they send me back? I am all right. I will not go back again

217

Personal and Medical History of James L...



Telegraph to him.

Whole No. 3716.

Residence, 486. E 6th St. St...

Date Admission, 9th May 1894

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

How Sent, John B. Olivier, J&P, C...

Sex, Male.

Age, 40

Civil Condition, married

Children, — 4 —

Age Youngest Child,

Occupation, Laborer —

Degree Education, probably limited

Profession Religion, Roman Catholic

Habits, Has been a drinker.

Nativity, Ireland —

Physicians Committing, A.B. Aneker and J.M. McGrael

Correspondents, (wife) Mrs. Mary Leach 486. E 6th St. St Paul.

...panying Bodily Disorder, None

...al or Not, Cut his throat with razor, Apl 13/94.

...f this Attack, first Symptoms about Oct 1893.

...on, Has been insane for 2 years

No. of Attack, 1st (probably, continuous).

No. of Admissions, 2nd

Age First Attack, about 37.

Time of Leaving, Sept. 16. 1898

Time in Hospital, Hyr. 4m. 7d

Result, Discharged Feb. 8. 98 Unimproved.

EXAMINATION ON ADMISSION.

Exd by Dr. Eby- May 17/94

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Not very quick

MEMORY:

Past Events, Poor

Recent Events, Poor

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Thinks he was crazy when here the other time" — Patient says "he cannot tell" to a good many questions asked him, when we are quite sure he could give information desired, if he wished.

EMOTIONAL STATE:

Normal, Calm, Normal & Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS: None noted

Systematized or Not,

Special Subjects,

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Not very voluble

FORM NO. 3.

No. ..... THE CITY AND COUNTY HOSPITAL, ST. PAUL, MINN. Register No. 11165

CLINICAL HISTORY SHEET.

James Leach Admitted 4/13/94 Born in Ireland 183 Discharged ..... Eloped ..... Died 189

DIAGNOSIS: Incised Wound of Thyroid Cartilage. DR. Ancker.

The wound severed upper part of Larynx - so that at first he was unable to speak and on swallowing, after tracheotomy had been inserted, the liquid food would regurgitate and come out through the tube. When admitted he was well nourished and was able to walk. He obeyed all orders; but when his wound was dressed and he saw the razor he said he could not bear the sight of it. He tells me that he has not done much work for the past two years - because he did not like shoveling and that he could not get a job in the machine where he would like to work. He also states that he got into trouble with some of the boys but will not tell what the trouble was nor who the boys were. He says that they came after him and were going to send him to Rochester again - that he made it lively for some and made one man go down stairs pretty lively, that he'd rather kill himself than go back to Rochester and be locked up again. While here he has not shown any violence nor any inclination to disobey orders — But whenever he was questioned about his past life - he is always suspicious - that we are trying to find out something and send him back to the Asylum.

His wife tells me that he originally belonged to the Knights of Labor - and that he refused to work because he was afraid the Knights of Labor would kill him if he worked any.

April 13 - 94 he was again summoned to court to be examined when he committed the violence on the jurors who tried to bring him to court, by striking them with chairs, threatening to shoot them and and finally had recourse to the use of the razor he carried with him - threatening to cut the throat of if he came near him but instead cut his own throat.

The wounds were sutured and closed by Dr Ancker and his mental condition improved after the tube was removed - but lately he is becoming more suspicious of all the movements the doctors do - and frequently asks what will they do with me? will they send me back? I am all right. I will not go back again

THE CITY AND COUNTY HOSPITAL, ST. PAUL, MINN.

Name,
No.
Admitted,
Dr.

Interne,
Nurse,
Operation
Termination.

YEAR Month	YEAR Day	BOWELS Condition Character of Stools, etc	BOWELS No. of Movements Daily	URINE Frequency Reaction, Color, Sp. Grav. Etc.	URINE Daily Amt Pints	DIGESTION Appetite Vomiting Etc.	STIMULANTS Whisky, Beer, Wine Egg Nog, etc.	DIET FULL, LIGHT, MIXED, MILK	MEDICAMENT DIRECTIONS, ETC.	Date Prescribed	Date Discontinued	Prescription No.
									Admitted to Hosp. 6/11/3-94 Labora. & Exam. Mrs Mary Leach 486 E 6th St.			

Personal and Medical History of James Leach

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6½ WEIGHT, 137½ pds NUTRITION, Fair.

WOUNDS OR ABNORMALITIES, (See attached slip & particulars)

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

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Yes

SIGHT, Some impairment

HEARING, Impaired

COORDINATION, Arms, Some incoordination. Finger & nose, eyes shut; Cannot strike accurately.

Legs, Standing, eyes shut, Stands firmly

TREMORS, Hands, slight Tongue, slight

Facial Muscles, none General, none

REFLEXES, Patellar, Equal – about 7 –

Other Reflexes,

ARTICULATION, Hesitating, ~ Slurred,

FACIAL EXPRESSION, somewhat blank. –

SENSIBILITY, ~

HEART, Sounds not very distinct; no murmurs. –

LUNGS, Sounds good –

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Records left 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,") Can get no history of any hereditary tendency – patient says he does not know.

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of James Leach

EBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy Sheriff M. N. Goss, with the following history. This is his 2d admission here (see note below*); he has been a drinker; there is no history of heredity; cause of attack not given, though in his first commitment it was stated to be sunstroke. Form of attack is phrenic, depressed; no accompanying bodily disorder mentioned; this is probably 1st attack, [illegible]; first symptoms manifested about October 1894; he has been insane for 2 years; was sent to this (Rochester) hospital March 23/93, & discharged Nov 11/93. Insanity is now manifested by his being suspicious of everyone; he believes persons are pursuing him, with evil intent. Homicidal; cut his throat with a razor Apl 13th 1894; has been under treatment at C & C hospital, St Paul, until today. No peculiarities &c were shown previous to symptoms appearing; there is no history of any severe disease &c. Information of insanity had been filed against him the day he cut his throat & it was when the Sheriff was about to serve the papers on him, that he attempted suicide. His wife says she is in mortal fear of him & that she believes that if he is at large, he will kill either her or himself. ——

*Note — Patient was here before, from Mar 23/93 to May 28/93. During the early part of that stay he was very quiet & well-behaved. Spent a good deal of his time in wandering aimlessly about the hall; talked some with his fellow-patients; answered physicians' greetings pleasantly, but, otherwise, had but little to say to them. Did not give expressions to delusions or hallucinations. Later, however, showed that he held delusions regarding the Knights of Labor &c, seemed to think his trouble came through them. Received a visit from his wife, while there. Continued quiet and well-behaved. Eloped (May 28/93) & arrived safely at home, where relatives wrote that they would keep him there on trial. (See Vol 23. page 105. No 3303). —— —

May 9 On admission, was put on 13th (S.R. Complexion dark; hair dark; eyes light blue; condition of skin good; has a mark on right side of abdomen; a scar on neck & one on top of head; 3 vaccination marks: bodily condition clean: no bodily peculiarities noted. Behavior is good). Pulse 100. R 20. Tr 99.6. (taken on the ward).
" 10 May 10/94. Slept 7 hours last night; restless for only an hour or so. AM. Pulse 106. R 20. Tr 99.8. Appetite fairly good. Behavior also good: seems to be "quite at home". Talks, when questioned, in a low tone.
" 11 No cough observed. PM. Pulse 108. R. 18. Tr 99.4. No complaints or injuries to report. May 11/94. Again rested fairly well, last night, sleeping 7 hours. AM. Pulse 102. R 18. Tr 98.8. Behaves well; appetite
" 12 good; makes no complaints. PM. Pulse 100. R. 17. Tr 99. May 12/94. Has restful, & slept 8 hours, last night. AM. Pulse 100. R. 17. Tr 98.6. Continues quiet & well behaved. Does not go out walking,
" 13 as he says he is afraid he will catch cold in his neck. PM. P 104. R 20. Tr 99.2. May 13/94. Again slept well, last night. AM. Pulse 94. Talks freely; makes no complaints. Went out walking, today.
" 14/16 May 14/94. AM. Pulse 90. May 15/94. AM. Pulse 86. May 16/94. Has continued to rest well, at night. AM. Pulse 84. Always quiet & well-behaved. Talks some. Keeps with the work on ward.
" 23 May 23/94. During this 2nd week, patient has continued to rest and sleep well, at night (about 8 hours, each). Appetite has been fairly good; bowels free; pulse has ranged from 88 to 80 (now). Has talked quite freely, when addressed. On admission, complained of feeling somewhat weak: was, also, somewhat depressed. Has been working some on the ward. Walks out regularly. Seems quite contented here. -
" 31 May 31/94. Has not changed much, if any, since last note. Is quiet & well-behaved: seems to be much depressed, at times. Talks quite freely; makes no complaints. Works some on the ward.
June 2/3 June 1/94. Wt 139 pds. Pulse 88. June 8/94. Appetite somewhat poor, today. Seems discontented.
" 11/23 June 11/94. Made an attempt to run away, while out for a walk, today. June 23/94. Patient's

Personal and Medical History of James Leach

1894

June 28 appetite is poor & he has eaten but little for the past week. June 26/94. Fed by the tube, today.
" 29/30 June 29/94. Made preparations for feeding him by tube today, when he drank some milk. June 30/94. Again refusing food, today. Evidently has delusions: also seems much depressed, & discontented. —
July 2 July 2/94. Was fed by the nurse, today. Wt 130 pds (has lost quite decidedly in flesh, the past month).
" 3 July 3/94. Was taken out, with several other patients, this evening, to witness the fireworks &c - He watched for an opportunity, and made his escape. Diligent search was made but without avail.
" 10 July 10/94. Word was received that patient had arrived safely at home; but as he was not considered well enough to be allowed to remain there, he was sent for & brought back this evening (by the Head Nurse) —
" 13 Feet were found to be swollen from his long walking - Refused his supper. July 13/94. Patient has eaten nothing
" 15 since brought back. Was fed by the nurse, today. July 16/94. Appetite continues very poor. ——
" 18/22 July 18/94. Is now eating fairly well. July 25/94. Refusing food today; had to be fed by the tube. ——
" 31 Tried, again, to escape today: took off his clothes & started to run. July 31/94. During the last 6 Days, patient has again been refusing food & has had to be fed by the nurse. Is quite "cranky", at times. Depressed; "wants to die" - Walks out daily, but has to be very closely watched - Physical condition seems failing -
Aug 2/10 Aug 2/94. Wt 119½ pds. (has lost 10½ pds in flesh, the past month). Pulse 72. Aug 10/94. Tried to
" 24 Escape today by taking off his clothes & attempting to run - Aug 24/94. Visited by a priest, today.
" 31 Aug 31/94. During the whole of this month, also, patient has persistently refused food & has had to be fed by the nurse - Still says "he wants to die" - Mental condition does not improve any. -
Sep 1 Sep 1/94. Wt 117 pds (another slight loss); Pulse 79. Refused to eat & had to be fed by the nurse -
" 2/4 Sep 2/94. Ate a good breakfast & supper, today. Sep 4/94. Appetite is now improving. —
" 20 He sleeps well - Bowels regular. Sep 20/94. Appetite quite fair. Pulse 82. Sleeps well. Is on
" 30 medicine - Sep 30/94. Sleeps well, at night - Behavior is good. Appetite changeable; -
bowels regular. Is very melancholy, at times. Mental condition does not change any-
Oct 1/31 Oct 1/94. Wt 124 pds (is regaining some of his lost flesh). Pulse 66. Oct 31/94. At times, he
Eats a fair meal; sometimes, does not eat at all. Talks freely, at times, but
evidently still holds to his delusions - Very melancholy & depressed - Off on medicine
Nov 1 Nov 1/94. Wt 124 pds. Pulse 76. Dec 1/94. Wt 122 pds. Pulse 76. Physical health seems good.
Dec 15 Jany 2/95. Wt 126½ " " 80. Jany 31/95. Appetite is changeable; he is depressed & somewhat
Jan 31 stupid. Talks quite freely, at times. Reads some. Habits clean. Does a very little work. —
Feb 1 Feb 1/95. Wt 128 pds. P 72. March 2/95. Wt 124 pds. P 64. April 1/95. Wt 124 pds. Pulse 74. —
to April 30 April 30/95. No special change. Behavior good. He is depressed: stands about in rather a stupid
manner. Reads some. Talks but little. Appetite fairly good. Bowels free. Habits are clean.
May 2/31 May 2/95. Wt 127½ pds. P 62. May 31/95. Works some: is melancholy: talks but little: Goes walking:
June 1/30 makes no complaints. June 1/95. Wt 136 pds (has been gaining in flesh); P 88. June 8/95: Was
visited by wife, today. June 30/95. Keeps about the same, all the time. Melancholy & depressed.
July 1/31 July 1/95. Wt 130 pds. Pulse 86. July 31/95. Condition unchanged: Health seems good -
Aug 2/31 Aug 2/95. Wt 130 - - 86 - Aug 31/95. Inclined to be melancholy: quiet: Habits clean.
Sep 2/30 Sept 2/95. Wt 126 " " 86. Sep 30/95. Keeps about same, from month to month.
Oct 1/31 Oct 1/95. Wt 127 " " 68. Oct 31/95. No special change. (N.B. Note. Seems more
cheerful than formerly) —

(carried to Vol 25)

Personal and Medical History of Gust Dohling

EMBURY, FISCHER & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3718.

Residence, Poor Farm, Dakota County.

Date Admission, 11th May 1894.

Admitted by, Dr Phelps — Hour, 4 P.M.

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

Sex, Male.

Age, 20 years

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, Laborer

Degree Education,

Profession Religion, Yes, Lutheran

Habits, Temperate and mora

Nativity, Germany —

Physicians Committing, H. VanBeeck & A.A. Finch

Correspondents, Geo. Hetherington, Chairman Dakota Co. Hastings Minn Commissioners



No. for Year, 288

Insane Relatives, None known of

Cause Exciting, not known

Cause Predisposing, not known

Form,

Accompanying Bodily Disorder, none mentioned

Suicidal or Not, not

Date of this Attack, 27th Jany 1893.

Duration, 1 Year & 3½ months

No. of Attack, 1st (probably Continuous)

No. of Admissions, 2nd

Age First Attack, about 19 years.

Time of Leaving, 21st May 1896.

Time in Hospital, 2 years & 10 Days —

Result, Died: Cause, Marasmus.

Archives Chds: Kaan. Cagan Town. Nan Kommunal. Dakota Co. Minn.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by Dr Herzog - May 12/94.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, } 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,

GENERAL DESCRIPTIVE REMARKS:

Irascible, talkative & difficult to manage. He is slightly demented & silly.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Slightly

Depressed,

DELUSIONS:

Systematized or Not,

Special Subjects, None

Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Incoherent

Voluble or Reticent, Voluble

Personal and Medical History of Gust Dohling

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7½ WEIGHT, 140 lbs. NUTRITION, Fair.

WOUNDS OR ABNORMALITIES, ✓

TONGUE, Tremors, Slight Coatings, grayish in Centre Promptness Movement, prompt

PUPILS, Equality, Yes Size, Slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, Seems good

HEARING, " "

COORDINATION, Arms, good; fingers touch, eyes shut, good.

Legs, fair; Standing on foot, fair; Standing, eyes shut, Good.

TREMORS, Hands, None Tongue, Slight

Facial Muscles, None General, None

REFLEXES, Patellar, — 5 — Equal —

Other Reflexes,

ARTICULATION, Hesitating, Foreign accent Slurred,

FACIAL EXPRESSION, Dull

SENSIBILITY, ✓

HEART, Seems good

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,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

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

Mother or Mat. Relations, Mother was epileptic —

Father or Pat. Relations, 56 — good health —

Brothers or Sisters, no history —

Personal and Medical History of Gust Dohling

1894

BRIGHT, PIOLA & CHAMBERS, DAVENPORT, IOWA

This man was brought here by a Deputy-Sheriff, with the following history. (This is his 2nd admission here). Habits are temperate & moral; no history of heredity known of. Cause of attack is not known; form is chronic. No accompanying bodily disorder mentioned. First symptoms of disease were manifested in January 1893, by vomiting, dizziness, lack of muscular force; condition is - - creasing every day. This is probably the 1st attack (Continuous). Severity of attack continued about six months from Jany 27/93. Insanity is now shown by rapid, incoherent talk; is not able to confine himself to questions asked; boyish behavior. Patient is not dis'posed to injure others, nor suicidal, nor filthy nor destructive. Has not been subject to any bodily disease or ser head injury that can be discovered. This time, has not had any more than a short course of tonic-treatment by Dr. H.A. Finch; no effect. —

Note — This patient was here before, from 20th October 1893, to March 27/94, when he was taken out by his brother, on trial. At time of his then coming, was in a stuporous condition; a semi-cataleptic state; could not be examined as to his mental characteristics, as he would not talk at all, & no particulars whatever could be obtained from him. Had no desire for food & liquids had to be forced down his throat. Bowels were badly constipated almost during the whole of his stay. This condition was maintained until about the middle of December, when he changed some; grew, slowly, more active, & was even somewhat noisy, in a sluggish way; lost considerably in flesh; during last 2 weeks of January '94, appetite improved much & he began to eat well. Physical condition also improved quite markedly. Behavior was good, though, at times, pugilistic. During February, improvement kept up, to a certain extent; to talked freely, easily, though mind seemed somewhat clouded; he became more cleanly in habits; also gained in weight. As time went by, his disposition changed; he became bad-tempered, obstinate, and difficult to manage; mental condition however, was much improved; he talked freely & rationally and was about in this state, when taken home. (for further details, see Vol 25 page 177. No 3522.)

May 11 — On admission, was put on 18th (SR Complexion light; hair dark brown; eyes blue; condition of skin, clean; no marks or scars noted. Behavior good). May 12/94. Slept 7 hours, restless about 2 hours, last night. — AM. Pulse 76. R 21. T 99.0. Appetite good; bowels regular; no cough observed. Behaves well. Talks freely, but unconnectedly; has habit of wheeling round, when walking; no complaints or injuries to report.

" 13 — May 13/94. Restful, sleeping 7 hours, last night. AM. Pulse 90 (after working). R 22. T 98 6/10ths. no cough observed; behaves well; talks freely, but in a rambling manner. No complaints or injuries to report.

" 14 — May 14/94. Was restless for 4 hours, slept 5 hours, last night. AM. Pulse 80. R 21. T 98 5/10ths. Appetite good; bowels regular; is well-behaved, but inclined to be quarrelsome. Talks freely & rationally. —

" 15 — May 15/94. Slept well, last night, though somewhat restless for a couple of hours. AM. P 70 R 22 T 98 2/5 Is well behaved, though "flighty" & rather troublesome, at times. Talks freely, but without thought. Makes

" 16 — no complaints. Bowels regular. May 16/94. Slept 6 hours, last night; was restless for 3 hours or so. AM. Pulse 112. R 23. Wishes privileges beyond the other patients; if refused becomes impertinent and

" 17 — insolent. Talk is still very disconnected, at times. May 17/94. Slept somewhat better (7 hours) last night; slightly restless a couple of hours. AM. Pulse 88. R 23. Appetite good; bowels regular. Behavior good, at times; but he is often insolent & self-assertive. Talks freely but disconnectedly.

" 18 — Complains, today, of pain in ear & tooth. May 18/94. Passed a fairly restful night, sleeping 7 hours. AM. Pulse 78. R 23. Is insolent & overbearing in his talk. Is also inclined to be quarrelsome.

" 25 — May 25/94. During this, the 2nd week of his present stay, patient, nightly, has been somewhat

Personal and Medical History of Gust Dohling

1894

May 25 (cont'd) — restless for an hour or so, but usually sleeping 7 to 8 hours, each night. Pulse, taken each morning during the past week, has ranged from 80 to 95. Appetite has been good & bowels regular. In behavior, he has been turbulent & disobedient; irritating in manner; wanting a good deal of his own way; quarrelsome & even pugnacious, at times. He talks freely; sometimes sensibly & at others quite irrationally & in a rambling manner. Respiration & temperature have ranged about normal, but his pulse has been abnormally high. Mentally, he appears to have no delusions & it is only by a rambling & incoherent manner of speech, together with the habit of turning round, while going to any place, that mental impairment is shown. Physical health is good. —

" 31 — May 31/94. No special change to report, since last note. Patient is very cleanly in his habits.

June 1/94 — June 1/94. Diff 137 pos. Pulse 70. June 2/94. Bowels somewhat out of order; remains in bed, this date.

" 3 — June 3/94. Appetite continues good; bowels regular. Physical health appears good. Mentally, no change is noted. —

July 2/94 — July 2/94. Not 137 pos. Pulse 70. July 10/94. Patient, today, complained of being sick, with pains in breast and abdomen, accompanied with flatulency. Remained in bed and took no breakfast. —

" 12 — July 12/94. Patient still in bed; sick, and apparently falling into his former stuporous state. He takes

" 13 — very little nourishment; even shows a disinclination for food. Pulse 54. R 24. T 98 1/5. July 13/94. Still in

" 14 — bed. Pulse 50. R 25. T 98. July 14/94. Refuses food; takes a little milk. Pulse 55. R 22. T 98 —

" 15/20 — July 15/94. Takes scarcely any nourishment - Pulse 52. R 19. July 20/94. During past 4 days, there is very little change noticed in patient, except that he is growing weaker. He has taken only about a pint of milk a day; no solid food. Pulse 58. R 22. Was, today, transferred to C2 the "Sick ward". —

" 21 — Put to bed there. Semi-stuporous condition; groaning slightly, at times. 6 Pm. Is vomiting - 7 Pm. Drank about a quart of milk. July 21/94. Slept scarcely any, last night; was very noisy; also slightly noisy, part

" 22 — of this afternoon - Was fed, by nurse, one quart of milk, at each meal, today. July 22/94. Drank a

" 23 — quart of milk, at each meal, today. Bowels costive; was given salts. July 23/94. Fed today, by nurse, a quart of milk, at each meal. Bowels still constipated. Given another dose of salts.

" 24 — July 24/94. Moaned some in his sleep, last night. 7 Am. Was given enema. Bowels afterward moved. -

" 25 — July 25/94. Had slight nose-bleed, during the night. Was fed a quart of milk this morning (at 6:30) -

" 31 — July 31/94. He is still confined to bed; lies there in the same position, from hour to hour, unless moved by nurse. Bowels, as a rule, constipated & require frequent enemata. Still has to be fed by nurse, daily. — At times, breathes very hard; also moans in his sleep. (see attached record of nurse). ———

Augst — Augst/94. Fed still by the nurse; at each meal, 1 quart of milk. Skin on back is very tender; with

" 8 — appearance of bed-sore starting. Augst/94. Lies steadily in bed in a state of stupor (cataleptic)

" 14 — Augst/94. Is growing a great deal today. At times has appeared as if he was going to talk —

" 31 — Aug 31/94. Patient still lies in bed in a cataleptic state. Is fed 3 times daily, by the nurse, & takes a reasonable amount of nourishment - Bowels of late have been moving quite freely — Condition of patient does not seem to change any from day to day. (See record attached) -

Sep 1/15 — Sep 1/94. Not (in rectum) 105 pos - Sep 15/94. Patient lies steadily in bed & remains in about the same condition as above described. Takes a reasonable amount of nourishment, being fed by the nurse, about 3 pints of milk, 3 times a day. Bowels moved fairly freely - Lies in the one position continually, unless moved by the nurse - At times, groans and

" 20 — is noisy during the night. Soils, and passes his urine in, the bed. Sep 20/94 - Patient

(carried to page 140)

Personal and Medical History of Richard McCarthy

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3721.
Residence, Cor. Marshall & Victoria St. St. Paul
Date Admission, 11th May 1894
Admitted by, Dr Phelps Hour, 7 PM
How Sent, John B. Oliver, Jof P. Ramsey County
Sex, Male
Age, 35 Years
Civil Condition, Married
Children, — 5 —
Age Youngest Child, —
Occupation, Carpenter
Degree Education, not given
Profession Religion, Church-member
Habits, Temperate —
Nativity, U. S.
Physicians Committing, W. D. Kelly and Arno Martel
Correspondents, Relatives (wife) Cor. Victoria & Marshall Sts St. Paul.

No. for Year, 291.
Insane Relatives, none
Cause Exciting, Syphilis
Cause Predisposing, not stated.
Form,
Accompanying Bodily Disorder, as above & Paralysis.
Suicidal or Not, not.
Date of this Attack, Probably about a Year ago
Duration, Probably about a Year
No. of Attack, Not 1st
No. of Admissions, 1st
Age First Attack, 34 probably.
Time of Leaving, May 20 94
Time in Hospital, 9 ds.
Result, Improved

EXAMINATION ON ADMISSION.

Early D. Herzog, May 12/94.

MENTAL CHARACTERISTICS.

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

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

Continued

He is now somewhat confused, mentally, with poor memory and suspicions of the fidelity of his wife, whom he believes she in leagued with the former Superintendent of the Cable-Lines of St. Paul (her alleged Paramour), to cheat him out of rights in a patent which he claims to have taken out. He is able to illustrate the idea of this invention quite clearly.

GENERAL DESCRIPTI

Has 5 superficial integumental scars (circular) on left leg, at knee, & 2, on right leg. These scars appear specific. Before the ulcers appeared, he felt through a bridge abading the shin. This was 6 years ago. Four years ago, he had a paralytic attack, preceded by severe headache, worse at night, for one year. This attack confined him to bed for 3 months, during which time he was aphasic & has no recollection of the time spent abed. The headache returned soon after going to work again & 3 months later had a recent attack. This occurred in Nov/90. He was unconscious & shut time & lay abed during the winter. Partially paralyzed on left side. He now has a hoarse voice & hesitates in his speech somewhat like a paretic. He is subject to attacks of dizziness & a blur before the eyes as suddenly rising. These symptoms have been present since first paralytic attack.

Personal and Medical History of Richard McCarthy

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet WEIGHT, 174 lbs NUTRITION, Good.
WOUNDS OR ABNORMALITIES, 2 scars on L leg from bubo of which patient states he has had 5 sequies. all knowledge Chancroidal; multiple scars in left groin, apparently
TONGUE, Tremors, Yes, coarse & fine Coatings, grayish in dorsum Promptness Movement, Slow.
PUPILS, Equality, Yes Size, Normal
Response Light, Normal Accommodation, "
SIGHT, Seems good; (see note).
HEARING, " "
COORDINATION, Arms, Good; finger & nose, eyes shut, Good.
Legs, somewhat impaired; Standing in front good; Standing, eyes shut, Sways some. Patient states he noticed difficulty in walking while playing.
TREMORS, Hands, none Tongue, Yes
Facial Muscles, None General, none
REFLEXES, Patellar, Equal — 9 — Dr P. scale —
Other Reflexes, Marked ankle clonus, right; Slight, of left.
ARTICULATION, Hesitating, Yes Slurred,
FACIAL EXPRESSION, Somewhat dull
SENSIBILITY, —
HEART, Seems good
LUNGS, " "
EXAM. URINE.

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, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died at age of 50, of organic heart lesion
Father or Pat. Relations, Father living — 75 — good health.
Brothers or Sisters, one brother inebriate —

Personal and Medical History of Richard McCarthy

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3721.
Residence, Cor. Marshall & Victoria St. St. Paul
Date Admission, 11th May 1894
Admitted by, Dr. Phelps Hour, 7 PM
How Sent, John B. Olivier, Jof P. Ramsey County
Sex, Male
Age, 35 Years
Civil Condition, Married
Children, — 5 —
Age Youngest Child, —
Occupation, Carpenter
Degree Education, not given
Profession Religion, Church-member
Habits, Temperate —
Nativity, U.S.
Physicians Committing, W. D. Kelly and Arn Martel
Correspondents, (relatives (wife)) Cor. Victoria & Marshall St. St. Paul.

No. for Year, 291.
Insane Relatives, none
Cause Exciting, Syphilis
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, as above & paralysis.
Suicidal or Not, not.
Date of this Attack, Probably about a Year ago
Duration, Probably about a Year
No. of Attack, not 1st
No. of Admissions, 1st
Age First Attack, 34 probably.
Time of Leaving, May 20. 94
Time in Hospital, 9 dys.
Result, Improved

EXAMINATION ON ADMISSION.

Early D. Herzog, May 12/94. MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Poor
Recent Events, Fair
Special Subjects, (see note)

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

REASONING POWER:
Ordinary Subjects, Seems good
Own Mental State, " "
Special Subjects,

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

DELUSIONS:
Systematized or Not, Systematized — of persecution
Special Subjects,
Transitory or Not,

HALLUCINATIONS: No

ILLUSIONS: No

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Fairly voluble

GENERAL DESCRIPTIVE REMARKS:

Has 5 superficial integumental scars (circular) on left leg, at knee, & 2, on right leg. These scars appear specific. Before the ulcers appeared he feels things like a bridge about the shin. This was 6 years ago. Four years ago, he had a paralytic attack, preceded by severe headache worse at night, for one year. This attack confined him to bed for 3 months, during which time he was aphasic & has no recollection of the time spent abed. The headache returned soon after going to work again & 3 months later had a recent attack. This occurred in Nov/90. He was unconscious & shut time & lay abed during the month. Partially paralyzed on left side. He now has a hoarse voice & hesitates in his speech somewhat like a paretic. He is subject to attacks of dizziness & a blur before the eyes as need only rising. These symptoms have been present since first paralytic attack.

Personal and Medical History of Richard McCarthy

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet WEIGHT, 174 lbs NUTRITION, Good.
WOUNDS OR ABNORMALITIES, 2 scars on glans penis, apparently Chancroidal, multiple scars in left groin, apparently from bubo of which patient denies all knowledge
TONGUE, Tremors, Yes, Coarse & fine Coatings, Grayish in Centre Promptness Movement, Slow.
PUPILS, Equality, Yes Size, Normal
Response Light, Normal Accommodation, "
SIGHT, Seems good; (see note).
HEARING, " "
COORDINATION, Arms, Good; Finger to nose, eyes shut, Good.
Legs, Somewhat impaired; Standing on front good; Standing, eyes shut, Sways some. Patient states he noticed difficulty in walking while plowing.
TREMORS, Hands, None Tongue, Yes
Facial Muscles, None General, None
REFLEXES, Patellar, Equal — q — Dr. P's scale —
Other Reflexes, Marked ankle clonus, right; Slight, of left.
ARTICULATION, Hesitating, Yes Slurred,
FACIAL EXPRESSION, Somewhat dull
SENSIBILITY, —
HEART, Seems good
LUNGS, " "
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, ar,
APPETITE, Good, Medium,
SLEEP, Good, lar,
PULSE, P.,
CRANIAL MEASUREMENT

HISTORICAL.

LENGTH OF INVASION, N,
ONSET GRADUAL OR SUDDEN

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, Mother died at age of 50, of organic heart lesion
Father or Pat. Relations, Father living — 75 — good health.
Brothers or Sisters, one brother inebriate —

Personal and Medical History of Richard McCarthy

1894

HERBERT, VIOLAN & CHAMBERS, DAVENPORT, IOWA

Was brought here by Deputy-Sheriff M. K. Goss, with the following history. Habits are temperate. There is no history of heredity. Supposed cause of this attack is Syphilis: form of attack, depressed; — first symptoms were manifested by paralysis; has had attacks of this sort, from time to time, for past year. Insanity now shows by delusions of persecution. Is dis posed to injure others. Is not suicidal, nor of filthy or destructive habits. No peculiarities of word previously shown. Patient has a scar on leg. He has not been restrained or confined. Has been treated by Dr. Kelly for Syphilis, for a year. —

May 11 On admission, was put on 15th (S.R. Complexion light; hair dark brown; eyes light gray; condition of skin good; bodily condition clean; behavior good). May 11/94. Was restless a couple of hours, last night but slept 7 hours. Tem. Pulse 78. R 22. Tem 98 5/10. Appetite fair; bowels regular; no cough noticed. He behaves well. Talk is rambling & disconnected. He does not seem to know much. No complaints or injuries.

" 13 May 13/94. Restless 2 hours, but slept 7 hours, last night. Tem. Pulse 86. R 20. Tem 98 3/10. Appetite medium;

" 14 bowels regular. Behavior good. Talk is rambling & delusive. May 14/94. Was restless 4 hours, sleeping only about 5 hours, last night. Tem. Pulse 96. R 21. Tem 98.6. Appetite improving; Continues quietly

" 15 behaved; talks sensibly, but, at times, a little incoherently. May 15/94. Slept 6 hours; restless 3 hours, last night. Tem. Pulse 96. R 20. Tem 99°. Talks irrelevantly; also shows some hesitancy in his speech.

" 16 May 16/94. Passed last night about as the preceding one. Tem. Pulse 92. R 19. Appetite only fair. Is well

" 17 behaved. Makes no complaints. May 17/94. Slept a little better last night (7 hours); restless a couple of hours. Tem. Pulse 98. R 21. Talks with a stutter & in a low tone of voice. Is vague & hesitating in his remarks. Appetite good, but bowels are somewhat Constipated. Continues quiet and well-behaved.

" 18 May 18/94. Restless a couple of hours, but slept 7 hours, last night. Tem. Pulse 84. R 22. Bowels are more

" 19 regular, today. May 19/94. Rested fairly well, sleeping 7 hours, last night. Tem. Pulse 82. R 21. —

" 20 May 20/94. Again slept fairly well, last night. Tem. Pulse 114. R 19. Has continued quiet and well-behaved. Appetite is good; bowels regular. Still shows some hesitancy in speech: also manifests delusions. Has gone out walking with the rest. Today, while out in the grove, patient Eloped. A diligent search was made for him but without avail. ——

Subsequently, relatives entered into correspondence with authorities here regarding patient, and he was, at their request, discharged at a meeting of Trustees, July 6/94.

— Discharged —

Personal and Medical History of Carl Liverson

From 1894

June 13/15 Anal. June 13/94. Was very restless, last night. June 15/94. Very restless, all night; would not

" 16 stay in bed: slept about 3 hours, on the floor. 8.30 Am. Bowels moved. 10 Am. Was visited by a friend.
Patient has been quite restless all day; would not stay in bed; ate very little. June 16/94. Was out

" 17 of bed, mostly all night. 8 Am. Bowels moved. 12 M. Has been wild all morning, crawling about floor
& room and diving under bed - Had to be locked in his room. June 17/94. Has been out of bed, all night -

" 18 would not leave any clothes on - Slept about 2 hours on the floor. 9 Am. Jacket was put on patient.
He takes but little nourishment. July 18/94. 3 Am. Very restless & struggling to get out of restraint.
Refused medicine; has been very restless all day - Is still in restraint; 5.30 Pm. Persuaded, with

" 19 difficulty, to drink one glass of milk. June 19/94. 1 Am. Bowels moved. He has been very
restless, at times; tried very hard to get out of restraint - Refused breakfast, dinner, also medicine -

" 20 2 Pm - Bowels moved. 6.30 Pm. Fed one quart of milk, by the tube - June 20/94. Still fed by tube.

" 21 June 21/94. 7.30 Am. Fed 1 quart of milk, by tube. 6 Pm. He was not fed, nurses were unable to

" 22/23 pass tube on him. June 22/94. Still fed milk, by the tube. June 23/94. Still has to be fed;
no movement of the bowels, for some days. 8.15 Am. Was taken out of restraint & put in seclusion.

" 24/25 June 24/94. Fed, by tube, twice today; one pint of milk each time. June 25/94. Fed twice today.
Was in seclusion from 9 Am till 5.30 Pm. Bowels moved 3 times today. He still has to be fed.

" 26/28 June 26/94. Secluded at 7 Am. 8.15 Am. Bowels moved. June 28/94. Bowels moved in morning;

" 29/30 again, in afternoon - June 29/94. Had a passage during the night - June 30/94. Patient is
still confined to his bed, but with difficulty - He still refuses food & is fed, by the tube, twice daily -
(See attached Case-records, for more full details of this case) — Wt 111 pds (has lost markedly) -

July 15 July 15/94. Patient is still confined to his bed; with difficult kept there, at times. Sleeps poorly, at night;
only about 3½ hours, in the average. Is frequently up & about his room. Some days, appears more stupid than
usual; also weaker. Has had to be put in seclusion, also in restraint; has to be fed daily by the nurses;
(and by the tube); bowels move fairly freely; has some bed sores; quite a bad one on the left hip. —

" 31 July 31/94. Still in bed; is very restless, at times. Lies in a stupid condition, though, occasionally, brightens
up some. Sleeps poorly. Still has to be fed, daily, by the tube. Is still troubled with bed-sores. —

Aug 1/3 Aug 1/94. Bunch forming on hip, with appearance of a boil. Aug 2/94. Wt 110 pounds.

" 3/4 Aug 3/94. Had quite a hard "Coughing Spell" about 3 PM. Aug 4/94. Coughed considerably,
during the night. Was very restless; would not keep his clothes on. 5 PM. Bowels moved.

" 5 Aug 5/94. Bowels moved, during the night. 7.30 Am. Given bath: appears quite weak, today; more

" 6 so than usual. Aug 6/94. Had 2 or 3 "Coughing Spells" today. Bowels moved very freely
during the night. Aug 8/94. Continues to be fed 3 quarts of milk daily, by the tube. —

" 11/12 Aug 11/94. Appears brighter than usual, today. Aug 12/94. Drank his milk today, without
" 13 aid of tube; also talked some. Aug 13/94. Coughed considerably during the night. Had a
passage. Swelling on hip burst & discharged about 4 oz of pus. Again drank milk

" 14 without aid of tube, today. Aug 14/94. Last night, he coughed considerably. —
Patient appears much brighter, of late, & seems to be improving somewhat.

" 15 Takes about 3 quarts of milk daily. Aug 15/94. Was given sponge-bath.

" 16 Bedsores seem about the same; are dressed daily. Aug 16/94. Coughed a great

" 17 deal during the night. Appears to be failing. Aug 17/94. Seems quite weak.

(carried to 91)

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Personal and Medical History of John Vigeland

EBERT, FIGLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3722.
Residence, Newburg, Minn
Date Admission, 15th May 1894.
Admitted by, Dr. Eby Hour, 3 PM
How Sent, E.V. Farrington, Jof P. Fillmore County
Sex, Male
Age, 74 Years
Civil Condition, married
Children, Four —
Age Youngest Child, —
Occupation, Farmer
Degree Education, not given
Profession Religion, Is a church member
Habits, Good, so far as known
Nativity, Norway. —
Physicians Committing, J.A. Phelps and G.A. Love
Correspondents, Hans Olson
Hampton Newry Iowa, Minn

No. for Year, 292.
Insane Relatives, as to heredity, not known.
Cause Exciting, not known
Cause Predisposing, "chronic"
Form,
Accompanying Bodily Disorder, blind for 2 years.
Suicidal or Not, Very suicidal.
Date of this Attack, probably 2 years ago
Duration, probably 2 years
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 72 (?) —
Time of Leaving, 18th May 1894
Time in Hospital, 3 days
Result, Died. Cause Heart failure.

EXAMINATION ON ADMISSION.

Notes by Dr. Eby May 19/94.

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,

no special examination was made

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

GENERAL DESCRIPTIVE REMARKS:
Patient was in a rather weak condition on his admission, was put to bed & seemed to be getting along quite well, when, one evening, he was found in a very low condition and died shortly afterward. He did not talk English & a satisfactory examination could not be made.

Person

HEIGHT,
WOUNDS OI
TONGUE, Tr
PUPILS, Equ
Res
SIGHT,
HEARING,
COORDINAT
TREMORS,
F
REFLEXES,
ARTICULAT
FACIAL EXI
SENSIBILIT
HEART,
LUNGS,
EXAM. URIN
OPHTHALMO
HABITS, Dir
BOWELS, No
APPETITE,
SLEEP, Good
PULSE,
CRANIAL M

State of Minnesota
ROCHESTER STATE HOSPITAL
2110 EAST CENTER STREET
ROCHESTER, MINNESOTA 55901

April 16, 1982

Re: John Vigeland

Mrs. Dean Vigeland
Route 2, Box 18
Hayfield, Minnesota 55940

Dear Mrs. Vigeland:

This is in reply to your letter dated April 14, 1982 regarding Mr. John Vigeland.

The following information was obtained from his hospital records:

Residence: Newburg, Minnesota

Admitted to Rochester State Hospital: 5-15-94

Died at the Rochester State Hospital: 5-18-94

Committed: From Fillmore County Court on 5-15-94 as Mentally Ill.

Occupation: Farmer

Age on Admission to Rochester State Hospital: 74

Cause of Death: Heart Failure

Nativity: Norway

Marital Status: Married. Four children.

Sincerely,

Francis A Tyce

F. A. Tyce, M.D.
Medical Director & Chief
Executive Officer

FAT:gb

"AN EQUAL OPPORTUNITY EMPLOYER"

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,

HERBERT, FISCAR & CHAMBERS, DAVENPORT, IOWA

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Route 2 Box 18
Hayfield, Mn. 55940
April 14, 1982

Rochester State Hospital
Attn: Dr. Francis Tyce
Rochester, Mn. 55901

chart please

Dear Dr. Tyce:

My husband is doing a geneology of his family and has learned that his great-grandfather, John Vigelend, was a patient at RSH at one time. Olmsted County records show that he died of heart failure at the age of 74 on May 18, 1894. We would appreciate whatever further information about him that you could provide. Of particular interest to us is the reason (medical diagnosis) for his commitment, who committed him, how long he was a patient there.

Enclosed is a check for $10.00 to cover expenses. We appreciate any assistance and/or information.

Sincerely,
Mrs. Ann Vigeland

3727

vol 27

RECEIVED
APR 15 1982
ROCHESTER
STATE HOSPITAL

Patient was in a rather weak condition on his admission, was put to bed & seemed to be getting along quite well, when, one evening, he was found in a very low condition and died shortly afterward. He did not talk English & a satisfactory examination could not be made.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4½ WEIGHT, 115½ lbs NUTRITION,
WOUNDS OR ABNORMALITIES, Is blind.
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.

no special examination made
see note on previous page

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 John Vigeland

1894

EBERT, FULLER & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Hans Olsen, and wife, with the following history. He is, by occupation, a farmer: habits good so far as known: as to any history of heredity, not known. Cause of this attack is not known; form is depressed. Chronic. He has been blind for 2 years. When first symptoms of the disease were manifested is not stated; (probably some 2 years ago); this is the 1st attack. He thinks there is a fish in his stomach & drinks large quantities of water. He has hallucinations & other delusions of various kinds: is melancholic. He has attempted suicide several times: tried it once by hanging, but was cut down in time; has also threatened it several times since. He is not disposed to injure others; has no filthy or destructive habits. It is believed he has diabetes. Patient has been confined in his room, for nearly 2 years. Not known, if he has been under medical treatment.-

May 15 On admission, was put on B2 (S. R. Complexion light; hair gray; eyes gray; condition of skin good; has some scars on right leg. Is dirty; there is a large lump on the right side. Patient is blind; behavior good.)

" 16 When taken in ward, Pulse 100. R 22. T(e) 98.2. May 16/94. Was restless for 5 hours, last night, and slept only 3 hours. Was filthy this morning. A.M. Pulse 90. R 19. Te 98.8. Appetite poor. Bowels seem regular; no cough noticed. He cannot talk English & cannot be understood. P.M. Pulse 88. R 22. Te 98.6.

" 17 Has been in bed all day. May 17/94. Slept but 2 hours, last night; was restless for 5 hours or so. - Soiled his bedding, during the night. A.M. Pulse 94. R 20. Te 98.6. Still confined to his bed; lies there quietly. Appetite only medium. P.M. " 92 " 19 " 98.4. May 18/94. Pulse 88. R 21.

" 18 Te 98.4. Patient was up several times, during the day, & was apparently quite strong. Ate a very good supper. Died, quite suddenly, 8.40 this Evening. Was heard gasping & groaning, and, though Dr went up right away, patient had breathed his last. He died, evidently, in from 5 to 10 minutes, and evidently, from heart failure, though what caused the heart failure is not certain.

Died -

Personal and Medical History of Michael Brazil Jr.

From 230.

1894 cont'd

June 18 food, eg. milk-toast, eggs, beef-tea. 3.30 P.M. Awake all the afternoon, so far; quite restless; complains of

" 19 being deprived of tobacco. 7 P.M. Bowels have moved freely; he also passes urine regularly. June 19/94. Was very restless the fore-part of the night. Went to sleep about 1 A.M. & slept 4 hours. 8 A.M. Had a passage; rather loose; & light colored. Passes his urine quite regularly. Food now consists of milk, soup, eggs on toast and pudding. Has been awake most of the morning. Had 2 passages one at 1 P.M. & another at 3.15 P.M.

" 20 3.45 P.M. Patient became very restless & took off bandage. Said he wanted to take the stitches out. Had to have his hands tied. June 20/94. Last night, he was very restless until 11 P.M., when he went to sleep, and slept until 5 A.M. 11 A.M. Passes his urine regularly; bowels move quite freely; he seems dozingly. Appetite is good. 9 P.M. Bowels moved freely again, this evening. He has slept about an hour today;

" 21 has been quite restless when awake. June 21/94. Up to 11.30 last night, was quite restless & did not sleep any. Then went to sleep & passed a very good night, sleeping very soundly. 5.30 P.M. Has been awake all the afternoon & has been also quite restless. Eats well. Bowels move freely. Passes urine.

" 22 June 22/94. Was quite restless all the evening - at 9 P.M. went to sleep & rested very well until 2 A.M. Was awake for an hour or so - went to sleep again & slept until 5 A.M. Hands are kept tied. Passed about 1½ pints of urine, this morning (5 A.M.). 12 M. Has been awake all morning; and quite restless. Is now on regular diet, but also has special foods. Appetite is quite good.

" 23 P.M. Was awake, mostly, all the afternoon. June 23/94. Slept very soundly, nearly all night; was awake, at times, for about 10 minutes, and quite restless, when awake. Passed about 1 pint urine; bowels moved freely; 8.15 A.M. Was taken out of restraint. P.M. Stitches were taken out & head dressed.

" 24 Was up & on ward in roller-chair for about 4 hours, today. June 24/94. 11 P.M. Slept very little, in Early part of night; was quite restless. Was awake, at this hour, when nurse took patient's pulse; as nurse went out of room, patient took bandage off; a new bandage was put on & patient put in restraint. Was very restless; passed about a pint of urine. 4 A.M. Has slept about 3 hours; restless when awake. 7.30 A.M. Taken out of restraint. Bowels have moved freely. 11 A.M. Up on ward, and in chair.

" 25 4.30 P.M. Put back to bed. 8 P.M. Meddling with bandage & was put in restraint. June 25/94. Passed a very good night; slept about 5 hours. 7 A.M. Taken out of restraint. 2.30 P.M. Has been on ward, in roller-chair, about 2 hours. Went to bed; slept soundly about 2 hours. June 26/94. Had a slight passage

" 26 also passed urine, during night. Slept 5 hours; was quiet when awake. Bandage came off about 1 A.M. & P.M. Has been up, in roller-chair, about 2 hours. Slept soundly from 3.30 P.M. till 6 P.M. Patient,

" 27 for some days past, has been on regular diet. June 27/94. Patient was quite restless after 2 o'clock, last night; kept asking for tobacco. Passed about a pint of urine. Slept 4 hours. - 9 A.M. Is up, dressed & out on the ward: head dressed this morning. Was out on the grounds about 2 hours.

" 28/29 June 28/94. Rested well, last night, sleeping 7 hours. June 29/94. Would not stay in bed, after 4 o'clock A.M. Got up & on the hall. P.M. Is up today & about. Appetite good; bowels regular; is very tired, at times. June 30/94. Remains up daily. Is doing very nicely.

July 1 " 2 July 1/94. Up & about. Appetite good; bowels regular. Sleeps quite well, at night. Goes out daily for a walk. July 2/94. Has so far progressed & improved that he was today, transferred to A1. Keeps on improving. No convulsions have been reported since three immediately following the operation. While out on the grounds today, asked permission to go & get a drink of water. Eloped, while doing so. July 11/94 Word was recently received from relatives that patient had arrived safely, at home D.I.P. (see other case records)

Personal and Medical History of Michael Brazil Jr.

HERBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3724.
Residence, Town of Wells, Rice Co. Minn
Date Admission, 16th May 1894.
Admitted by, Dr Phelps Hour, 4 P.M.
How Sent, R. H. Mott Jof P, Rice County.
Sex, Male.
Age, 30
Civil Condition, Single
Children, none
Age Youngest Child,
Occupation, Farmer
Degree Education, probably good
Profession Religion, is a church member
Habits, Intemperate, at times.
Nativity, Wells, Rice County, Minn
Physicians Committing, F. M. Rose & G. H. Wood.
Correspondents, Michael Brazil Jr
Dr Rose & Wood, Family Physns Faribault Minn

No. for Year, 2914
Insane Relatives, none
Cause Exciting, fracture of skull in 1874
Cause Predisposing, previous attacks
Form,
Accompanying Bodily Disorder, Nocturnal Epilepsy
Suicidal or Not, not
Date of this Attack, back to 1886 - again 1893.
Duration, continuous & probably long.
No. of Attack, 3rd (probably more)
No. of Admissions, 3rd
Age First Attack, about 12.
Time of Leaving, July 3rd 94
Time in Hospital, 1 mo 17d.
Result, Imp.

EXAMINATION ON ADMISSION.

Early D. C. B. Ely - May 24/94.

MENTAL CHARACTERISTICS.

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

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

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

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

GENERAL DESCRIPTIVE REMARKS:
Patient is an Epileptic; first commenced having Convulsions when about 10 years old, when he was injured in the head.

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

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

HALLUCINATIONS: none

ILLUSIONS: none

CONVERSATION:
Coherent or Incoherent, Coherent and
Voluble or Reticent, voluble

Personal and Medical History of Michael Brazil Jr

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 10½ WEIGHT, 168½ pds. NUTRITION, Good.
WOUNDS OR ABNORMALITIES, None.
TONGUE, Tremors, some tremor Coatings, None Promptness Movement, Prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, Good —
HEARING, Good —
COORDINATION, Arms, no incoordination; finger to nose, eyes shut, slight irregularity.
Legs, standing, eyes shut, slight swaying.
TREMORS, Hands, slight Tongue, none
Facial Muscles, none General, none —
REFLEXES, Patellar, Right about 5; left 6 or 7. —
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Normal
SENSIBILITY, Normal.
HEART, Sounds good
LUNGS, Sounds good.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

Kept

CRANIAL MEASUREMENTS,

HISTORICAL.

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

This man was brought here by Sheriff Stewart, with the following history. Habits, we intemperate, at times; there is no history of heredity. Supposed cause of this attack is fracture of skull from a horse's kick in 1874. Form is paroxysmal. Nocturnal Epilepsy, accompanying bodily disorder. First symptoms of this disease were manifested in 1886 & again in 1893; showed a disposition to injure others. This is not 1st attack they have been repeated since 1886; duration of each attack was several weeks. He now shows a disposition to injure others, from sudden passion. Is not suicidal, but filthy and destructive in habits. Patient has been here twice before. Has been under medical treatment. — — — —

Note — Patient was here, the 1st time, from December 30/85 to Feby 4/86. (see Vol 6. page 167 No 1067); and, the 2nd time, from Nov 8/93 to Dec 20/93; (see Vol 20 page 233. No 3578). On both of these occasions, prior to committment here, he was stated to be subject to epileptic fits, but none were either noted or reported during either of the times he was confined here. He was always well behaved; a good & willing worker; talked freely & pleasantly; played games &c; read some, also attended the patients' various entertainments. Was, however, somewhat given to telling idle & silly stories. Once or twice only, during last stay, he expressed delusions of persecution. Was always well conducted & caused no trouble at any time. Habits were neat & clean.

May 16 — On admission, was put on B1. (S.R. Complexion sandy; hair sandy; eyes blue; condition of skin good. — one small scar on left leg. Bodily condition Clean. Behavior good.). Pulse 98. R 17. T 98/100 (taken up in ward)

" 17 — May 17/94. Slept well last night. HM. Pulse 104. R 18. T 99/100. Appetite good. Bowels regular. Quiet & well-behaved, though somewhat nervous & restless. Goes about the ward, laughing & telling silly stories.

" 18 — May 18/94. Slept well, again last night. HM. Pulse 82. T 99 2. Seems contented than on first day. —

" 19 — Appears quite happy. May 19/94. HM. Pulse 77. Pleasant & cheerful. Is a good worker in the wards;

" 20 — very willing. Plays checkers some; also goes out walking. Personal habits are good. May 20/94. Continues to sleep well, at night. Appetite good; bowels regular. Keeps about the same. No "spells" noted.

" 21/22 — May 21/94. HM. Pulse 90. Patient appears to be making improvement. May 22/94. Sleeps well; HM. Pulse 86. Is always well-behaved; Cheerful & happy. No "spells" have been noticed, to date.

" 23 — May 23/94. HM. Pulse 83. Always quiet; conduct & behavior good; a willing worker on the ward.

" 30 — May 30/94. During this 2nd week, patient has continued to rest & sleep well, at night. Pulse has ranged from 76 to 91; (the latter, today). He has been uniformly quiet & well-behaved. Has only once complained of headache & of not feeling well (had also a pain in his stomach). No "spells". Acts that are described in Committment papers, have, as yet, been observed, or reported. At times, would act in a somewhat discontented manner, yet, in the whole, he has been cheerful & pleasant. Seems to talk quite sensibly & rationally. Habits are neat & clean. Is in good Physical condition.

June 1 — June 1/94. Ht 175 ft 8 in. (Has gained 6½ pounds, since admission); Pulse 84. June 3/94. Had a very

" 3/4 — hard fit about 9.30 tonight; it lasted about ½ an hour: fell out of bed, during same. June 4/94. He had another "spell" about 11 o'clock this morning. Has been sick and in bed, most of the day, with pain in head, from fall. June 5/94. Had 2 "spells" during the night and one after breakfast; did

" 5 — not eat any breakfast. June 6/94. Has a lame arm; appears to have lost the power of it.

" 9 — June 9/94. Has been having 2 or 3 "spells" a day, of late: did not seem to know what he was

" 10 — doing; seemed very stupid & "lost". Was, today, transferred to B2 East. June 10/94. Bled; had 5 or 6 convulsions up to 4.30 Am, when he had them continuously; probably averaging one, every ten minutes until 8.30 & then did not have them as often. Had no convulsions

June 11 — after 9.30. Was Examined, today, by Drs Mayo. June 11/94. Had several light convulsions during the night. Had probably 15 or 20 convulsions from 6.30 Am to 2.30 Pm. Transferred to 6E. —

" 12 — 5 Pm. Had 4 convulsions, during the afternoon: was given hypodermic. June 12/94. Patient had 14 Convulsions during the night: 8.30 Am, a convulsion. 12.30 Pm. Had convulsive movements of one side of body, but was not unconscious. Bowels have moved freely. Patient was quite restless for a time. Was up, in pollen chair 3 hours during Pm. 6.30 Pm. Was visited by his father.

" 13 — June 13/94. During night, rested quite well; slept 5 hours or &c. He has been very wild all the morning & nurses had a good deal of trouble with him. 1.30 Pm. Again is quite wild & excited. "Thinks his father is dead" — 4.30 Pm. Was asked to be prepared for operation on head, to take place the following morning at 8 o'clock. This was accordingly done. 5 Pm. Ate a hearty supper. —

" 14 — June 14/94. Quite noisy & restless all night; did not sleep any; insisted on getting out of bed. Wants to take bandage off his head: had to be held in bed, nearly all night. Bowels moved freely at 12 o'Clock. Ate no breakfast — 8.40 Am. Operation took place (by Dr Mayo). (For more full details of this, see "nurses-record".) 10 Am. After coming out of the anaesthetic, patient became very wild & ugly. Was put in restraint-jacket — Slept from 1st to 2nd Pm. Awoke suddenly & went into convulsions lasting about 8 minutes. Slept slightly, at intervals, during the afternoon and perspired profusely, most of the time. Small quantity of water was given him, hourly, 7 Pm. Has had about 40 minutes sleep; (it was however quite restless & this evening — 8 Pm. has been sleeping for

" 15 — about ½ an hour — 8.30 Pm. Mind seems to be wandering since 5 o'Clock. June 15/94. Slept only about 2 hours, all night; was very noisy & restless, when awake; talked incoherently and called for water, nearly all night; was given 2 oz milk every 2 hours; cold applications to fore head all night. 3.30 Pm. Slept about ½ an hour, this Pm: is singing & talking incoherently, when awake. 5 Pm. Bowels moved very freely; is resting quieter. Slept about 1 hour, this morning; talked almost all the time, while awake: part of the time, was fairly rational; passed nearly 2 oz urine. 8.30 Pm. Slept a little

" 16 — at intervals during evening; quite restless, when awake. June 16/94. From 9 Pm to 12, last night, he was quite restless & noisy; perspiring very freely; talking incoherently; seemed in great pain, at times. Wanted, during night, to get his hands loose, to take bandage off head; passed about 1½ pints of urine, & a thin color; slept scarcely any all night. 5 Am. Does not perspire so freely as he did in the first part of the evening; is resting quietly, this morning. 7 Am. Is resting easily; sleeps part of the time.

" 17 — 2 Pm. Slept some during morning; also a little, this afternoon; restless when awake. 3 Pm. Desires to defecate, but, tho' he strains considerably, cannot effect a passage. 5.30 Pm. Restless and uneasy; passed about 6 oz. urine; high-colored; had slight passage of bowels. 10 Pm. Passed about 1 pint urine; has been sleeping about the past 40 minutes. June 17/94. Slept some, at intervals, during the night. at times, awakes quite suddenly & talks incoherently. 7 Am. Rather restless but talks quite rationally. had a slight passage of bowels; also passed his urine. 5.30 Pm. Slept a little, both morning & afternoon.

" 18 — at times, was quite restless & talkative, when awake. Passed his urine; bowels also moved freely. 8 Pm. Somewhat restless. June 18/94. During Early part of night, he rested quietly, sleeping at intervals. Towards midnight, he came very restless & was quite noisy, for about an hour, when he went to sleep & slept about 4 hours, with intervals of waking. 12 M. Slept about 3 hours, this morning; rests quite well & is quiet, when awake. Has, of late, been eating more substantial

(carried to page 232)

Personal and Medical History of Gustav Seitz

EBERT, PUSLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3725

Residence, unknown (previously Winona, Minn)

Date Admission, 16th May 1896.

Admitted by, Dr Phelps Hour, 7 PM.

How Sent, E. P. Collister, Jo P. Itasca County.

Sex, Male –

Age, 61.

Civil Condition, married

Children, 3 –

Age Youngest Child, ——

Occupation, Tinner

Degree Education, fair; common school

Profession Religion, not known –

Habits, Intemperate.

Nativity, Germany

Physicians Committing, D.S. Jennings & J.A. Swartwood

Correspondents, Clara Seitz Excelsior. Minn

No. for Year, 295.

Insane Relatives, unknown

Cause Exciting, Intemperance

Cause Predisposing, Previous attacks & drink

Form,

Accompanying Bodily Disorder, None mentioned

Suicidal or Not, Very suicidal –

Date of this Attack, Saturday, May 12th

Duration, about 4 days –

No. of Attack, not 1st

No. of Admissions, 2nd here (has been at Fergus Falls)

Age First Attack, not given

Time of Leaving, Feb. 20'96

Time in Hospital, 1 yr, 9 mo. 4 da

Result, Disc. Apr. 30/96 Rec.

EXAMINATION ON ADMISSION.

Exd by D.C.B. Ely – May 24/96. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, good

Recent Events, Good

Special Subjects, Impaired, during attack

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Good

Own Mental State, Good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient was quite nervous on admission, but now has gotten over it to a great extent. He talked with the Drs & stated that detectives were after him & he wanted to be given over to them if they came after him.

EMOTIONAL STATE:

Normal, Calm, Normal, Calm and

Indifferent,

Exalted,

Depressed, yes –

DELUSIONS:

Systematized or Not, None now; first few days had delusions of persecution

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none

ILLUSIONS: none

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, voluble

Personal and Medical History of Gustav Seitz

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10 in WEIGHT, 172 pds. NUTRITION, Good

WOUNDS OR ABNORMALITIES, None

TONGUE, Tremors, slight Coatings, large & coated Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Yes

SIGHT, Presbyopic –

HEARING, Good

COORDINATION, Arms, Fingers Done, Eyes shut, Some impairment.

Legs, Standing on foot; Hands quite well. – Standing, eyes shut, Sways some –

TREMORS, Hands, slight Tongue, slight

Facial Muscles, none General, none

REFLEXES, Patellar, Equal – about 8 —

Other Reflexes,

ARTICULATION, Hesitating, Fair (foreign accent) Slurred, —

FACIAL EXPRESSION, Depressed

SENSIBILITY, normal

HEART, Sounds good; rapid beat –

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,

kept record

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,

HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") no hereditary history obtainable

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Gustav Seitz

1894

EARLEY, FIGLAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Sheriff Henry Reynolds, attended by Dr. Dickhoff, with the following history of case. Was here before only a couple of weeks ago. Habits are very intemperate, & this is cause of Each attack he has had. As to any history of heredity, unknown. Form of attack is acute, & exacerbation of a chronic condition. No accompanying bodily disorder mentioned. This present attack occurred on Saturday May 12th (about 4 Days ago); talked of & later, attempted Suicide. Says he had many such attacks. Now talks of suicide frequently; insanity chiefly known in this way. Addicted to injure others from sudden passion. Has tried suicide by both taking poison & by hanging. Is not filthy or destructive, so far as known; Has no he subject to any bodily disease &c or head injury, so far as known. — — — — — —

Note. Patient, as stated above, was at this hospital before; (see Vol 25 page 385 No 3605); from 27th Dec 1893 to Apl/94, when he was counted off the books, having been committed here under law of '93, recently declared to be illegal. — (though he remained here for over 3 weeks afterwards). At time of his first coming, had been drinking very heavily & had strong suicidal tendencies. Condition gradually improved; became free & pleasant in conversation; Only on one occasion, 4 present delusions in regard to a Steam Engine & the Sheriff being after him; read Considerable and wrote a few letters. Became quite cheerful & contented. Later, gave instruction to the members of the Hospital Band & others; was quite recovered mentally, at time of leaving; also in good physical condition. His case seemed one of "mania-a-potu" — Has always quiet & well-behaved. —

May 16 Our admission was first on B2 (S.D. Complexion light; hair dark, eyes gray; Condition of skin good. Has sound scars on right knee & on left hip; bodily Condition clean; second toe of left foot is gone. Behavior is good). Patient had the appearance of having been drinking heavily for some days. According to the account of the Sheriff, who brought him, patient has been in very bad Condition the past 2 Days; Suffering from D.T.s and developing strong suicidal tendencies; even made an attempt at suicide. Also disposed to injure others.

" 17 Pulse (taken a ward) 110. R 30. Te 101 2/5. May 17/94. Restless for 5 hours, Sleeping but 3 hours, last night. AM. Pulse 100. R 22. Te 100. Appetite good, bowels constipated; is Confused, today; wants to know "if there isn't some one after him". Talks freely. PM. Pulse 106 R 22. Te 99.8. No Complaints or injuries to report. May 18/94. Was restless, sleeping 5 hours, last night. AM. Pulse 110 R 22 Te 99.8. —

" 18 Appetite good. He is well-behaved; talks freely. PM. Pulse 106 R 22. Te 99.6. May 19/94. Slept 7 hours, last night. AM. Pulse 106 R 20. Te 99.6. Mind now seems clearer. He laughs and

" 19 talks freely. PM. Pulse 104 R 22. Te 99.6. May 20/94. AM. Pulse 98. He behaves well.

" 20 Talks freely; does not manifest any delusions; is in good spirits. May 21/94. Slept 8 hours, last night. AM. Pulse 100. Complains some of rheumatic pains. Appetite is good. —

" 21 May 22/94. Slept 7 hours last night. AM. Pulse 90. May 23/94. Rested well, Sleeping 7 hours, last night. AM. Pulse 92. Quiet and well behaved. Still Complains of rheumatic pains. —

" 22/23 May 30/94. During this the 2nd week, patient has Continued to eat and Sleep well, at night. Pulse has become about normal. Appetite good. Head talks freely & pleasantly; plays games & goes out walking with the rest. Summary. Patient, on admission, was much confused; the effects, no doubt of his debauch, at time of coming; imagined strange things; "that detectives were after him" &c. He was also quite depressed; after a few days he became more cheerful; talking freely & showing no delusions. Has always been quiet & well-behaved. Habits, clean.

June 2/94 June 2/94 Wt 182 pds. (Has gained 10 pounds since his return) — Pulse 80. June 7/94. Slapped patient

" 27 Scutter, because he was using abusive language to him (Seitz) — June 27/94. Given limited parole, today.

Personal and Medical History of Gustav Seitz

1894

June 30 June 30/94. Appetite good; makes no complaints; works in Store-room and seems quite contented here —

July 2/94 July 2/94. Keeps in good flesh & physical condition. July 16/94. Quiet & well-behaved. Still has a parole; works some in Store-room. Has also re-commenced given instruction to the Hospital Band. Was, today,

" 31 transferred to 5th, an "open ward". July 31/94. Quiet & well-Conducted & causes no trouble. Habits are neat & tidy. He is quite pleasant & free in conversation; sociable & agreeable in manner. Still gives instructions to the Hospital Band, and, under certain conditions, is permitted to instruct an orchestra in town.

Aug 8/94 Aug 8/94. Wt 175 pds. Pulse 80. Aug 15/94. Quiet & well-behaved. Teaches the Hospital Band and also gives musical instruction in the City. Works in Store room, also. Health much improved.

" 22 Aug 22/94. It being suspected that, while down town last evening, he had been drinking and was heard once some threatening language when speaking of an orchestra leader in town, patient

" 31 was deprived of his "parole" & was transferred to B2. Aug 31/94. Behavior is good, since coming to this (B2) ward. He talks freely & sensibly; reads & plays games. Is becoming anxious for a "parole".

Sep 1/2 Sep 1/94. Wt 177 pds. Pulse 81. Sept 2/94. "Parole" has restored to him to-day. Is again giving

" 3/5 instructions to the Band, here. Sep 3/94. Transferred to A1. Sep 6/94. Wt 174 pds. Pulse 80.

" 30 Sep 30/94. Uniformly quiet & well-behaved. Gentlemanly in manner. Civil & obliging. Gives regular lessons to the Hospital Band. Is quite contented here, and much enjoys his parole.

Oct 6/31 Oct 6/94. Wt 177 pds. Pulse 80. Oct 31/94. Still has "parole". Continues quiet & gentlemanly in behavior. Instructs the Hospital Band. Has also got up a few Entertainments for the patients' use. Is free & pleasant in Conversation. No delusions noted. Physical health quite good.

Nov 5 Nov 5/94. Wt 174 pds. Pulse 80. Dec 4/94. Wt 175 pds. Pulse 80. Dec 28/94. Transferred, with several other

Dec 4/1894 to Jan 4/31 patients from A1 to C2. Jan 4/95. Wt 175 pds. Pulse 82. Jan 31/95. Uniformly quiet & well-behaved. Has a "limited parole". Seems quite contented here. Is still giving instruction to the "Band" & has been instrumental in getting up quite a few entertainments for the patients. Is in good physical condition. Took care of the Fire-Hall & Shipley's quarters recently for a couple of weeks.

Feb 1/95 Feb 1/95. Wt 175 pds. Pulse 78. Feb 28/95. Lives along pretty & contentedly here. Leads the Hospital Band &c.

March 1/95. Wt 178 pds. Pulse 72. March 31/95. No special change noticeable. —

April 1/95. Wt 174 " " 76. April 30/95. Quiet & well-behaved. Has "limited parole". Appetite good; (is on extra diet). Talks freely & pleasantly. There are times, however, when he becomes somewhat depressed & "cranky". He still leads the Band & Conducts entertainments.

May 1/95 May 1/95. Seems in fair health, but does not eat well. May 29/95. Obtained permission to visit

" 31 down for a couple of hours; returned "drunk & disorderly"; was moved to C3 until he became Quiet. May 31/95. Has been brought back to C2. Is now about as usual & behaves well; has again taken up instruction of the Band &c. Physical & mental Condition seem quite good.

June 1/30 June 1/95. Wt 176½ pds. Pulse 80. June 30/95. No change to note, mentally or physically. — Behavior during the month, very good. Still leads the Band & Conducts entertainments.

July 1/31 July 1/95. Wt 175 pds. P 76. July 31/95. Keeps about the same. Passes his time as above described. Reads some; plays cards. Is on "limited parole". Habits very neat & clean.

Aug 1 Aug 1/95. Wt 183½ pds. Pulse 90. Sept 1/95. Wt 190 pds. Pulse 84. Oct 1/95. Wt 190 pds. Pulse 84

Sept 1 Oct 25/95. Was taken very sick in night, vomiting & purging. Physician called. Grew better toward morning.

Oct 1/25 to 31/95 (Quite a number of others were similarly affected). Soon got up & around again. Oct 31/95. Felt unwell for a few days after last illness. Seems all right now. Keeps about the same & spends his time as usual.

To Number Book a page 240

Personal and Medical History of Clifford Belanger

ROBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3726. 296.

Residence, Red Wing, Minn. ...es, None

Date Admission, 17th May 1894. ...g, probably due to alcohol.

Admitted by, Dr. Phelps Hour, 11.30 ...osing, probably intemperance

How Sent, John. B. Oliver, Jail, R. ...

Sex, Male ...g Bodily Disorder, None mentioned

Age, 48 years ...t, not

Civil Condition, married ...ttack, about 6 months ago

Children, — None ... about 6 months.

Age Youngest Child, — ...1st

Occupation, Merchant ...issions, 1st

Degree Education, probably good Age First Attack, 47 +

Profession Religion, Catholic Time of Leaving, Aug. 16 '94

Habits, Intemperate; at times, Much so. Time in Hospital, 2 mo. 29 d.

Nativity, Canadian — Result, Improved

Physicians Committing, C. E. Riggs, P. Marchand & J. F. DeWitt

Correspondents, Wm. C. Belanger Red Wing, Minn

EXAMINATION ON ADMISSION.

Examined C. B. Ely May 24/94 MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Some confused

Quick or Sluggish, Quick

MEMORY: Fair

Past Events,

Recent Events, Quite Good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Fair

Own Mental State, Impaired

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient is quite talkative. He is continually thinking of some new fantastic scheme. He says "he is all right & thinks it was a scheme of the Drs that he is in the hospital"

EMOTIONAL STATE:

Normal, Calm, and

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, not

Special Subjects,

Transitory or Not, Transitory

HALLUCINATIONS: —

ILLUSIONS: —

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, voluble

Personal and Medical History of Clifford Belanger

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9 in. WEIGHT, 164 lbs. NUTRITION, Good.

WOUNDS OR ABNORMALITIES, None —

TONGUE, Tremors, Coarse Coatings, Slight Coating Promptness Movement, Prompt

PUPILS, Equality, Equal Size, Slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, Fair

HEARING, Good —

COORDINATION, Arms, finger to nose, eyes shut, not marked incoordination —

Legs, Standing on foot, stands fairly well — Standing eyes shut, some swaying.

TREMORS, Hands, Some Tongue, Coarse

Facial Muscles, Yes General, —

REFLEXES, Patellar, About equal — 7 & 8 —

Other Reflexes,

ARTICULATION, Hesitating, Good Slurred,

FACIAL EXPRESSION, Normal

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, Recent 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 hereditary history obtainable

Mother or Mat. Relations,

Father or Pat. Relations,

Brothers or Sisters,

Personal and Medical History of Clifford Belanger

1894

This patient was brought here by Deputy Sheriff P.C. Haas, with following history. He has used liquor for 15 years; at times, in great excess. There is no history of any heredity, nor of any bodily disease, or disease, or injury to head. This attack has probably been due to alcohol & there is a specific basis - Form of attack is acute; first symptoms of the disease were manifested about 6 months ago by grandeur delusions; this is 1st attack. Insanity is now manifested by fanciful business schemes. He is disposed to injure others; shows passion at being controlled. Is not suicidal, nor filthy nor destructive previous to symptoms appearing. Shows only great irritability and excessive religious zeal. Partial re- - straint has been employed at St. Joseph's Hospital. Has been under treatment with Dr. E.E. Riggs, St. [illegible]

May 17 On admission, was put on B.2. (S.D. Complexion [illegible] noticed; bodily condition clean; no bodily peculiarities [illegible]

" 18 When taken to ward. Pulse 106. R 24. Tem 99.8. [illegible] A.M. Pulse 96. R 18. Tem 99.2. Appetite medium [illegible] in the hall: inciting patients to turn against attendants "imagines he owns everything". P.M. Pulse 102 [illegible]

" 19 May 19/94. Slept 7 hours last night; was fa[illegible] Talks still shows delusions. Went out walking - cited, at times, when talking to her; claiming whatever for sending him here, as he was perfec[illegible]

" 20 May 20/94. Restful, sleeping 8 hours, last nigh[illegible] make no complaints. Still known, somewhat res[illegible]

" 21 May 21/94. Quiet & rested well, last night. A.M. P[illegible]

" 22 very dirty; soiled himself, again, today. Ma[illegible] Restless & excited today; trying to kick down the do[illegible]

" 23 Cause of his being kept here. May 23/94. Sleep [illegible] Delusions; "talking of his immense riches &c" [illegible]

" 24 May 24/94. Slightly restless, though sleeping 7 h[illegible]

" 25 previous to this date. Appetite fairly good. Habit[illegible]

" 26 Quiet again today & well-behaved. Appetite goo[illegible]

" 27 very restless today & wanting to go away. A.M.

" 28 When stopped, he resisted & fought. May 28/94. [illegible]

" 29 walking, wanted to go away & would not com[illegible] but slept about 7 hours, last night. A.M. Pulse 90. [illegible] & horses & frightened the ladies in the carriage. Was praying this evening. Still holds delusions.

" 30 "Talks of his immense riches & great projects". May 30/94. Was restless & noisy for 4 hours, last night and slept but 4 hours. A.M. Pulse 88. Still deluded: Discontinued; [illegible] medicines.

" 31 May 31/94. Somewhat more quiet, today. A.M. Pulse 86. Appetite good; Makes no complaints.

With exceptions above noted, patient has been resting & sleeping well at night, this past week. By day, he has been restless, most of the time; he shows a rather mean disposition - very contrary; when requested to do anything, will do just the opposite. Plays games, at times. Goes out walking,

Rochester Dec 1894

Jno Belanger

I am still in
And you will see that I have
been away from my family
and my Business longer than
I should of been I could
learn to have you come and
see me as soon as possible
I am in hopes to see you
here soon as I am anxious
to see you as appearance
to business duty often make
so dont fail to come as soon
as soon as Possible
I am Very truly
Clifford Belanger
Rest Room
Room

Personal and Medical History of Clifford Belanger

1894 cont'd

May 31 with the rest, but is then quite troublesome; requires constant watching, as he is always watching for a chance to escape. Still full of delusions. "Talks of building "World's Fair" at Redwing; also of other grand projects". "Is going to be President", he says. Gradual decline is noticeable. —

June 1 June 1/94. Wt 152 lbs; (has lost 12 pounds since admission, 2 weeks ago). Pulse 110. Has a very mean & disagreable disposition. Is noisy, at times; keeps up a continual talking. June 3/94. Restless all last

" 3 night and slept none. Was wet, this morning. Is very nervous and seems much deranged, today.

" 7 June 7/94. Again wet his bed, last night. Is very much disturbed & excited, today; also very troublesome - Was throwing things about in the dining room & had to be put out; then ran up the hall & commenced to throw the billiard-balls about. Was extremely violent: struck a patient (Frank Rydberg) with the hand. -

" 10 June 10/94. Was visited by his wife and brother, the past two days. Tried to run away, yesterday -

" 11/15 June 11/94. Tried, again, to run away today. June 15/94. Has been behaving very well, yesterday & today.

" 30 Talks more sensibly than at any time since admission. June 30/94. Appetite is good. Of late, he is generally quiet & quite well-behaved. Was dirty on the 18th 23rd & 29th inst. Physical and mental state are, however, gradually growing weaker. He has had no "excited spells" of late. —

July 2/11 July 2/94. Wt 149 lbs; (is still losing in flesh). July 11/94. Was visited by some friends, today.

" 15/31 July 15/94. Slept only about 5 hours, last night. Was quite restless. July 31/94. Has not been reported as violent & troublesome during this month. Has been quite well-behaved. Habits continue dirty. Patient is failing quite perceptibly, both physically & mentally. — " —

Aug 2/4 Aug 2/94. Wt 154 lbs. (has gained some in flesh). Pulse 86. Aug 4/94. Habits are still very dirty -

" 9 Aug 9/94. Visited by wife today; was, as usual, very anxious to be taken home by her. —

" 14 Aug 14/94. Seems somewhat brighter today: talks freely; plays billiards - Appetite is quite good.

" 16 Aug 16/94. Was today visited by his wife & his brother - They were permitted to take him home, on trial.

Discharged Feb. 6th 95

Personal and Medical History of Clifford Belanger

HERBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA

1894

This patient was brought here by Deputy Sheriff Pl Haas, with following history. He has used liquor for 15 Years; at times, in great excess. There is no history of any heredity, nor of any bodily disorder, or disease, or injury to head. This attack has probably been due to alcohol + there is a specific basis. Form of attack is acute; first symptoms of the disease were manifested about 6 months ago by Grandiose Delusions; this is 1st attack. Insanity is now manifested by fanciful business schemes. He is disposed to injure others; shows passion at being controlled. Is not suicidal, nor filthy nor destructive previous to symptoms appearing. Showed only great irritability and excessive religious zeal. Partial restraint has been Employed at St. Joseph's Hospital, + has been carefully watched by a trained Attendant. Has been under treatment with Dr. C.E. Riggs, St Paul, Minn. ——"——

May 17 On admission, was put on B7. (S.D. Complexion light; hair gray; hazel eyes; no marks or scars noticed; bodily condition clean; no bodily peculiarities noted. Behavior quiet + very gentlemanly). — " 18 When taken to ward. Pulse 108. R 24. Te 99.8. May 18/94. Restless 2 hours, but slept 6 hours, last night. AM. Pulse 96. R 18. Te 99.2. Appetite medium. Bowels seem loose: toiled himself today. Is troublesome in the hall: inciting patients to turn against attendants + to run away; he tried to escape today; he "imagines he owns everything". PM. Pulse 102. R 20. — Te 99. No complaints or injuries to note. " 19 May 19/94. Slept 7 hours last night; was fairly restful. AM. Te 99.4. Appetite medium. Talks still shows Delusions. Went out walking today. Was also visited by his wife: was quite excited, at times, when talking to her; claiming himself to be quite well + that there was no reason whatever for sending him here, as he was perfectly capable of attending to his business, himself. " 20 May 20/94. Rested, sleeping 8 hours, last night. AM. Pulse 98. R 20. Te 99. Is quietly behaved. makes no complaints. Still, however, somewhat restless, as he thinks he should not be detained here. — " 21 May 21/94. Quiet + rested well, last night. AM. Pulse 96. Is restless today. Full of Delusions. Habits are " 22 very dirty; soiled himself, again, today. May 22/94. Again, slept well, last night. AM. Pulse 96. Restless + excited today; trying to kick down the doors. Now imagines that the Attendants are the direct " 23 cause of his being kept here. May 23/94. Sleep was good, last night, also. AM. Pulse 92. Still full of Delusions; "talking of his immense riches &c". Is discontented + impatient + wants to go away. — " 24 May 24/94. Slightly restless, though sleeping 7 hours, last night. AM. Pulse 96. Is now quiet than " 25 previous to this date. Appetite fairly good. Habits have become cleaner. May 25/94. AM. Pulse 92. " 26 Quiet again today + well-behaved. Appetite good, bowels + seem regular. May 25/94. AM. Pulse 94. Is " 27 very restless today + wanting to go away. May 27/94 AM. Pulse 90. Tried to run away, today. " 28 When stopped, he resisted + fought. May 28/94. AM. Pulse 92. Stubborn today. When coming in from " 29 walking, wanted to go away + would not come up to the ward. May 29/94. Slightly restless, but slept about 7 hours, last night. AM. Pulse 96. While out on the grounds, today, he stopped a horse + frightened the ladies in the carriage. Was praying this evening. Still holds Delusions. " 30 "Talks of his immense riches + great projects". May 30/94. Was restless + noisy for 4 hours, last night and slept but 4 hours. AM. Pulse 88. Still deluded: discontented; refuses medicines. " 31 May 31/94. Somewhat more quiet, today. AM. Pulse 86. Appetite good; makes no complaints.

With exceptions above noted, patient has been resting + sleeping well at night, this past week. By day, he has been restless, most of the time; he shows a rather mean disposition — very contrary; when requested to do anything, will do just the opposite. Plays games, at times. Goes out walking,

Personal and Medical History of Clifford Belanger

1894 cont'd

May 31 with the rest, but is then quite troublesome; requires constant watching, as he is always watching for a chance to escape. [illegible] full of Delusions. "Talks of building "World's Fair" at Redwing; also of other grand p[illegible] going to be President", he says. Gradual decline is noticeable. —

June 1 June 2/94 [illegible] (at 12 pounds since admission, 2 weeks ago). Pulse 110. Has a very " 3 mean [illegible] very, at times; keeps up a continual talking. June 3/94. Restless all last [illegible] morning. Is very nervous and seems much deranged, today. [illegible]t. Is very much disturbed + excited, today; also very troublesome [illegible] ran + had to be put out; then ran up the hall + commenced to [illegible]ely violent: struck a patient (Frank Kyoberg) with his hand. — [illegible]th, the past two days. Tried to run away, yesterday. June 5/94. Has been behaving very well, yesterday + today. [illegible]admission. June 30/94. Appetite is good. Of late, he is [illegible]th 11th 23d + 25th last. Physical and mental state [illegible], had no "excited spell" of late. ——

[illegible]ly 11/94. Was visited by some friends, today. [illegible]quite restless. July 31/94. Has not been no- [illegible]Has been quite well- behaved. Habits con- [illegible]th physically + mentally. ——"——

Aug 1/94 [illegible] Aug 2/94. Habits are still very dirty - " 9 C[illegible]s to be taken home by her. —— " 14 An[illegible] [illegible]relaid - Appetite is quite good. " 16 Aug[illegible] [illegible]mitted to take him home, on trial -

[illegible] Feb 6th 95,

Personal and Medical History of Charles O. Atherton

EBERT, FISLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3730.
Residence, Kasson, Mn
Date Admission, 24th May 1894
Admitted by, Dr. Phelps Hour,
How Sent, E. F. Hay. Jd P.
Sex, Male
Age, 32.
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, Physician
Degree Education, Good
Profession Religion, not a church member
Habits, Good.
Nativity, Illinois —
Physicians Committing, I. H. Vanfleet and J. Bedient
Correspondents, Mrs J. Bedient —
Kasson Minn

ır, 300
atives, none
ting, overwork —
lisposing, not stated.
ving Bodily Disorder, none
Not, no
s Attack, 2 years ago
about 2 years. —
ck, 1st (Continuous).
issions, 2nd
Attack, about 30.
Time of Leaving, 20th July 1894.
Time in Hospital, 1 months; 26 Days
Result, Died; Exhaustion in General Paresis.

EXAMINATION ON ADMISSION.

Ex'd by Dr. Ely. June 8/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, not very active
MEMORY:
Past Events, Impaired
Recent Events, Impaired
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Fair
Own Mental State, Impaired
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, yes
Depressed,
DELUSIONS:
Systematized or Not, not
Special Subjects,
Transitory or Not, Yes
HALLUCINATIONS: none
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent and
Voluble or Reticent, quite free.

Personal and Medical History of Charles O. Atherton

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8½ WEIGHT, 157½ pds. NUTRITION, Good.
WOUNDS OR ABNORMALITIES, see "S. R." on next page.
TONGUE, Tremors, yes, marked Coatings, slight Promptness Movement, Prompt
PUPILS, Equality, Equal Size, slightly dilated
Response Light, Yes Accommodation, ✓
SIGHT, Seems good.
HEARING, quite good.
COORDINATION, Arms, Finger to nose, eyes shut, very incoordinate.
Legs, Standing, eyes shut, sway considerable.
TREMORS, Hands, yes Tongue, Yes
Facial Muscles, General,
REFLEXES, Patellar, Equal — about 0 —
Other Reflexes,
ARTICULATION, Hesitating, Hesitating Slurred, Slurred
FACIAL EXPRESSION, Paretic.
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.,

Record kept
CRANIAL MEASUREMENTS,

HISTORICAL.

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

Personal and Medical History of Charles O. Atherton

ALBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1894

This Patient was brought here by a Deputy Sheriff & accompanied by Dr. J. Bedient, his relative. He is a Physician by profession; habits have been good. There is no history of any heredity. Supposed cause of this attack is overwork; form of attack is depressed. There is no accompanying bodily disease. The first Symptoms of disease were manifested 2 years ago. This is the 1st attack & seems continuous. There is now a loss of faculties. Lately has shown a disposition to injure others, but he is not suicidal, nor of filthy or destructive habits. There is no history of any bodily disease, Epilepsy &c. Patient was in this Hospital before (see note below*).

*Note — Was here before, from March 27/93 to Augt 8/93, and during the whole of his stay here, he showed the characteristics of a General Paretic. Was however, somewhat improved when he was taken home by his mother. (See Vol 23 page 109 no 3305).

May 24 On Admission, was put on B1 (S.R. Complexion light; hair brown; eyes blue; condition of skin good; bodily condition clean. Is well-behaved). Pulse 92. R. 17. Is 99. May 25/94. Slept fairly well, last night; Am. Pulse 90. R 16. Is 100. Appetite poor; bowels regular; is very nervous; walking the hall a great deal. " 26 Says, however, "that he feels splendid, hearty & strong". May 26/94. Again rested fairly well, last night. This " 27 Am. Pulse 88. R 17. Is 101. Is nervous; easily excited; quite discontented. May 27/94. Am. Pulse 83. " 28 Appetite poor; keeps about the same otherwise. Speech, drawling & hesitating. May 28/94. Am. 92. always quiet & well behaved. Appetite still poor. Bowels regular. Patient is cleanly in his habits. " 29 May 29/94. 8 Am. Pulse 84. Quiet & well-conducted; helps a little with the work. Is quite nervous, at " 30 times; also finds some difficulty in Speaking. May 30/94. 8 Am. Pulse 79. Patient is about as usual. " 31 May 31/94. 8 Am. Pulse 82. Patient has been acting quite stupidly all day; wandering aimlessly about the ward and appearing to be "lost". Habits still continue clean. Some difficulty shown in Moving about.

June 1/94 June 1/94. Wt 135 pounds. Pulse 80. June 2/94. Apparently, rests well, at night. By day is up and about. Appetite has slightly improved. Is still easily excited & nervous. At times, will go about the ward & cannot locate his room; acts very Stupidly. Has difficulty in Walking, at times, also in Speaking; Speech is very hesitating & drawling. Helps a little with ward-work. Habits clean. " 6/7 June 6/94. Was today, was transferred to A1. June 7/94. Is very quiet; drowsy & dull, a good deal of the time: sleeps considerably during the day. Says "he has slept well, at night". Appetite is again poor. Is very nervous & easily excited. Speech very hesitating; gait somewhat ataxic. — " 14 Wt 155 pds. Pulse 80. June 14/94. Is quite nervous; wanders aimlessly about, and gets lost on the hall: can't even find his room; tries to assist with the work. Appetite fair; bowels are regular. — " 15 June 15/94. Refused to eat Supper. Shows delusions. Said "he was going to die; that there was nothing " 20 left of him, but skin & bones". June 20/94. Sick & in bed, today. Complains of being weak & says "he is going to die". Was transferred to C2 East (the "Sick Ward"). Was put to bed there. — " 21 Has lain very quietly in bed, all day. June 21/94. Passed about ½ pint of urine, during night. " 22 8 Am. Is quite noisy & wants his Clothes. June 22/94. Raises a good deal of phlegm today, " 24 and complains of Stomach troubling him. June 24/94. Sleeps, nightly, 6 hours, on the average. " 25/26 June 25/94. Was quite restless, when awake, during the night. June 26/94. Lies steadily in bed, " 29/30 though quite restless, at times. Appetite only fairly good. June 30/94. Still sick & in bed.

July 1/2 July 1/94. Was very restless, last night; did not want to stay in bed. July 2/94. Wt 135 pds (in " 7 underclothes); a loss of 11 pounds during past month. July 7/94. Patient has been refusing

Personal and Medical History of Charles O. Atherton

1894 cont'd

July 7 food, Sometimes 2 meals a day, during the past 4 days; ate nothing; refused all food, today. " 8 Was very noisy, in Early part of night & was put in restraint at 8 Pm. Was visited by Dr. Bedient " 9 (brother-in-law) this afternoon. June 8/94. Refused breakfast. 730 Am. Was taken out of " 10/11 restraint. Also refused dinner & supper, today. July 9/94. Was very noisy, all night. Appetite is poor, today. July 10/94. Ate nothing, today. July 11/94. Ate a good breakfast. Was " 12 very noisy this forenoon, talking continually. Rectum appears to be sore. July 12/94. Refused " 13 breakfast & dinner but ate a light supper. Took only a glass of milk. July 13/94. Drank only a glass of milk for breakfast. 12 M. Takes only liquid food, as he has difficulty in Swallowing; 1 Pm. Was visited by some friends, ladies; 6 Pm. Has been very restless all the afternoon. 7 Pm. He " 14 very wild; getting out of bed; was put in restraint. July 14/94. 530 Am. Takes out of restraint. Took a glass of milk at each meal, breakfast & supper; a little Soup in addition, at dinner. " 15 July 15/94. Took only a glass of milk for breakfast; ate a very light dinner. 530 Pm. Has a " 16 great deal of trouble in swallowing & takes only liquid food. July 16/94. Refused breakfast and supper, today; took only a glass of milk for dinner. Marks were discovered having the " 17 appearance of new bed-sores - all were bathed with alcohol. July 17/94. Excited & pounding " 18 his Chest during the night. Took a glass of milk & a little Soup for dinner. July 18/94. Drank " 19 a glass of milk at breakfast & dinner; refused Supper. July 19/94. Was quite noisy all night; has great difficulty in Swallowing); can take nothing but milk - at 12 M and " 20 6 30 Pm, a glass of milk, at each meal. July 20/94. Passed a poor night and seems quite weak, this morning. Patient is rapidly failing - 8.25 Pm. Continues to sink rapidly, and died, at this hour.

Relatives were advised by letter, and, later, by telegram of patient's critical condition. Remains were removed by them.

— Died —

Personal and Medical History of Martin J. Mead (Madden)

KIBBEY, FOLEY & CHAMBERS, DAVENPORT, IOWA

Whole No. 3732.
Residence, "no home"; came from St Joseph's Hospital
Date Admission, 26th May 1894.
Admitted by, D. Phelps — Hour, 7 P.M.
How Sent, John B. Olivier, Jo. P. Ramsey County
Sex, Male
Age, 38
Civil Condition, married
Children, one
Age Youngest Child, —
Occupation, painter
Degree Education, probably fair
Profession Religion, not a Church member.
Habits, not good —
Nativity, Born on the ocean
Physicians Committing, Pierce Marchant & Geo. J. Stanley
Correspondents, None given in papers (see previous history)

No. for Year, 302
Insane Relatives, unknown
Cause Exciting, unknown
Cause Predisposing, previous attacks. —
Form,
Accompanying Bodily Disorder, headaches; nervous tremors.
Suicidal or Not, Not.
Date of this Attack, probably recent
Duration, probably short
No. of Attack, 3d
No. of Admissions, 3d
Age First Attack, about 33.
Time of Leaving, Oct. 8th '94
Time in Hospital, 4 mos, 12 ds.
Result, Improved.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Note by Dr. Ely —

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 Specially Examined with admission —

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

Personal and Medical History of Martin J. Mead (Madden)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6-3/4 WEIGHT, 142 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 Martin J. Mead (Madden)

1894

This man was brought here, (for the 3rd time ®), by Deputy Sheriff H. Chapel, with the following history of his case. Cause of this present attack is unknown: he has no fixed abode; comes, this time, from St. Joseph's hospital. Form of the attack is chronic: has headaches & nervous tremor. This is probably the 3rd attack. He has had others, as per note below ®. Now, holds the delusion that he is being persecuted. Is of a very bad temper & disposed to injure others. Is not suicidal, nor filthy nor destructive. There is no history of any bodily disorder or disease. Has, recently, been under Medical treatment; no results.

Note ® Patient was here, the 1st time, from May 23/90 to May 9/92 — See Vol. 14 page 62. No 2402
and he was here the 2nd " " Oct 29/92 to March 19/94. See Vol 20 " 225 " 3164.

While here, on both of these occasions, he was always more or less troublesome; during his 1st stay, was especially so; then, at times, violent. destructive & ill tempered. He has always been more or less given to grumbling & faultfinding, without any apparent cause & has occasioned, at all times, a good deal of annoyance & trouble to the attendants; trying to make the other patients dissatisfied &c &c. During the latter part of each stay, he worked out some with the painters. He was a patient that could be trusted to only a very limited extent, as he was much inclined to be treacherous.

May 26 On admission, was put on B3 (S. R. Complexion dark; hair dark, eyes dark; Condition of skin good; no marks, scars or bruises noted; bodily Condition Clean. Behavior good. Pulse 79. Lt. T. (o) 99.—).

" 27 May 27/94. Rest somewhat disturbed, as he slept only 2 hours, last night. Stm. Pulse 74 R. 18 T. (o) 99. Appetite poor; bowels regular; is very quiet & well-behaved; does not say much, but answers greetings pleasantly.

" 28 Complains of pains in back & legs. May 28/94. Slept somewhat better, about 6 hours, last night. Stm. Pulse 81.

" 29 Appetite fair. Walks about hall some; appears somewhat nervous. May 29/94. Stm. Pulse 82. Keeps about

" 30 the same. He has a dry Cough. May 30/94. Stm. Pulse 94. Is not so restless today. Does some fault-

" 31 finding. (This was carried to a great extent during both of the times he was here before). May 31/94. Appe-tite poor; bowels regular. Patient has been quite restless all day, walking the floor. Did not say anything.

June 1 June 1/94. Wt 148 lbs. Pulse 78. June 2/94. Stm. Pulse 94. Quiet & well behaved, as a rule: has

" 9 had no "distinct spells" so far. June 9/94. During the last week, patient has rested & slept well, at night. Appetite has improved; bowels are regular. Pulse, the last few days, has become about normal. Has been quiet & well behaved: no "distinct spells" have been noted, though, at times, he would feel somewhat restless and walk the hall a good deal of the time: is out of humor sometimes & will say nothing. Habits have been clean & tidy. Complains of pains in Stomach & right leg, at times. Disinclined to work.

" 30 June 30/94. No special change to note. Still of a grumbling & fault-finding disposition, even on trifles.

July 1 July 1/94. Wt 148 lbs; pulse 75. July 31/94. Continually shows his mean disposition; inclined to make trouble for & among the other patients; always finding fault & grumbling about something. Is easily excited. — Was, today, transferred to B3. Appetite is only fair. Is somewhat troubled with Constipation tho' is a medicine-

" 31 July 31/94. Appetite is now good; bowels more regular. He has been well-behaved since coming on this hall (B3); has caused no trouble to attendants or other patients. Habits clean & tidy: he works at with painters.

Aug 1 Aug 1/94. Wt 135 lbs (Has lost some during last month, yet has not complained of any

" 31 serious ill-feeling. J. Pulse about normal. Aug 31/94. No special change to note, during the month. He seems somewhat better behaved, as a rule, though he is still inclined to be irritable & faultfinding without any cause. Has a "limited Swede". Talks quite sensibly. Habits are neat & clean; physical health seems fairly good.

Personal and Medical History of Martin J. Mead (Madden)

1894

Sept 3/30 Sept 3/94. Patient keeps in quite good flesh & physical condition. Sept 10/94. Was, today, transferred to A4 an "open ward". Sept 30/94. No particular Change noticeable, except that he has been making great improvement in his Conduct & behavior; has been read pleasant & agreeable in his manner; less faultfinding. Has a "limited Swede" & works outside with the painters. Of late, has been very anxious to leave here & go back to his old home, in Ireland, and has been circulating a petition among his friends & others here in order to try & raise enough money to pay his Expenses thither & is meeting with quite good success, in this Connection.

Oct 8 Oct 8/94. Was successful in securing an amount sufficient to pay his Expenses and left for Ireland this afternoon. Going by way of St. Paul, from which point he had ascertained he

CASE RECORD.

Vol. 21 / Folio 377 | 387

Patient's Name Jos. Peka Name Disease Name Physician C.B.E.

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms.
June 20				Gave bath.		Appears to be improving much of late. Eats much better. bowels more regular. Is still quite despondent
" 27				Gave bath		
" 30						Appetite good. bowels regular Patient works some in dining room. Seems melancholy than heretofore

Personal and Medical His... Martin J. Mead (Madden)

1894

This man was brought here, (... St. Chapel, with the following history of his case. Cause of this ... ized above; comes, this time, from St. Joseph's hospital. ... symptoms. This is probably the 3rd attack. He has ... he is being persecuted. Is of a very bad ten... destructive. There is no history of an... results.

Note. Patient was ... and he was ... While he ... especial... to g... de...

... 28 ...

" 29 Appe... ...ent

" 30 the same. ...fault-

" 31 finding. (This ... + Appe-
-ite good; bowels reg... ...ay anything.

June 1 June 1/94. Wt 148 pds. ... rule: has

" 9 had no "distinct spells" so, ...slept well, at night. Appetite has improved; bowels ...ut normal. Has been quiet + well behaved: no "distinct ... seemed feel somewhat restless and walk the hall a good deal of ... + will say nothing. Habits have been clean + tidy. Complains of pain ...times. Disinclined to work.

" 30 June 30/94. No special change to note. Still of a gruff ...dis position, even as trifles.

July 4 July 4/94. Wt 142 pds; pulse 75. July 11/94. Continually shows ...position; inclined to make trouble for + among the other patients; always finding fault + grumbling ...something. Is easily excited. - Was today, transferred to B3. Appetite is only fair. Is somewhat troubled with constipation for which he is a medicine -

" 31 July 31/94. Appetite is now good; bowels more regular. He has been well-behaved since coming on this hall (B3); has caused no trouble to attendants or other patients. Habits clean + tidy. He works at with painters.

Aug 1 Aug 1/94. Wt 135 pds (has lost some during past month), yet has not complained of any

" 31 serious ill-feeling. P. Pulse about normal. Aug 31/94. No special change to note, during the month. He seems somewhat better behaved as a rule, though he is still inclined to be irritable + fault finding without any cause. Has a "limited parole". Talks quite sensibly. Habits are neat + clean; physical health seems fairly good.

Personal and Medical History of Martin J. Mead (Madden)

1894

Sept 3/10 - 30 Sept 3/94. Patient keeps in quite good flesh + physical condition. Sept 10/94. Was today, transferred to A4 an "open ward". Sept 30/94. No particular change noticeable, except that he has been making great improvement in his conduct + behavior; has been most pleasant + agreeable in his manner; less fault finding. Has a "limited parole" + works outside with the painters. Of late, has been very anxious to leave here + go back to his old home, in Ireland, and has been circulating a petition among his friends + others here in order to try + raise enough money to pay his expenses thither + is meeting with quite good success, in this connection.

Oct 8 Oct 8/94. Was successful in securing an amount sufficient to pay his expenses and left for Ireland this afternoon. Going by way of St. Paul, from which point he had ascertained he could ... [illegible]

... nurse, attentive. ...ular. Eat he ...wels regular ...ished records). ...te. Feels better. ...proved very ...g 31/95. Keeps ...ing otherwise. ...ite very good. ...ent as the ...the past few ...good: bowels regular. ...th him.

CASE RECORD.

Vol 27 / Folio 377 / 3807

Patient's Name Joe Peska Name Disease Name Physician C.B.E.

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms
June 1	98.4	68	18			
	99	76	20			
" 2	98.6	72	20			
	98.6	72	20			
" 3	98.4	70	18			Weight 137 ½ pounds
	98	60	18			
" 4						Patient improved every day
" 5	98	64	18		Patient is on regular and extra diet	Appetite good complains of feeling worse this a.m.
" 6	98.3	68	18	Gave bath		
" 7	98	68	20			
" 8	98.4	76	18			Patient is quite despondent frequently crying and thinks everyone is going to harm him
" 9	98.4	72	18			
" 10					on regular and extra diet	
" 11		68				
" 12		84				
		80				
" 13		82		Gave bath		Appetite improving of late Goes out on grounds every day.
		68				
" 14		72				
		80				

Recorded by _____ Nurse.

1894

EMERY, PIGLER & CHAMBERS, DAVENPORT, IOWA.

This man was brought her... of his case. Cause of h... St Joseph's hospital ... the 3rd attack. Hel... Is of a very bad... no history of ...

Note. Patient w... and he ... While ... esp ... t

" 28 Is.

" 29 Appetite ...

" 30 the same. ...

" 31 -finding. (This m... -ite poor; bowels regu...

June 1 June 1/94. Wt 148 pds. ...

" 9 had no "distinct spells" Sop... night. Appetite has improved; bowels ... been quiet & well behaved: no distinct ... restless and walk the hall a good deal of ... Habits have been clean & tidy. Complains of pain ... times. Disinclined to work.

" 30 June 30/94. No special change to note. Still of a gru... g disposition, even on trifles.

July 24 July 1/94. Wt 142 pds; pulse 75. July 11/94. Continually sho... disposition; inclined to make trouble for & among the other patients; always finding fault & grumbling ... something. Is easily excited. - Was today, transferred to B3. Appetite is only fair. Is somewhat troubled with constipation & is a medicine -

" 31 July 31/94. Appetite is now good; bowels more regular. He has been well-behaved since coming on this hall (B3); has caused no trouble to attendants or other patients. Habits clean & tidy: he works at with painters.

Aug 1 Aug 1/94. Wt 135 pds (has lost some during past month, yet has not complained of any ... serious ill-feeling. J. Pulse about normal. Aug 31/94. No special change to note, during the month. He seems somewhat better behaved, as a rule, though he is still inclined to be irritable & fault finding without any cause. Has a "limited garde". Talks quite sensibly. Habits are neat & clean; physical health seems fairly good.

1894

Sep 3/30 Sept 3/94. Patient keeps in quite good flesh & physical condition. Sep 10/94. Was today, transferred to A4 an "open ward". Sep 30/94. No particular change noticeable, except that he has been making great improvement in his conduct & behavior; has been made pleasant & agreeable in his manner; less fault finding. Has a "limited garde" & works outside with the painters. Of late, has been very anxious to leave here & go back to his old home, in Ireland, and has been circulating a petition among his friends & others here in order to buy & raise enough money to pay his expenses thither & is meeting with quite good success, in this connection.

Oct 8 Oct 8/94. Was successful in securing an amount sufficient to pay his expenses and left for Ireland this afternoon. Going by way of St. Paul, from which point he had ascertained he could purchase a ticket to the best advantage.

Discharged

Joseph Peka Jr.

From 380.

June 14 June 14/94. Appetite improving, of late. Goes out on grounds, every day. Still, very despondent, at times.

" 20 June 20/94. Appears to be improving much, of late; Eats much better; bowels more regular. Yet he

" 30 is still quite despondent. June 30/94. Has left an improving - appetite is good & bowels regular - works some in dining-room & is less melancholy, than heretofore. (2 attached records).

July 3 July 3/94. Wt 150½ pds. Pulse normal (about): patient has been gaining in flesh, of late. Feels better.

" 25 July 25/94. Works on ward much: appetite good: bowels in good condition: Has improved very much during past month. Cheerful & contented. Goes out on grounds, every day - July 31/94. Keeps on steadily improving. Aug 1/94. Wt 164 pds: continues to gain in flesh, and is improving otherwise.

Aug 1 Aug 3/94. Visited by father, mother & sister, today - Aug 31/94. Sleeps & rests well. appetite very good: bowels in good condition - Patient doing nicely: Works on ward: seems more cheerful. Goes out on the

Sep 4 grounds daily. Wants to go home. Sep 4/94. Wt 155½ pds. Pulse about normal. For the past few days, patient has appeared drowsy, dull, & somewhat stubborn, at times - appetite good: bowels regular. Otherwise, condition about the same - Sep 11/94. Visited by father & allowed to go home with him.

Discharged

Personal and Medical History of Giovanni B. Zan

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3733.

Residence, Unknown. —

Date Admission, 28th May 1894.

Admitted by, Dr. Phelps Hour, 7 PM.

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

Sex, Male.

Age, unknown.

Civil Condition, unknown.

Children, —

Age Youngest Child, —

Occupation, not stated

Degree Education, not stated

Profession Religion, not stated.

Habits, not stated

Nativity, Italy —

Physicians Committing, J. M. A. Gavel & G. J. Hanley

His brother lives in this country

Correspondents, address J. S. Zan

37, Chester St Louis Mo

No. for Year, 303.

Insane Relatives, not stated

Cause Exciting, not stated

Cause Predisposing, not stated.

Form,

Accompanying Bodily Disorder, None mentioned

Suicidal or Not, not stated

Date of this Attack, probably

Duration, probably

No. of Attack, not stated

No. of Admissions, 1st

Age First Attack, not given

Time of Leaving, July 10 —

Time in Hospital, 1m - 2d.

Result, Recovered.

ZAN HAS WHEELS.

Pioneer Press July 14/94

He Was a Professor at Notre Dame University.

The unknown insane man found on the streets Friday was found to be a John B. Zan, that name being on his shirt. He is a remarkably fluent man, speaking English, French, Italian and Spanish with pure accent, and appears to be of the better class. He could not be prevailed upon to talk of himself or his past history, confining his conversation to religious subjects. He was committeed to the asylum at St. Peter. Father Cleary went to the jail yesterday and held a conversation with the unfortunate man, learning that he was a professor in the Notre Dame university South Bend, Ind. He stated that he had let himself down from a window twenty-five feet above the ground, by means of tying his bed blankets together. He then purchased the clothing he now wears as a disguise, and boarded a train. From that time his wanderings began.

EXAMINATION ON ADMISSION.

Exd by Drs Phelps & Ely May 29/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, Quick

MEMORY:

Past Events, good

Recent Events, good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, good

Own Mental State, good

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

See note on page 255

EMOTIONAL STATE:

Normal, Calm, Normal & Calm

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS: None

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Voluble

Personal and Medical History of Giovanni B. Zan

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 in WEIGHT, 134 lbs. NUTRITION, Quite Good.

WOUNDS OR ABNORMALITIES, varicose veins of right leg.

TONGUE, Tremors, very slight Coatings, none Promptness Movement, quite prompt

PUPILS, Equality, Equal Size, slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good —

HEARING, Good —

COORDINATION, Arms, Fingers & nose, eyes shut, good.

Legs, Standing on foot, Hands steady; Standing, eyes shut, no swaying.

TREMORS, Hands, none Tongue, slight

Facial Muscles, none General, none

REFLEXES, Patellar, Equal, about 3 or 4 —

Other Reflexes,

ARTICULATION, ~~Hesitating~~, good Slurred,

FACIAL EXPRESSION, good —

SENSIBILITY, Normal

HEART, Sounds good —

LUNGS, Sounds good —

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Kept Constipated, Irregular,

APPETITE, Good, Recd 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 dead.

Father or Pat. Relations, Father living —

Brothers or Sisters, 1 brother; no history of any hereditary tendency.

Personal and Medical History of Giovanni B. Zaw

ALBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3733.
Residence, Unknown. —
Date Admission, 28th May 1894.
Admitted by, Dr. Phelps Hour, 7 PM.
How Sent, John B. Oliver, Jof C. Ramsey County
Sex, Male.
Age, unknown.
Civil Condition, unknown.
Children, —
Age Youngest Child, —
Occupation, not stated
Degree Education, not stated
Profession Religion, not stated.
Habits, not stated
Nativity, Italy —
Physicians Committing, J. M. A. Gavel & G. J. Hauby
Correspondents, his brother lives in this Country address J. S. Zaw 371 Chester St Louis Mo

No. for Year, 303.
Insane Relatives, not stated
Cause Exciting, not stated
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, none mentioned
Suicidal or Not, not stated
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, July 10-'94
Time in Hospital, 1m - 2d.
Result, Recovered.

FOR THE BABY.
Fine Saxony Jackets, all white or with blue and pink trimmings, only 50 cents.
Short Dresses of fine India Linon, 9-inch hemstitched hem, embroidered ruffle at neck and sleeves, 2 and 3 years sizes. $1.15.
WASH GOODS.
A delayed shipment of our best materials for Shirt Waists

EXAMINATION ON ADMISSION.

Exd by Dr. Phelps & Ely. May 29/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, Quick
MEMORY:
Past Events, good
Recent Events, good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Good
Own Mental State, good
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
See note on page 255

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

Personal and Medical History of Giovanni B. Zaw

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7in WEIGHT, 134 lbs. NUTRITION, Quite Good.
WOUNDS OR ABNORMALITIES, varicose veins of right leg
TONGUE, Tremors, very slight Coatings, none Promptness Movement, quite prompt
PUPILS, Equality, equal Size, slightly dilated
Response Light, yes Accommodation, yes
SIGHT, Good —
HEARING, Good —
COORDINATION, Arms, fingers & nose, eyes shut, good.
Legs, standing on foot, Hands steady; standing, eyes shut, no swaying.
TREMORS, Hands, none Tongue, slight
Facial Muscles, none General, none
REFLEXES, Patellar, Equal, about 3 or 4 —
Other Reflexes,
ARTICULATION, ~~Hesitating,~~ good Slurred,
FACIAL EXPRESSION, Good —
SENSIBILITY, normal
HEART, sounds good —
LUNGS, sounds good —
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 ONSET GRADUAL OR SUDDEN, sudden
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations, mother dead.
Father or Pat. Relations, father living —
Brothers or Sisters, 1 brother; no history of any hereditary tendency.

Personal and Medical History of Giovanni B. Zan.

1894

EBERT, FICLAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy-Sheriff M. N. Goss, with the following history, which is very meagre. Nothing seems to be known about him, or stated about his case beyond the following; viz: that he was born in Italy; form of this attack is acute; shows a disposition to filthy and destructive habits. He has not been confined or restrained. ——"——

May 28 On admission, was put on Bd. (S.D. Complexion dark; hair black; eyes gray; condition of skin good; has sores & scars on left leg. Bodily condition clean; has also a birth-mark on left leg; behavior is good). P 68. R 17. T 98.5.

" 29 May 29/94. Slept 7 hours, last night. Am P 72. R 16. T 98.8. Appetite good; bowels genually free; no cough noticed. Is quiet & well behaved. Talks freely & sensibly; shows no delusions. Seems quite contented here. —

" 29 Notes. Patient is a "Sculptor". Nine years ago he had a severe fall & injured his head, so that skull had to be trephined & bone raised. Since his fall he has had periodical attacks of insanity; first, one followed about 3 weeks after injury & then at intervals of about 3 months. He has no premonitory signs & attacks come on suddenly. He has no knowledge of anything that happens during "Spells", except as it is told him afterwards. He gives a very clear account of his life &c. He says, during a "Spell" he wanders away & is very religious; tears off his clothes; when not in a "Spell" he is not religiously inclined. He worked at the "World's Fair", and, while there, had one "spell". Lately, he worked in Minneapolis as a "lightening artist" in the Dime Museum, but lost his place, as he wandered away & so lost his place, as his employer thought he got drunk. May 29/94. Slept quietly, 8 hours, last night. AM. Pulse 66. R 16. T 98.6. —

" 30 Appetite good: behavior good. Works in ward; makes no complaints. PM " 68 " 16 " 98.8 —

" 31 May 31/94. Again slept quite well, 7 hours, last night. AM. Pulse 68. R 16. T 98.6. Behaves well. Works intelligently & willingly. PM. Pulse 72. R 18. T 98.8. Personal habits are good. ——. —

June 1 June 1/94. Slept quite well, last night. AM. Pulse 70. Talks freely & sensibly; no delusions are noted. —

" 2 June 2/94. A little restless, but slept 6 hours, last night. AM. Pulse 72. Weight, today, 138 pds —

" 3 June 3/94. Restless, sleeping only about 4 hours, last night. AM " 70. Behaves well; talks freely; makes no complaints; helps willingly with the work in ward. June 4/94. Restful, sleeping 8 hours,

" 11 last night. AM. Pulse 70. June 11/94. Patient has been resting & sleeping well, during the past week, (8 hours each night). Pulse, taken each morning, has been about normal. Appetite has been good; bowels regular. He has been pleasant & agreeable in manner, free in conversation: talk has been quite rational; he has shown no delusions, nor have any "Spells" been observed since his coming here; has made some models & given some exhibitions of work in his "line". Works well & willingly. Habits are clean & neat. Seems quite contented here. Patient is in quite Good Physical condition.

" 30 June 30/94. Uniformly quiet & well-behaved. Is quite a "free" talker, somewhat given to boasting &c. No "Spells" have been noticed or reported as yet, & he himself says he has had no such "feelings" since coming here. Spends a good deal of his time at the hard at making models out of soap, in which line he is quite an artist. Habits are clean & neat; health good.

July 1/10 July 1/94. Wt 145 pds. (a gain of 11 pounds in about 5 weeks). July 10/94. Has continued to make quite steady improvement. None of these "peculiar spells" have been noticed since his admission. He has been, at all times, quiet & well behaved: pleasant & sociable; somewhat "free & easy" in his manner — Health is good —

Was permitted Sleave today, on trial.

Discharged

Personal and Medical History of Herman Fossback

How 152

1894 cont'd

June 30 but bowels are constipated & irregular. Still subject to these "Spells". Talks incoherently. Habits, at times, dirty. (number of days dirty 3; number of hours in restraint 9½; during this month). ——

July 2/6 July 2/94. Wt 159 pds. Pulse 88. July 6/94. Has convulsion during night. July 7/94. Very restless & quite

" 8 noisy for 6 hours or so; would not stay in bed. July 8/94. Quite noisy & restless, all day; could not be kept in bed; was running around in his room; jumping over bed; climbing steampipe; up on door, to look out through transom;

" 9 was put in restraint sheet at 7.30 PM. July 9/94. Quite noisy for 7 hours, and slept only 1½ hours, last night.

" 12 Had 2 convulsions, during the night. July 12/94. Patient seems improving some; talks quite rationally;

" 13/15 appetite also good. July 13/94. Is up & on the hall, today. July 19/94. Complains of headache & of not

" 20/25 feeling well. July 20/94. One convulsion reported during the night. July 21/94. Had one convulsion, during

" 26/31 the night. July 25/94. Did not feel well this morning; remained in bed all day. July 31/94. Patient has been sick in bed, the past few days & is still there. Sits continue to vomit. Appetite is fairly

Aug 1/10 good at present, but, at times, is very poor. Is quietly behaved; just now seems somewhat brighter, &

" 11/13 31 talks quite rationally. Complains occasionally of pain in chest. Habits are cleanly —

Aug 1/94. Wt 158½ pds. (in underclothing). Pulse 80. Aug 10/94. Is still confined to his bed. Eats tolerably fairly

Aug 11/94. Is up & on the hall, today. Aug 13/94. Is again taking medicine. Aug 31/94. Has continued up,

and about. Appetite fairly good; bowels apparently regular. Is quietly behaved; sitting in one place

mostly all day, of late; appears to be failing, mentally; speaks but very seldom & when he does, it is in

such a low tone that he can hardly be understood. Still subject to convulsions. Does not go out

walking with the rest, of late. Habits are cleanly. Is still on medicines. ——

Sep 1- Sep 1/94. Could not get out of bed, this morning; appeared weak & remained in bed. Right side seems

" 3 somewhat helpless (D.P.). Sep 3/94. Wt 152 pounds. Pulse 82. (has lost considerably in flesh).

" 15 Sep 15/94. Has been restless for from 5 to 6 hours, most of the past 4 nights, sleeping poorly.

Patient has also been growing very weak & appears to be in a sort of stupor; does not know enough

" 16 to feed himself, but has to be fed; also filthy in habits; soils his bed. Sep 16/94. Restless 5 hours;

slept only 4 hours, last night. (Dr P's note. Has been quite stupid; indications are that one of his

convulsions, about 1st Sept, was apoplectic in type, for he has not yet regained use of right hand,

and can use right leg, but poorly; does not swallow well; chokes; hacking loose cough). —

" 18/20 Sept 18/94. Slept only 4 hours, during the night. Sep 20/94. Patient has not partaken of any

food for 3 days; appears as if he cannot swallow; bowels have not moved for a couple of days.

" 21 (Was given croton oil this evening by Dr. H.). Sep 21/94. Bowels not yet moved; was given Enema;

bowels then moved slightly. Drank about a cupful of milk for breakfast & about a half cup for

" 22 dinner; took about ¾ pint of milk for supper. Sep 22/94. Would not take any milk for

breakfast; would close his mouth so that no milk could be got into it except very little

which almost choked him: keeps coughing a good deal when trying to swallow anything.

Is somewhat more restless, this morning: usually, cannot keep him covered up very well.

Cannot move his right leg or arm; appears to be pained, when moved. Slept only about 3

hours during the night. Has taken only about 1 teacupful of milk during the day. Bowels

" 23 have not moved. Seems to be coughing more today, than usual. Sep 23/94. Has not taken

any milk during the day, as he will not swallow. Appears failing rapidly. Relatives advised.

" 24 9 AM. Pulse 80. R 50. Sep 24/94. Has taken only about ½ doz. tablespoonfuls of milk during day;

" 25 seems low this evening. Pulse about 150 & very weak. Respiration 60. Sep 25. Continues to sink rapidly

& died at 4.40 AM. — Jurors advised & duly called at 4 PM —

= Died —

Personal and Medical History of Sam Olson

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3736.

Residence, Austin, Minn.

Date Admission, 1st June 1894.

Admitted by, Dr Phelps Hour, 7 PM

How Sent, S.S. Washburn, Jof C. M'Power

Sex, Male.

Age, 19 years

Civil Condition, Single

Children, none

Age Youngest Child, —

Occupation, Farm-laborer

Degree Education, not stated

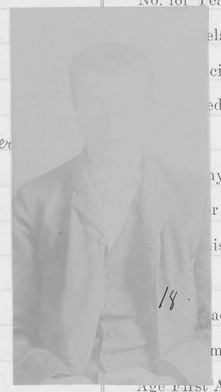
Profession Religion, Yes, Lutheran

Habits, Good.

Nativity, Minnesota —

Physicians Committing, A W Allen & Alex MacDonald

Correspondents, S. L. Erickson
Austin, Minn



No. for Year, 306.

elatives, none

citing, not known

edisposing, Epilepsy

aying Bodily Disorder, Epilepsy

r Not, not.

is Attack, about a Year ago.
about a year

ack, not 1st

missions, 1st

Age First Attack, (?)

Time of Leaving, Dec. 24th 1897

Time in Hospital, 3 yr. 6 mo. 23 da

Result, Died Tuberculosis Pul.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd by D. Ely, June 9/94.

MENTAL ACTIVITY:

Clear or Confused, Confused

Quick or Sluggish,

MEMORY:

Past Events, Poor

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Fair

Own Mental State, Impaired

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed, Depressed

DELUSIONS:

Systematized or Not, not systematized

Special Subjects,

Transitory or Not, Transitory

HALLUCINATIONS: yes

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, coherent

Voluble or Reticent, not voluble

Personal and Medical History of Sam Olson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10½ WEIGHT, ✓ NUTRITION, Fair

WOUNDS OR ABNORMALITIES, see "S. R." on next page.

TONGUE, Tremors, slight tremors Coatings, white Coating Promptness Movement, Prompt

PUPILS, Equality, equal Size, dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, fingers to nose, eyes shut, no incoordination,

Legs, standing, eyes shut, stands steady

TREMORS, Hands, none Tongue, slight

Facial Muscles, none General, none

REFLEXES, Patellar, equal – about 8 —

Other Reflexes,

ARTICULATION, Hesitating, hesitating Slurred,

FACIAL EXPRESSION,

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, 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 Sam Olson

1894 EBERT, FICKLAN & CHAMBERS, DAVENPORT, IOWA.

This man was brought here by his Step-father, with the following history. Patient is an Epileptic. There is no history of heredity. Cause of this attack is not known; first symptoms manifested about a year ago; has probably had many attacks; at present he thinks his clothes are filled with ignited and ignuting fire-crackers; patient is disposed to injure others from sudden passion, but is not suicidal, nor filthy nor destructive. He has not been restrained or confined. Has been under medical treatment, but no effects. (Popularly supposed to be a masturbator, but no proof).

June 1 On admission, was put on B3 (S. R. Complexion dark; hair brown; eyes brown; condition of skin good; has scars, one left eye, and on left leg; bodily condition dirty. Is well-behaved).

" 2 June 2/94. Did not sleep any during the night, but slept a couple of hours this PM. AM. Pulse 98. R. 28 T(e) 100 E. PM. Has not partaken of any food, all day; drank about 1 pint of milk for supper. Bowels have not moved: no cough observed. Was restless, lying about on the floor; was put to bed, but would not lie still, getting out on floor & under bed; was placed in restraint sheet at 6. PM. Is very noisy in his talk.

" 3 No complaints or injuries to report. June 3/94. Rattles & hums during the night, slept only 3 hours or so. Appetite poor; does not partake of any solid food, but drinks fairly of milk. Seemed to have fever during the day & cold applications were kept on his head all day. June 4/94. Slept only 3 hours, last night; was restless for about 6 hours. He appears somewhat better today; appetite also improving. Has now been

" 5 in restraint 24 hours. June 5/94. Again passed a poor night, last night, restless 6 hours, sleeping but 3 hours. Appetite fairly good; behavior quieter than yesterday. Restraint sheet taken off at 9 AM.

" 6 (was in restraint 2 hours). T(e) 108. Wt today, 126 pds. June 6/94. Slept poorly, last night. Sleeps, however, a good deal in the day time. AM. Pulse 72. T(e) 98.7. Appetite fair. Is quietly

" 7 behaved. Will answer, sometimes, when spoken to. June 7/94. Restless 4 hours, sleeping only 5 hours last night. Appetite fairly good. AM. Pulse 73. T(e) 98.6. Apparently is improving some.

" 8 June 8/94. Passed another poor night; sleeping only 5 hours; restless 4 hours. Appetite good; bowels have

" 9 moved. AM. Pulse 75. Talks freely; seems much improved. June 9/94. Restless 3 hours, but sleeping 6 hours, last night. AM. Pulse 74. Seems to be steil gaining. Habits are cleanly. —

" 10 June 10/94. Slept 6 hours, last night. Appetite very good. Bowels regular. Pulse (this AM) 78. He

" 11 seems quite improved, though a little weak. June 11/94. Slept fairly well (6 hours) last night. Had one convulsion, during the night; but got up this morning. Appetite continues good. —

" 12 June 12/94 Restless 4 hours, sleeping only 5 hours, last night. Had one convulsion last night. AM. P 78.

" 13 Was, today, transferred to B2. June 13/94. Slept 8 hours, last night; was dirty. Had one convulsion;

" 14 AM. Pulse 76. Appetite fairly good. Makes no complaints. June 14/94. Slept 8 hours, last night. Had one convulsion & fouled himself during the night. AM. Pulse 80. "Says he has bugs on him." —

" 15 Is very stupid. June 15/94. Slept only 4 hours; was restless about 5 hours, last night. AM. Pulse 82. Is stupid & dull; has to be dressed & undressed. Is cautious & stubborn. Appetite poor; bowels costive.

Summary. Behavior has not been the best; he has been more or less restless, especially for first few days after admission; he is dull, stupid, obstinate & stubborn; has to be dressed & undressed; he eats his meals & sets out. Dirty & untidy in habits; mind seems weak & confused. Was, physically, very weak from admission but of first week; then improved some. Has had a few nocturnal convulsions

" 16 June 16/94. Ate no breakfast; is very stupid; had to be dressed. Took off his clothes several times, in morning. "Imagines there are bugs on him." Was transferred to B3. —

Personal and Medical History of Sam. Olson

1894

June 19/94 Patient's mother visited him, today. June 22/94 Patient had a fit, while out in Summer-house, today, and, during it, he rubbed off portions of skin of both wrists. June 30/94. Appetite good; bowels regular; Behavior is rather quarrelsome; he often provokes a fight with other patients. Seems very dull & stupid, most of the time. He talks idiotically & is very profane. Appears to be in fairly good health, for him. (Was dirty 2 days, during the month; has had 6 fits from time of admission of admission up until this date).

July 2/94. Wt 149 pds. Pulse 76. July 31/94. No special change to report, except that on 29th & 30th he moves

Exceedingly more sicky than usual; went about ward, almost doubled up; knocking up against everything and everybody, that came in his way. Had 12 fits, during the month. Habits more cleanly (dirty only 1 day during month).

Aug 1/94. Wt 145 pds. Pulse 76. Had a scuffle with patient Frank P. O'Brien, this morning; O'Brien got his right eye-brow cut and bruised. Aug 31/94. Behavior is good, though he is occasionally quarrelsome. Has "peculiar spells", at irregular intervals, when he rolls around ward, on the floor; (recently on evening of 27th & all day of 28th inst). Patient was utterly oblivious of all that was passing around him. Was noisy & screaming, during the night, & all day, his arms & legs were constantly in motion, while he kept rolling his body round, on the floor. The skin & flesh over the bones of the pelvis, on each side of the abdomen are inflamed, caused, apparently, by rubbing on the floor. Patient had 11 fits during the month. —

Sep 1/94. Wt 148 pds. Pulse 84. Sept 4/94. Patient's mother visited him, today. Sept 9/94. Has had 3 fits, this month, up to date. On account of repairs being made to the lower ward, this patient was, with several others, moved to B3, today. Sept 17/94. During past week, patient has had 2 nocturnal convulsions, and two, by day. Had a convulsion, this morning, and fell on floor, raising a lump on his forehead. Has been lying in bed, all day; is very stupid, and apparently unconscious of his surroundings. Sept 18/94. One convulsion during last night.

Sept 21/94. One Convulsion, today. Sept 23/94. One convulsion during night. Sept 30/94. There is no change to note in patient's condition, and notes, for past few months, still hold good, at this date.

Oct 1/94. Wt 154 pounds (some gain in flesh). Pulse 84. Oct 10/94. Visited by his father & mother. Oct 11/94 was again to visited. In company with another patient (P. Knudson) attempted to run away, today — but were caught by attendants of some of the other wards & they were brought back.

Oct 31/94. Since last note, patient has had 9 nocturnal fits, and 3, by day. During the last of these he fell & cut his face. Since coming in this (B3) ward, none of the "peculiar spells" (mentioned in Aug 31st Report above) have been noticed. In other respects, no material change.

Nov 1/94. Wt 151 pds. Pulse 84. Nov 17/94. Patient fell, to-day, when coming in from walking) & cut his leg, quite severely; was put to bed. Nov 24/94. Up, on ward, today. Nov 30/94. During this month 8 nocturnal convulsions, and one by day, have been reported. He is cautious & stubborn & most of the time very stupid; causes trouble with the patients, quite frequently & also gets into frequent quarrels. Talks to himself. Some of his "spasms" are quite severe. Inclined to be dirty in his habits. —

Dec 1/94. Wt 144½ pds. Pulse 84. Dec 31/94. 9 nocturnal convulsions reported for the month and 5 as occurring by day. In 2 of these he fell & cut his face slightly; also his forehead some. Patient is apparently growing worse; acting very stupidly: mental power very much impaired. Habits are still somewhat dirty. (2 days dirty during month). Physical condition seems quite good.

Jan 1/95. Wt 153 pds (has regained his lost flesh). Pulse 86. — Jan 14/95. During last 2 nights, he has

(carried to 316)

Personal and Medical History of Albert Noonan

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3741.
Residence, Winona, Minn.
Date Admission, 9th June 1894. —
Admitted by, D. Phelps — Hour, 7 PM.
How Sent, N. L. Buck, Jof P. Winona County.
Sex, Male.
Age, 23 years.
Civil Condition, Single.
Children, —
Age Youngest Child, —
Occupation, not given.
Degree Education, probably fair.
Profession Religion, Yes, Catholic.
Habits, not very good.
Nativity, born in Winona, Minnesota.
Physicians Committing, D A Stewart and N. J. English.
Correspondents, Wm Noonan, father, Winona, Minn.

No. for Year, 311.
Insane Relatives, none.
Cause Exciting, masturbation.
Cause Predisposing, previous attacks? Masturbation.
Form,
Accompanying Bodily Disorder, none mentioned.
Suicidal or Not, not suicidal.
Date of this Attack, about 5 years ago.
Duration, about 5 years (off & on).
No. of Attack, 1st (Continuous).
No. of Admissions, 3rd.
Age First Attack, about 15.
Time of Leaving, Mch 29 '95.
Time in Hospital, 9 mo 20 ds.
Result, Imp.

EXAMINATION ON ADMISSION.

Exd by D. Eby, June 11 '94

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Yes.
DELUSIONS:
Systematized or Not, not.
Special Subjects,
Transitory or Not,
HALLUCINATIONS: None.
ILLUSIONS: None.
CONVERSATION:
Coherent or Incoherent, coherent.
Voluble or Reticent, reticent.

Personal and Medical History of Albert Noonan

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6 ¾ WEIGHT, 110 pds NUTRITION, Quite Good
WOUNDS OR ABNORMALITIES, See "S. R." on next page
TONGUE, Tremors, tremulous Coatings, none Promptness Movement, prompt
PUPILS, Equality, equal Size, dilated
Response Light, yes Accommodation, yes
SIGHT, Seems good
HEARING, Good.
COORDINATION, Arms, Finger & nose, eyes shut, Correct
Legs, Staunch, Eyes shut, steady.
TREMORS, Hands, yes Tongue, yes
Facial Muscles, none General, yes
REFLEXES, Patellar, equal — about 8 —
Other Reflexes,
ARTICULATION, Hesitating, good Slurred,
FACIAL EXPRESSION, Depressed
SENSIBILITY,
HEART, Sounds good, but quite frequent.
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, 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 Noonan

1894

This patient
The present trouble is
masturbation
Symptoms were
attack + contr
members of his
In destructive
Note ⊕ As stated abo
from Oct 22/
them occasion
June 9 On admission
Scars noted: h
" 10 June 10/94.
bowels genual
" 11 makes no Com
night. Am.
" 12 June 12/94. Ag
" 13 Bowels are fre
Am. Pulse 68
" 14 June 14/94. Re
" 15 June 15/94. Re
" 16 June 16/94. M
" 23 June 23/94.
restless + slept
uniformly u
bowels appare
Habits have
improved. No
" 30 June 30/94. N
July 2/31 July 2/94. Wt
freely; no del
Aug 1/31 Aug 1/94. Wt
Sept 1/30 Sept 1/94. Wt
Oct 1/31 Oct 1/94. Wt 119
Behave well.
" 31 Oct 31/94. Keeps about the same. Quiet; well-behaved. Is idly about some things - Inclined to keep
his pockets filled with old papers + other stuff - says "they are so valuable". A good + willing worker.
Nov 1/30 Nov 2/94. Wt 118½ pds. Pulse 90. Nov 3/94 - Troubled with corns - Same treated + are doing nicely.
" 30 Nov 30/94. A quiet patient. Does some work on ward. Appears to be contented; health fairly good. -
Dec 3/31 Dec 3/94. Wt 116½ pds. Pulse 100. Dec 31/94 Continues quiet + well - behaved - Seems quite contented.

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CASE RECORD.

Patient's Name Noonan Albert ~~Name Disease~~ 3741 Name Physician Mch.

Date.	Temp.	Pulse.	Resp.	Medicine, Baths, Enemata, etc.	Food.	Action Bowels, Kidneys, Skin and Other Symptoms
Mch. 25				11 A.M. Received on ward from B1. Gave bath and put to bed. P 84 R 28 T 99.8		
	P.M. 99.6	84	28	Patient appears quite run down. + complains of pain in lungs. There is a very offensive odor about patient.		
Mch. 26	99.2	92	24	Patient eats heartily. On medicine three times daily. Bowels moved 10 30 A.M.		
	100	76	24			
Mch 27	98.8	76	24	99 - 72 - 28.		
Mch. 28	99	68	16	Patient looks brighter and is apparently improving.		
" 29	98	72	20			
	99	72	24	11 30 A.M. visited by mother. 5 30 Home.		

Recorded by _____ Nurse.

1895

Jan 3/29 Jan 3/95. Wt 117 pds. Pulse 98. Jan 31/95. Keeps about the same. Works on ward. Appetite not good; bowels are regular. Is pale, quiet + rather dull. Health apparently not good, but keeps about the same. —
Feb 2/28 Feb 2/95. Wt 114½ pds. Pulse 96. Feb 28/95. Appetite only fair; bowels regular; Complains at times of headache; seems to be failing mentally + physically. Is very untidy about his person. Works some.
Mar 2/29 Mar 2/95. Wt 113 pds. Pulse 98 Mar 23/95. Complains today, of severe headache + pain in Chest, though he still remains up, at work. Appetite fair. Pulse 82. March 23/95. A.M. Pulse 84.
" 23 Is about the same. March 24/95. Appetite failing; he remained in room, most of the day; Com-
" 24 plains of severe pain in lungs, but does not cough. Pulse 102. T. 98 - Mar 25/95. Slept
" 25 7 hours, last night, restless at hour wks. Transferred to "Infirmary Ward", at 11. Am. Was given a bath + put to bed. Pulse 84. R 28. - T 998 - Patient appears quite run-down.
" 26 Complains of pain in lungs. (There is a very offensive odor about patient). Mar 26/95. Patient
" 27 Eats heartily - Is on medicine, 3 times a day; bowels moved this Am. Mar 27/95. About as usual.
" 28/29 March 28/95. Looks brighter, today, his apparently improving - March 29/95. 11 30 Am. Was visited by his mother - 530 Pm. Taken home by his mother, on trial. (see attached record)

— Discharged —

1895 From 220. James Leach

Nov 2/30 Nov 2/95 - Wt 131 pds. Pulse 76. Nov 30/95. Remains in about the same condition, from 1 month to 6 months. Appetite good: bowels regular. Is very quiet. Sleeps well: goes walking every day.
Dec 2/31 Dec 2/95. Wt 129 pds. Pulse 76. Dec 31/95. No change noticeable in any way. Is very quiet.
1895/96 Jan 2/31 Jan 2/96 Wt 127 pds. Jan 21/96. Transferred to B3 (on account of general change of the wards).
" 31 Jan 31/96. Keeps about the same, all the time + noted, for several months back, still holds good.
Feb 29 Feb 1/96. Wt 125 pds. 172. Mar 1/96. Wt 122 pds. P 80. Appetite good: bowels in good condition. Patient is
Mar 1 suicidally inclined, but has not made an attempt at suicide for some time. Is very quiet, well-behaved
" 26 today. Sleeps well. In good condition physically: makes no complaints. Mar 26/96. Complains, the last few days, of feeling soreness in small-of-back. Porous Plaster applied, and back is done better. To day
Apl 2/31 Apl 2/96. Wt 120 pds. Pulse 90. Apl 28/96. Patient is considerably brighter, of late, than usual. Behavior good: Sleeps well, at night.
May 1/96 to Aug 1/97 Summary Nurses Notes by Dr. Phelps Patient in quite uniformly good health: behaves fairly well. Is quiet + melancholy: Works some: Wt. 120 lbs. Continued by Dr Herzog Aug 1 97 Wt. 122. Very quiet. Works on ward: Habits clean, dress neat, Does not speak much except in answer to questions: Is melancholic + has delusions of persecution Jan 5 98 Wt. 176 lbs. Still melancholic but more talkative than at last note. Apr 4 176½ lbs. No change in condition. Works a little on ward talks + jokes. Speaks quite rationally on ordinary subjects. Still has delusions of persecution. Very neat in dress: at times quite agreeable. June 6 Wt. 178 lbs. July 6 180 lbs. Takes part in amusements.
Sept 1. Wt. 180 lbs. No change in condition. Sept. 16 Visited by wife + taken home by her on trial. Has suicidal history but has shown no signs of suicidal tendencies of late + believed to be fairly well

Discharged

Personal and Medical History of Albert Noonan

1894

This patient was brought here by his father, and in charge of S[illegible] Jay, with the following history. The present is his 3rd admission here. There is no history of any [illegible]ety. Supposed cause of this attack is masturbation: form of attack is chronic + paroxysmal. Patient is subject to suppressed eruptions. First symptoms were manifested about 5 years ago, by attacks of sullenness + violence. This appears to be the 1st attack + continuous. He is now very irritable; destroys furniture; is slovenly; spits on floor; attacks the members of his family + is disposed to injure others, apparently from premeditation. Is not suicidal, however. Is destructive + filthy in person. He is a tobacco-fiend + suffers from its use.

Note. As stated above, patient has been here twice before, the 1st time from Nov 1/88 to March 16/89, and the 2nd time from Oct 22/90 to Dec 18/93. (See respective records Vol 11 p 98 No 1898; and Vol 14 p 183 No 2523. On both of these occasions patient was improved on being taken home by his relatives.

June 9 On admission, was put on B[illegible] (S.A. Complexion light; hair dark; eyes gray; condition of skin good; no marks or scars noted: bodily condition dirty; behavior good. Pulse, taken on ward was 76; R 20. Te 99.2.

" 10 June 10/94. Restless, sleeping but 4 hours, last night. AM. Pulse 70. R 20 Te 99.2. Appetite fairly good; bowels generally free; no cough observed; behavior is good; talks freely, there are, apparently, no delusions;

" 11 makes no complaints. PM. Pulse 68. R 22. Te 99.6. June 11/94. Slept somewhat better, (6 hours), last night. AM. Pulse 74. R 18. Te 98.8. PM. Pulse 72. R 20. Te 99. Behaves well; appetite medium.

" 12 June 12/94. Again slept 6 hours, last night. AM " 68 " 20 " 99. PM. Pulse 70 R 22 Te 99.2.

" 13 Bowels are free. Patient talks freely, when addressed. June 13/94. Slept quite well, 8 hours, last night. - AM. Pulse 68. Appetite fairly good. Behavior is good; he makes no complaints. Keeps with work on C2.

" 14 June 14/94. Restless for 2 hours, sleeping only 6 hours, last night. AM. Pulse 72. Patient is about as usual.

" 15 June 15/94. Restful, sleeping 8 hours, last night. AM. P 70. Talks quite freely; no delusions noted. Works well on C2.

" 16 June 16/94. Was again restless + slept only 6 hours, last night. Appetite is now good. AM. P 68. Seems contented.

" 23 June 23/94. During the past week, with the exception of about 2 nights (on which he was somewhat restless + slept poorly), patient has been resting + sleeping about 8 hours, each night. He has been uniformly well behaved. Talks quite freely with his fellow patients. Appetite has been quite good; bowels apparently regular. Pulse has been about normal. He reads some; goes out walking with the rest. Habits have been cleanly. Physical condition, which seemed to be weak, on admission, has improved. No delusions have been noticed. He seems to be rather dull. Works well + willingly on C2.

" 30 June 30/94. No special change; makes no complaints. Is fairly good health. Still works on C2 Ward.

July 2/31 July 2/94. Wt 115½ pds (a slight gain). July 31/94. Keeps about the same. Quiet + well-behaved. Talks freely; no delusions noted. Walks out daily. Helps willing with the work on C2. Health is fair.

Aug 1/31 Aug 1/94. Wt 115 pds. Pulse 80. Aug 31/94. No special change. Behaves well. Talks but little.

Sept 1/30 Sept 1/94. Wt 115½ " " 100. Sept 30/94. Keeps about same, from month to month. Is very quiet.

Oct 1/31 Oct 1/94. Wt 119½ " " 88. Oct 8/94. Appetite good; bowels regular. Physical condition fair. - Behaves well. Inclined to be reticent, but talks quite freely at times. Works on C2. Transferred to B1 today.

" 31 Oct 31/94. Keeps about the same. Quiet; well-behaved. Is silly about some things. - Inclined to keep his pockets filled with old papers + other stuff - says they are so valuable. - A good + willing worker.

Nov 2/30 Nov 2/94. Wt 118½ pds. Pulse 90. Nov 3/94 - Troubled with corns - Same treated + are doing nicely.

" 30 Nov 30/94. A quiet patient. Does some work on ward. Appears to be contented; health fairly good. -

Dec 3/31 Dec 3/94. Wt 116½ pds. Pulse 100. Dec 31/94 Continues quiet + well-behaved - Seems quite contented.

1895

Jan 3/31 Jan 3/95. [illegible] Head [illegible] Abdo [illegible] Extremities [illegible] Abdomen [illegible] Bowels at times,

Feb 2/28 [illegible] Works some. in Chest,

Mar 2/ [illegible] see 84.

" 23 [illegible] ; Con-

" 24 [illegible] Slept

" 25 [illegible] - Was

" 26 [illegible] pen-down.

" 27 [illegible] 25. Patient

" 28/29 [illegible] but as usual.

[illegible] Am. Was

[illegible] chart record)

[illegible]

Nov 2/30 [illegible] month

[illegible] day.

Dec 2/ [illegible] very quiet.

1895 Jan 2/31 [illegible] ward).

" 31 [illegible] held good.

Feb 4 [illegible] Patient is

Mar 1 [illegible] well-behaved

" 26 [illegible] and the fact

[illegible] Letter, To day

April 2/ [illegible] nor good. Sleeps

[illegible]

May 1/96 to Aug 1/97 [illegible] by well.

[illegible] Wt. 129. Pay

[illegible] amounts to

[illegible] cholic but

[illegible] little on ward

[illegible] occupations.

[illegible] amusements.

Sept 1. Wt. 130#. No change in condition. Sept. 16 Visited by wife + Taken Home by her on trial. Has suicidal history but has shown no signs of suicidal tendencies of late + believed to be fairly well

Discharged

LIBERTY, PUGLAM & CHAMBERS, DAVENPORT, IOWA

Whole No. 3743.
Residence, 114 Isabel St. East, St. Paul Minn.
Date Admission, 12th June 1894.
Admitted by, Dr Kilbourne Hour, 12.15 PM.
How Sent, John B. Olivier, Jof C. Ramsey County
Sex, Male
Age, 32 —
Civil Condition, single
Children,
Age Youngest Child, —
Occupation, bricklayer
Degree Education, probably fair
Profession Religion, Lutheran.
Habits, Temperate & moral
Nativity, Germany
Physicians Committing, Geo. J. Hauley & Orde Martel
Correspondents, Abraham Schumann
133 S. Wabasha St. St Paul Minn

No. for Year, 313.
Insane Relatives, Mother —
Cause Exciting, unknown
Cause Predisposing, heredity —
Form,
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, not stated —
Date of this Attack, last fall —
Duration, about 8 months.
No. of Attack, not 1st —
No. of Admissions, 1st.
Age First Attack, 2
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Dolly D. Ely; June 6/94 = MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes
Depressed,
DELUSIONS:
Systematized or Not, of his own greatness as a poet &c
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Voluble

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 9¼ WEIGHT, 141½ lbs NUTRITION, Good
WOUNDS OR ABNORMALITIES, See "S. R." next page.
TONGUE, Tremors, None Coatings, Yes; tongue large & flabby Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, yes Accommodation, yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, some incoordination of both hands (in test, finger to nose, eyes shut).
Legs, Standing, Eyes shut, Sways some —
TREMORS, Hands, none Tongue, none
Facial Muscles, none General, none
REFLEXES, Patellar, Equal, about normal
Other Reflexes,
ARTICULATION, Hesitating, Foreign accent Slurred,
FACIAL EXPRESSION,
SENSIBILITY, normal
HEART, Sounds good
LUNGS, Sounds good; large Expansion.
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,

Read

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,

BRIGHT, FOLAN & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy-Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor has any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained or confined nor under medical treatment. —

June 12 On admission, was put on B² (S.D. Complexion dark; hair black; eyes gray; condition of skin good; scars on right leg over tibia, caused by abscess; bodily condition clean; behavior good). June 13/94. Restless fr 8 hours, sleeping only 3 hours, last night. Am. Pulse 74. T & R normal. Behavior is good; Appetite also good. Talks some; says "he need not be a brick-layer, but there is more money in writing poetry". No complaints or injuries to note, today. " 13

" 14 June 14/94. Slept 5 hours, last night; was restless 3 hours or so. Am. Pulse and T & R are normal. Talks freely but manifests delusions. Appetite continues good. Spends a good deal of his time writing poetry & letters to "prominent men". " 14

" 15 June 15/94. Restless 4 hours, sleeping only 5 hours, last night. Is restless today; reads; writes; his letters & poetry; works some on the ward. —

" 16 June 16/94. Passed a poor night; restless 4 hours; slept only 5 hours; restless, again, today; talking & laughing to himself; goes out walking with the rest. " 16

" 17 June 17/94. Again, rested & slept poorly, last night. " 17

" 18 Quite restless today; still given to writing "poetry". June 18/94. Restless 6 hours, slept only 3 hours, last night. Pulse has continued about normal. Writing letters today. Is restless; wants to get out." 18

" 19 June 19/94. Slept much better, last night, being restless for only an hour or so. Appetite continues good; Talks some; makes no complaints. Is very restless today. Is much deluded. Makes no complaints " 19

" 20 June 20/94. Slept poorly, again, last night. Restless today. June 21/94. Restless 3 hours, slept 6 hours, " 20

" 22 last night. Conduct & behavior do not change any; still writes "poetry". June 22/94. Rested & slept " 22

" 23 fairly well, last night. Is about as usual. June 23/94. Talks freely; spends a good deal of " 23

" 24 his time writing his poetry & items for the newspapers. June 24/94. Still manifests delusions; says " 24

" 25 "his folks put him here; they are ignorant; do not realize his abilities." June 25/94. Has been sleeping " 25

" 26 quite well, the past 2 nights. Is about the same each day. June 26/94. Restless 3 hours, sleeping " 26

6 hours, last night. No change, today. Summary. Pulse & temperature have fluctuated but little; they have kept about normal. On the whole, his behavior has been fairly good. By day he has been more or less restless, though more quiet & less nervous of late; talks & laughs to himself a good deal. Does not seem to realize his condition & still shows delusions. Physical condition is good.

" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking, regularly. Works some. —

July 2/94 July 2/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back. " 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached samples of same). Works in dining-room; plays games — Appetite good; bowels regular. Goes walking. Still deluded.

Aug 1/94 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 2/94. Visited by a friend. Reads; plays games; works some on " 29 ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens — also of his letters &c). Aug 29/94. Transferred to Ward East Aug 31/94. Mental condition does not seem to improve any.

Sep 4/94 Sep 4/94. Wt 143 lbs. Pulse 78. Sep 30/94. Quiet & well-behaved. Spends most of his time in reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

Says "that time will come when he shall rule this Country". Sleeps in ward. Habits are clean-

Oct 2/94 Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 31/94. No change noticeable. If

anything, delusions seem to be more strong with him. Attends patients' entertainment, in which he

participates — dancing &c — Habits clean & neat — Patient is in quite good physical health.

Nov 1/94 Wt 144 lbs (has lost some in flesh). Pulse 64. Nov 30/94. Is very changeable. Says "himself

to be Christ". Has certain ideas [illegible]

[illegible]

Dec y Marshall St.
Memphis
Tenn

Mrs Sophia Cowin.

Devil of a woman!
I have now been confined
over 5 months in the
insane asylum.
You need never speak
to me for I can live
without you and if
I die I do not call
either
Go to hell with your
lies on. Devil of a woman
I have enough of your lies
of your flirtation and
am going to marry a
respectable woman
if I get away from her

Says "I'm considerably off". Struck John Howe, C³. After coming in ward, was still in a very

Jan 1/95 done — Feb 28/95. Expressed his regrets for having struck patients' condition, physically or mentally

Feb 1/95 quiet & well-behaved, of late. Still has delusions. Eats & sleeps well. Physical condition good.

Mar 1/95 Carrying argument against the injustice of [illegible] he is a "poet". Claims he has the power to

[illegible] I, through conquest — Claims also he can be [illegible] publish his "poetry". Apl 30/95. Has been quiet.

Apl 1/95 "Poet" — Eats & sleeps well. Reads, writes (ex[illegible] inments. Still shows his peculiar delusions

[illegible] his very good, but no improvement noted, mentally.

May 1/95 [illegible] is not going to let his mind run on

[illegible] to "bricklaying". May 8/95. Noisy and

[illegible] s. Complaining of pains in his chest.

[illegible] t improved. May 18/95. Behavior very good,

May 1/95 [illegible] May 19/95. Escaped, while being taken out

" 31 for a walk about 2.30 PM: was caught & returned to Hospital at 4 PM. May 31/95. Has been quiet, since his return — Works some on hall. Otherwise, condition about as usual.

June 1/95 June 1/95 Wt 147 lbs. Pulse 91. Details incoherently & is easily agitated. Health seems good.

" 3 June 3/95. Stated "he was content to stay here for another year, & at the expiration of that time, he will have received punishment enough". June 20/95. Behavior quiet, for some time past.

" 20 Still writes considerably. June 28/95. Refused food. Says "he will not eat until he obtains his pardon" —

" 28 June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions.

July 1/95 Says "he has more Spiritual power than the Almighty Being" — July 29/95. "Desires to write

" 31 a Drama" — July 31/95. Behavior quiet — no change mentally. See Sample Book "A" 218

1894

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor to any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained

June 12 On admission, was put on B² (S.R. Complexion dark
" 13 on right leg over tibia, caused by abscess; bodily
for 8 hours, sleeping only 5 hours, last night. Appetite
good. Talks some; says he used to be a brick-layer
" 14 - plants or injuries to note, today. June 14/94. Sk
and Pel are normal. Talks freely but manifests
" 15 of his time writing poetry & letters to prominen
hours, last night. Is restless today; reads; wa
" 16 June 16/94. Passed a poor night; restless 4 hou
" 17 laughing to himself; goes out walking with the
" 18 Quite restless today; still given to writing "poe
last night. Pulse has continued about normal
" 19 June 19/94. Slept much better, last night, being res
Talks some; makes no complaints. Is very
" 20 June 20/94. Slept only, again, last night. Rest
" 22 last night. Conduct & behavior do not change a
" 23 fairly well, last night. Is about as usual.
" 24 his time writing his poetry & items for the news
" 25 His folks put him here; they are ignorant; do
" 26 quite well, the past 2 nights. Is about the so
8 hours, last night. No change, today. Sum
little; they have kept about normal. Either
has been more or less restless, though none fu
deal. Does not seem to realize his condition
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking; regularly. Works some.
July 1/94 July 1/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached Samples of same).
Works in dining-room; plays games - Appetite good; bowels regular. Goes walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 2/94. Visited by a friend. Reads; plays games: works some in
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29 Aug 29/94. Transferred to W. East Aug 31/94. Mental condition does not improve any.
Sept 4/94 Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

1894

Says "that time will come when he shall rule this country". Sleeps in ward. Habits are clean-
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 21/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients' entertainment, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/94 Nov 1/94 Wt 144 lbs. (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
the Christ" &c - Says "he is going to kill Dr. Kilbourne, the first time
he sees him", & says "he is going to kill Dr. Kilbourne, the first time
he sees him", & struck C. G. Anderson (Supervisor).
Writes poetry &c. Appetite good; bowels are regular -
Walks some in ward - Behaves well - Talks freely but still
delusions; writes a good deal of poetry (?) & many letters (?) -
Neat & tidy - Works in ward; physical condition is good -
Is "off"; restless, walking the hall, talking &
is restless but otherwise no special change noted -
Feb 25/95. Today. Feb 25/95. Writes considerably (see old Samples) -
Talks "Death". Is considerably off: Struck John Howe,
transferred to C³. After coming in ward, was still in a very
bad way done - Feb 28/95. Expressed his regrets for having struck
John Howe in patient's condition, physically or mentally.
Has been quiet & well-behaved, of late. Still has delusions.
Eats & sleeps well - Physical condition Good.
Has a very long argument against the injustice of
him, because he is a "poet". Claims he has the power to
govern I, through Conquest - Claims also he can be
allowed to publish his "poetry". Apl 30/95. Has been quiet.
Is a "Poet" - Eats & sleeps well. Reads, writes (as
entertainments. Still shows his peculiar delusions.
Condition very good, but no improvement noted, mentally.
Says "he is not going to let his mind run on
subject to "bricklaying". May 8/95. Noisy and
May 9/95. Complaining of pains in his chest.
Pain in chest improved. May 18/95. Behavior very good.
Has no complaints. May 27/95. Escaped, while being taken out
for a walk about 2³⁰ P.M.: was caught & returned to Hospital at 4 P.M. May 31/95. Has
been quiet, since his return - Works some on hall. Otherwise, condition about as usual.
June 1 June 1/95. Wt 147 lbs. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated "he was content to stay here, for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95. Behavior quiet. For last three days
" 25 still writes considerably. June 28/95. Refused food: Says "he will not eat, until he obtains his freedom" -
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions.
July 1/94 Says "he has more spiritual power than the Almighty Being" - July 29/95. Desires to write
" 29 a Drama" - July 31/95. Behavior Quiet — no change mentally.

So you need not trouble
yourself anymore I care
nothing for you anymore
My love has turned
into hatred to tell you
the truth
You are the cause of my
wreck with your lies
with your flirtation.
I shall leave this country
forever after I am
released and do neither
good nor bad to any lady
Louis Schumann
Poet.
You better not come up here
as Charley Hauf the Lyer
told me.

1894

This patient was brought here by Deputy Sheriff Haas, i… and moral. There is history of heredity, his mother having… Form is chronic. There is no accompanying bodily… last fall, by incoherence. This is not the first a… now shown on the subjects of phrenology… or destructive habits. If suicidal, is no… foundation for a house. He has…

June 12 On admission, was put on…
" 13 on right leg, over tibia… for 8 hours, sleeping… good. Table co…
" 14 - plaints or injur… and DTR are normal…
" 15 of his time writing… hours, last night. Sle…
" 16 June 16/94. Vaxed a pa…
" 17 Laughing to himself; goes on…
" 18 Quite restless today; still qu… last night. Pulse has continu…
" 19 June 19/94. Slept much better, last ni… Table some; makes no complaints…
" 20 June 20/94. Slept poorly, again, last nigh…
" 22 last night. Conduct & behavior do not chang…
" 23 fairly well, last night. Is about as usual. June 23/94. Talks freely; spends a good deal of…
" 24 his time writing his poetry & items for the newspapers. June 24/94. Still manifests delusions; says…
" 25 "his folks put him here; they are ignorant; do not realize his abilities". June 25/94. Has been sleeping…
" 26 quite well, the past 2 nights. Is about the same each day. June 26/94. Restless 3 hours, sleeping…
5 hours, last night. No change, today. Summary. Pulse & temperature have fluctuated but…
little; they have kept about normal. On the whole, his behavior has been fairly good. Today, he…
has been more or less restless, though more quiet & less nervous of late; talks & laughs to himself a good…
deal. Does not seem to realize his condition & still shows delusions. Physical condition is good…
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking; regularly. Works none.—
July 1/94 July 1/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry" &c (see attached Sample of same).
Works in dining-room; plays games - Appetite good. Bowels regular. Goes walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 23/94. Visited by a friend. Reads; plays games: works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimen - also of his letters &c).
" 29 Aug 27/94. Transferred to 1st East. Aug 31/94. Mental condition does not improve any.
Sep 1/94 Sep 4/94. Wt 143 lbs. Pulse 78. Sep 30/94. Quiet & well-behaved. Spends most of his time in
Sep 30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

Dr. Kilbourne.
Since you say I shall kill you
I shall kill you as soon as I can
again as soon as I get a
chance I will myself
and if I do not get a chance
I will for the sake
of right and liberty
Lincoln
Washington and Garfield
Nightingale and Clara Barton
for the sake of
right and liberty
Louis S Schumann

Editor to the National Tribune
Washington. D. C.
Rochester, Minn. Oct 28 94

Dear Sir: I do not know
you but take liberty write to you.
In your paper Oct 25 I find an
article entitled "Sunday Meditation".
You tell the public in your paper
Jesus is an example for us. I tell you
he is no example for me. I fight the devil.
I do not teach as in Matthew 10., 34. 35.
Matthew 11., 20 - 23. "Then began he to
upbraid the cities wherein most of his
mighty works were done"
He Teaches "Love thy enemies"
He did not even follow his own teachings.
If the jews do not believe him when
he is with them how can we after
2000 years believe such stories.
No sensible man believes it but only
uncultured brains.

1894

Says "that time will come when he shall rule this Country". Keeps in ward. Habits are clean -
Oct 25/94 - Wt 150 pounds. (Some gain in flesh) - Pulse 92. Oct 31/94. No change noticeable. If
anything, delusions seem to be more strong with him - Attends patients entertainment, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/94 Wt 144 lbs - (Gained some in flesh) - Pulse 64. Nov 25/94. Is very changeable. Says "himself
Christ" He - is
Editor to the National Tribune
Washington. D. C.
Rochester, Minn. Oct 28 94
Dear Sir: I do not know
you but take liberty write to you.
In your paper Oct 25 I find an
article entitled "Sunday Meditation".
You tell the public in your paper
Jesus is an example for us. I tell you
he is no example for me. I fight the devil.
I do not teach as in Matthew 10., 34. 35.
Matthew 11., 20 - 23. "Then began he to
upbraid the cities wherein most of his
mighty works were done"
He Teaches "Love thy enemies"
He did not even follow his own teachings.
If the jews do not believe him when
he is with them how can we after
2000 years believe such stories.
No sensible man believes it but only
uncultured brains.
Now; says he is going to kill Dr Kilbourne, the first time
when taken thus, he struck C. G. Anderson (Supervisor).
Writes poetry &c - Appetite good; bowels are regular -
Works some on ward - Behaves well - Talks freely but still
writes; writes a good deal of poetry (?) & many letters (?) -
Nov 25/94 Clean & tidy - Works on ward; physical condition is good -
Is "off"; restless, walking the hall, talking &
restless but otherwise no special change noted -
Dec 1/94 today. Dec 15/94. Writes considerably (see old Samples) -
Dec 25/94 "a Death". Is considerably off: Struck John Howe,
Dec 31/94 recd to C3. After coming in ward, was still in a very
Jan 1/95 bad Jan - Feb 28/95. Expressed his regrets for having struck
Feb 28/95 in patient's condition, physically or mentally
Mar 1/95 been quiet & well-behaved, of late. Still has delusions
Mar 31/95 - Eats & sleeps well. Physical condition Good.
Apr 1/95 a very long argument against the injustice of
Apr 30/95 use he is a Poet". Claims he has the power to
May 1/95 con I, through Conquest - Claims also he can be
May 8/95 to publish his "poetry". Apl 30/95: Has been quiet.
May 9/95 as a "Poet" - Eats & sleeps well. Reads, writes (see
May 15/95 entertainments. Still shows his peculiar delusions
May 16/95 condition very good, but no improvement noted, mentally.
May 17/95 "he is not going to let his mind run on
May 18/95 ject to "bricklaying". May 8/95: Noisy and
May 19/95 7/95. Complaining of pains in his chest.
May 20/95 chest improved. May 18/95: Behavior very good;
May 29/95 has not made no complaints. May 29/95: Escaped, while being taken out
May 31 for a walk about 2.30 PM: was caught & returned to Hospital at 4 PM. May 31/95: Has
been quiet, since his return - Works some on hall. Otherwise, condition about as usual.
June 1 June 1/95 Wt 147 lbs. P 91. Details incoherently & is easily agitated. Health seems good.
June 3 June 3/95: Stated "he was content to stay here for another year, & at the expiration of that time,
June 10 he will have received punishment enough". June 10/95: Behavior quiet, for some time past.
June 28 still writes considerably. June 28/95. Refused food: Says "he will not eat, until he obtains his pardon" -
June 30 June 30/95 - appetite much improved - July 1/95: Wt 140 lbs. Pulse 84. Still shows delusions
July 1 July 1/95 Says "he has more Spiritual Power than the Almighty Being" - July 29/95: "Desires to write
July 29 a Drama" - July 31/95: Behavior Quiet — no change mentally. (To Sample Book "a" 218)
July 31

1894

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor to any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been rectiaim

June 12 On admission, was put on B² (S.S. Complexion d
" 13 on right leg over tibia, caused by abscess; bod
for 8 hours, sleeping only 5 hours, last night. Tem
good. Talks some; says he used to be a brick-lay
" 14 - plaints or injuries to note, today. June 14/94.
and Pel are normal. Talks freely but manifest
" 15 of his time writing poetry & letters to "promin
hours, last night. Is restless today; reads;
" 16 June 16/94. Passed a poor night; restless &
" 17 laughing to himself; goes out walking with
" 18 Quite restless today; still given to writing
last night. Pulse has continued about norm
" 19 June 19/94. Slept much better, last night, being
Talks some; makes no complaints. Sever
" 20 June 20/94. Slept poorly, again, last night.
" 22 last night. Conduct & behavior do not change
" 23 fairly well, last night. Is about as usua
" 24 his time writing his poetry & items for the ne
" 25 his folks put him here; they are ignorant;
" 26 quite well, the past 2 nights. Is about the
5 hours, last night. No change, today.
little; they have kept about normal. Appe
has been more or less restless, though more
deal. Does not seem to realize his condition
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Does not walking, regularly
July 2/94 July 2/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (See attached Samples of same).
Works in dining-room; plays games - Appetite good; bowels regular. Does walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 23/94. Visited by a friend. Reads; plays games: works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29 Aug 29/94. Transferred to 3rd East Aug 31/94. Mental condition does not improve any.
Sept 4/94 Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

The believe on God is pure and true but that God is so cruel as to allow his son to be tortured for the sins of others is not true. I can truely say have received the holy ghost from God for who how could it be possible to become a poet of a bricklayer.

The following are some of my teachings.

Give those bread to eat who want to work and even to a lazy man give a crust but remind of his duty. It is everybody's duty to work.

How to explain this. Our millionaires are not doing their duties. They hide the money in the safe when it should be in circulation. Our laborers are not doing their duties. They hide their small sums away in the cellars and stockings. I do not care if I loose a hundred thousand Dollars as long as I have bread to eat and water to drink and my liberty to go my own way I am happy and contented. I am used to work and can earn some more.

Where I Astor I would build me a marble palace and give work to the working people. But our taxation system is wrong. They derive no income from such a castle and are heavily taxed. as long as such great castles what are in reality nothing but ornaments to the country are free from taxation they would be fools to do that. In a year or so they are sold for taxes and the builder has nothing but is declared bankrupt. Income taxes and nothing but income taxes and I tell you we will do great works. The republicans are opposed to it and are my enemies I had lived in a shanty what cost me 12 Dollars just as good

1894

Says "that time will come when he shall rule this Country" - Sleeps on ward. Habits are clean -
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 21/94. No change noticeable. If
anything, delusions seem to be more strong with him - Attends patients entertainment, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/94 Nov 1/94. Wt 144 lbs. (Gained some in flesh) - Pulse 84. Nov 25/94. Is very changeable. Says "himself
- to be Christ". Moments
often; says "he is going to kill Dr. Kilbourne", the first time
when taken there, he struck O. J. Anderson (Supervisor).
writes poetry &c - Appetite Good; bowels are regular -
Works some on ward - Behaves well - Talks freely but still
letters; writes a good deal of poetry (?) & many letters (?) -
- Clean in dress - Works on ward; physical condition is good -
Is "off"; restless, walking the hall, talking &
is restless but otherwise no special change noted -
today. Feb 28/95. Writes considerably (See old samples) -
ty a Death". Is considerably off". Struck John Howe,
Carried to C³. After coming on ward, was still in a very
had done - Feb 28/95. Expressed his regret for having struck
e in patients' condition, physically or mentally.
s been quiet & well-behaved, of late. Still has delusions
ved - Eats & sleeps well. Physical condition Good.
s a very long argument against the injustice of
cause he is a Poet". Claims he has the power to
sion I, through Conquest - Claims also he can be
d to publish his "poetry". April 30/95. Has been quiet.
as a "Poet" - Eats & sleeps well. Reads, writes (en
tertainments. Still shows his peculiar delusions
condition very good, but no improvement noted, mentally.
s "he is not going to let his mind run on
elect to "bricklaying". May 8/95. Noisy and
ay 9/95. Complaining of pains in his chest.
chest improved. May 18/95. Behavior very good.
plaints. May 19/95. Escaped, while being taken out
" 31 for a walk about 2:30 PM: was caught & returned to Hospital at 4 PM. May 31/95. Has
been quiet, since his return - Works some on hall. Otherwise, condition about as usual.
June 1 June 1/95. Wt 147 lbs. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated "he was content to stay here, for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95. Behavior quiet, for some time past.
" 25 still writes considerably. June 28/95. Refuses food: says "he will not eat, until he obtains his pardon" -
" 30 June 30/95. Appetite much improved - July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions.
July 1 to 21 Says "he has more Spiritual power than the Almighty Being" - July 22/95. "Desires to write
a Drama" - July 31/95. Behavior Quiet — no change mentally. to Sample Book "A" 218

1894

This patient was brought here by Deputy Sheriff Ha
and moral. There is history of heredity, his moth
Form is chronic. There is no accompani
last fall, by incoherence. This is n
now shown on the subjects of
or destructive habits.
foundation for a

June 12 On admission, c
" 13 on right leg, otherwise
for 8 hours, sleeping
good. Talks c
" 14 - plaints or injur
and [illegible] are normal
" 15 of his time writing
hours, last night. Sl
" 16 June 16/94. Passed a q
" 17 laughing to himself; goes a
" 18 Quite restless today; plays
last night. Pulse has continu
" 19 June 19/94. Slept much better, last n
Talks some; makes no complaints
" 20 June 20/94. Slept only again, last nigh
" 22 last night. Conduct & behavior do not cha
" 23 fairly well, last night. Is about as usual. June 23/94. Talks freely; spends a good deal of
" 24 his time writing his poetry & items for the newspapers. June 24/94. Still manifests delusions; says
" 25 "his folks put him here; they are ignorant; do not realize his abilities." June 25/94. Has been sleeping
" 26 quite well, the past 2 nights. Is about the same each day. June 26/94. Restless 3 hours, sleeping
5 hours, last night. No change, today. Summary. Pulse & temperature have fluctuated but
little; they have kept about normal. On the whole, his behavior has been fairly good. By day, he
has been more or less restless, though more quiet & less nervous of late; talks & laughs to himself a good
deal. Does not seem to realize his condition & still shows delusions. Physical condition is good
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking; regularly. Works some.
July 1/94 July 1/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry" &c (see attached Sample of same).
Works in dining-room; plays games - Appetite good; bowels regular. Does walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 23/94. Visited by a friend. Reads; plays games; works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29/31 Aug 29/94. Transferred to 3rd East Aug 31/94. Mental condition does not improve any.
Sept 4/30 Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

1894

Says that time will come when he shall rule this Country". Sleeps on ward. Habits are clean.
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 31/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients' entertainments, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/94 Wt 144 lbs (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
the Christ" [illegible]

To the sinful Man and Christians.

I as a man who cares nothing for
the future life but wants to make
this short & earthly life as pleasant
a possible am the Antichrist.
You Christians teach: No rich man
can enter the kingdom of heaven.
I like to see you all go to heaven
and take all the riches I can get in
a lawful way. The Christians teach:
Love your enemies a.s.f. I am therefor
the enemy of the Christians so that they
have somebody to love.
Whenever you pray you have to
repend all your sins and therefor
send you "The Christians Sublime Prayer"
A stranger is he amongst us
Like a seedcorn in the heath
We want to worship dead idols
And him who died a fearful death.

" 31 for a walk about 2.30 PM: was caught & returned to Hospital at 4 PM. May 31/95: Has
been quiet since his return - Works some on hall. Otherwise, condition about as usual.
June 1 June 1/95. Wt 147 lbs. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated "he was content to stay here for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95. Behavior quiet for some time past.
" 28 still writes considerably. June 28/95. Refused food. Says "he will not eat until he obtains his pardon".
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 82. Still shows delusions.
July 1/95 Says "he has more Spiritual Power than the Almighty Being". July 29/95: "Desires to write
" 29 a Drama". July 31/95: Behavior quiet - no change mentally. (To Sample Book "a" 218)

GIBLEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor to any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained

June 12 On admission, was put on B² (S.D. Complex con. Dem
" 13 on right leg, ver tebra, caused by abscess, boarde
for 8 hours, sleeping only 5 hours, last night. Am
good. Talks some; says "he used to be a brick-layer
" 14 - plaints or injuries to note, today. June 14/94. S
and Do are normal. Talks freely but manifests
" 15 of his time writing poetry & letters to "prominen
hours, last night. Is restless today; reads; wr
" 16 June 16/94 Passed a poor night; restless & hou
" 17 laughing to himself; goes out walking with the
" 18 Quite restless today; still given to writing "po
last night. Pulse has continued about normal
" 19 June 19/94. Slept much better, last night, being re
Talks some; makes no complaints. Is very
" 20 June 20/94. Slept poorly, again, last night. Res
" 22 last night. Conduct & behavior do not change
" 23 fairly well, last night. Is about as usual
" 24 his time writing his poetry & items for the new
" 25 his folks put him here; they are ignorant; do
" 26 quite well, the past 2 nights. Is about the
8 hours, last night. No change, today. Sle
little; they have kept about normal. As the
has been more or less restless, though more q
steal. Does not seem to realize his condition
" 30 June 30/94. Still shows delusions; writes "poetry

July 2/ July 2/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached Sample of same).
Works in dining-room; plays games - Appetite good; bowels regular. Goes walking. Still deluded.
Aug 1/ Aug 1/94. Wt 142 lbs. Pulse 92. Aug 2/94. Visited by a friend. Reads; plays games: works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimen - also of his letters &c).
" 29/ Aug 29/94. Transferred to Ward East. Aug 31/94. Mental condition does not improve any.
Sept 4/ Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

2. Devotedly we kneel to pray
Before his likeness and the wood
And bring him, oh, so many songs
And boast and are in joyful mood
3. We call ourselves Christians those people
And teach so much nonsense
We rob and plunder all the time
If he could only jump the fence.
4 We have to banish truth forever
To save our old. believe
If He could only run away
To his God the Lord the chief.
5. Your greatest works the sun in heaven
The place where all the angels dwell
If he speaks of it oh what noise
We like to go to him to hell
6. If he only would see our bible
And all our holy pictures too
It is nothing in that little reader
He must study yet and start anew
7. If he only came into our church
There would he see his splendor all

A figure hangs in body size
Right to a cross and to the wall.
8. The Jews have many years ago
Thus tortured a man
And everyone who it denies
Is said to be insane
9. So sits he in the insane house
And pray to let him go
We others live in luxury
And that and that is so
10. So take his heavenly father pray
Him back to you again
It is so hard it is a joke
Oh bless him if you can.
11. The devil rules here nowa days
Bless him for mercies sake
Not love but money money, yes,
A good one is a plague.
12. A frenzy is now liberty
Only Diamonds and gold
We are on a very bad road
Our hearts they are so cold.

Says "that time will come when he shall rule this Country". Keeps in ward. Habits are clean-
Oct 2/94 - Wt 150 pounds. (Some gain in flesh) - Pulse 92. Oct 31/94. No change noticeable. If
anything, delusions seem to be more strong with him - Attends patients entertainment, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/ Nov 1/94. Wt 144 lbs - (Has lost some in flesh) - Pulse 64. Nov 25/94. Is very changeable. Says "himself
24 to be Christ". Threatening in language quite often; says "he is going to kill Dr Kilbourne, the first time
when I see him", he struck C. G. Anderson (Supervisor).
writes poetry &c. Appetite good; bowels are regular -
works some on ward - Behaves well - Talks freely but still
ideas; writes a good deal of poetry (?) & many letters (?) -
Clean & tidy - Works on ward; physical condition is good -
Is "off"; restless, walking the hall, talking &
restless but otherwise no special change noted -
day. Feb 28/95: Writes considerably (see old samples) -
"Death": Is considerably off": Struck John Howe,
Fredk C³. After coming in ward, was still in very
had done - Feb 28/95: Expressed his regrets for having struck
in patient's condition, physically or mentally.
been quiet & well-behaved, of late. Still has delusions.
ed. Eats & sleeps well. Physical condition Good.
a very long argument against the injustice of
use he is a Poet". Claims he has the power to
leon I, through Conquest - Claims also he can be
& to publish his "poetry". Apl 30/95: Has been quiet.
as a "Poet" - Eats & sleeps well. Reads, writes (se
tertainments - Still shows his peculiar delusions
condition very good, but no improvement noted, mentally.
"he is not going to let his mind run on
lect to "bricklaying". May 8/95: Noisy and
y 9/95. Complaining of pains in his chest
chest improved. May 18/95: Behavior very good;
t. May 29/95: Escapes, while being taken out
for a walk about 2 PM: was caught & returned to Hospital at 4 PM. May 31/95: Has
been quiet since his return - Works some on hall. Otherwise, condition about as usual.
June 1/ June 1/95 Wt 147 lbs. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95: Stated "he was content to stay here for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95: Behavior quiet for some time past.
" 28 still writes considerably. June 28/95. Refuses food: says "I will not eat until he obtains his pardon".
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions.
July 1/ Says "he has more Spiritual Power than the Almighty Being" - July 20/95: "Desires to write
" 20 a Drama" - July 31/95: Behavior Quiet — No change mentally. To Dansville Book "A" 218

Personal and Medical History of Louis Schur

Personal and Medical History of Louis Schumann.

1894

EARLEY, FOLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Haas, ... and moral. There is history of heredity, his mother having ... Form is Chronic. There is no accompanying bodily ... last fall, by incoherence. This is not the first ... now shown on the subjects of phrenology ... or destructive habits. If suicidal ... foundation for a house. He ...

June 12 On admission, was ...
" 13 on right leg, ... for 3 hours, ... good. Talks co...
" 14 - plants & injur... and Pel are normal.
" 15 Of his time writing ... hours, last night. Is re...
" 16 June 16/94. Passed a fo...
" 17 laughing to himself; does ...
" 18 Quite restless today; ate qu... last night. Pulse & Is continu...
" 19 June 19/94. Slept much better, last n... Talks some; makes no complain...
" 20 June 20/94. Slept poorly, again, last nig... last night. Conduct & behavior do not change any; still writes "poetry". June 22/94. Rested & slept
" 22 fairly well, last night. Is about as usual. June 23/94. Talks freely; spends a good deal of
" 23 his time writing his poetry & items for the newspapers. June 24/94. Still manifests delusions; say
" 24 "his folks put him here; they are ignorant; do not realize his abilities." June 25/94. Has been sleeping
" 25 quite well, the past 2 nights. Is about the same each day. June 26/94. Restless 3 hours, Slept
" 26 5 hours, last night. No change, today. Summary. Pulse & temperature have fluctuated but little; they have kept about normal. On the whole, his behavior has been fairly good. Today, he has been more or less restless, though mine quiet & less nervous of late; talks & laughs to himself a good deal. Does not seem to realize his condition & still shows delusions. Physical condition is good
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking, regularly. Works some.
July 1/94 July 1/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached Sample of same).
Works in dining room; plays games - Appetite good; bowels regular. Goes walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 2/94. Visited by a friend. Reads; plays games; works some a-
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29 Aug 29/94. Transferred to 4th East. Aug 31/94. Mental condition does not improve any.
Sept 31 Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
Sept 4/30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

1894

Says "that time will come when he shall rule this Country". Sleeps in ward. Habits are clean-
Oct 3/94 Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 31/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients' entertainments, in which he
Participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/94 Wt 144 lbs. (Gained some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
to be Christ". Threatening in language at times often; says "he is going to kill Dr. Kilbourne", the first time
when taken thus, he struck C. G. Anderson (Supervisor).
writes poetry &c - Appetite good; bowels are regular -
works some on ward - Behaves well - Talks freely but still
ters; writes a good deal of poetry (?) & many letters (?) -
. Cleanly &c - Works on ward; physical condition is good -
Is "off"; restless, walking the hall, talking &
is restless but otherwise no special change noted -
day. Feb 28/95. Writes considerably (see old samples) -
y & Death". Is considerably off". Struck John Howe,
rred to C3. After coming on ward, was still in a very
had done - Feb 28/95. Expressed his regret for having struck
e in patients' condition, physically or mentally
s been quiet & well-behaved, of late. Still has delusions
ed - Eats & sleeps well. Physical condition Good.
s a very long argument against the injustice of
use he is a poet". Claims he has the power to
ion I, through Conquest - Claims also he can be
d to publish his "poetry". Apl 30/95: Has been quiet.
as a "Poet" - Eats & sleeps well. Reads, writes (see
tertainments. Still shows his peculiar delusions
condition very good, but no improvement noted, mentally.
" he is not going to let his mind run on
ject to "bricklaying". May 8/95: Noisy and
y 9/95. Complaining of pains in his chest.
chest improved. May 18/95: Behavior very good,
nts. May 19/95: Escaped, while being taken out
" 31 for a walk about 2:30 PM; was caught & returned to Hospital at 4 PM. Aug 31/95: Has
been quiet since his return - Works some on hall. Otherwise, condition about as usual.
June 1 June 1/95. Wt 147 lbs. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95: Stated "he was content to stay here for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 10/95: Behavior quiet for some time past.
" 28 still writes considerably. June 28/95. Refused food: says "he will not eat until he obtains his pardon"-
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 89. Still shows delusions.
July 1 Says "he has more Spiritual Power than the Almighty Being" - July 20/95: "Desires to write
" 21 a Drama" - July 31/95: Behavior Quiet — no change mentally. See Daily Book "A" 218

And stupid as we people here
Our heads are as adequate
Me hair no own feeling of fate
That is now God to last night's tempest
Says he must now stop the fun is had now
Love sinners will be spared
The sinners from ... is love
Father from ... ask on our God is love
Think we ... Dad is saved
He will not punish me on the cross
If only I believe Dad is saved
This son has died for me on the cross
And in heaven
I shall be
I am safe

To the Honorable Sensible
American People.
Rochester Minn Oct 29. '94

Gentlemen of Honor: I Louis Schumann or he who has taken that gentlemen's place tell the American people that they are sane man because they think themselves wise and put a poet in the insane asylum.

What are you? Men of stony hearts!! who have no feeling in their breasts They think if they spend and give me an honor though the European influence I appreciate it. You have had me amongst you now 6 months and do not even want to hear me speak but punish on account of jealousy because I am blessed with knowledge.

If you had had some sense you would

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor has any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained

June 12 On admission, was put on B² (S.R. Complexion dark
" 13 on right leg over tibia, caused by abscess; bodily
for 8 hours, sleeping only 5 hours, last night. Appe
good. Talks some; says he used to be a brick-layer,
" 14 - plaints or injuries to note, today. June 14/94. Sle
and Dc) are normal. Talks freely but manifests
" 15 of his time writing poetry & letters to "prominen
hours, last night. Is restless today; reads; wri
" 16 June 16/94 Rested a fair night; restless & hum
" 17 laughing to himself; goes out walking with the
" 18 Quite restless today; still given to writing "poe
last night. Pulse has continued about normal
" 19 June 19/94. Slept much better, last night, being res
Talks some; makes no complaints. Is very
" 20 June 20/94. Slept fairly, again, last night. Keep
" 22 last night. Conduct & behavior do not change a
" 23 fairly well, last night. Is about as usual.
" 24 his time writing his poetry & items for the news
" 25 "his folks put him here; they are ignorant; do
" 26 quite well, the past 2 nights. Is about the sa
8 hours, last night. No change, today. Slee
little; they have kept about normal. As the
has been more or less restless, though none fu
deal. Does not seem to realize his condition
" 30 June 30/94. Still shows delusions; writes "poetry &c. Goes out walking, regularly.
July 2/ July 2/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (See attached Sample of same).
Works in dining-room; plays games - Appetite good; bowels regular. Goes walking. Still deluded.
Aug 1/ Aug 1/94. Wt 143 lbs. Pulse 92. Aug 2/94. Visited by a friend. Reads; plays games; works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 2/ Aug 2/94. Transferred to Ward East. Aug 31/94. Mental condition does not improve any.
Sep 4/ 31/ Sep 4/94. Wt 143 lbs. Pulse 78. Sep 30/94. Quiet & well-behaved. Spends most of his time in
30 reading, writing letters & composing "poetry". Has delusions. Talks reasonably;

have received me in good society.
The Europeans my countrymen would never have treated an American like that. You can clearly see how base you are. Should I ever make speeches in this country I would be crazy for you have had me a months and have done nothing else but persecuted me. I know I am able to take charge of a great country and if you had had some sense you would have tried to make me happy and done the rest afterwards. The jews 3000 ago had more sense when they put Daniel to high office, right after he made one single judgement. They knew right off what to do but you are ignorant people with stone hearts besides.
You have robbed me my liberty and happiness now 5 months. Are you not ashamed of yourself. You say "No" we are not ashamed.

We have through European influence build a throne where we put you when we let you out.
But you have not tried to make me happy those 5 months.
Could you not have done that like sensible after I had a happy home?
If it is not finished yet you need not trouble yourself about it but if you make me happy and let me go directly I might forgive you that injury but if it is finished when you let me go I shall leave this country forever. I am just as independent as the American people.
I can influence the Europeans that they put the Americans in the insane asylum too and then give them what they deserve.
Louis Schumann.
Poet.

Says "that time will come when he shall rule this Country". Sleeps onward. Habits are clean-
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 21/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients entertainments, in which he
participates - Dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/ Nov 1/94 Wt 144 lbs. (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says himself
12 "to be Christ". Threatening in language & act. Now; says "he is going to kill Dr Kellbourne, the first time
he has taken third, he struck C. G. Anderson (Supervisor).
ter poetry &c. Appetite good; bowels are regular -
s onward - Behaves well - Talks freely but still
; writes a good deal of poetry (?) & many letters (?) -
Clean & tidy - Works onward; physical condition is good -
"off"; restless, walking the hall, talking &
restless but otherwise no special change noted -
ay. Feb 28/95. Writes considerably (See old Samples) -
Death": Is considerably off: Struck John Howe,
& E³. After coming onward, was still in a very
d done - Feb 28/95: Expressed his regret for having struck
in patients condition, physically or mentally
een quiet & well-behaved, of late. Still has delusions.
- Eats & sleeps well. Physical condition good.
a very long argument against the injustice of
se he is a Poet". Claims he has the power to
in I, through Conquest - Claims also he can be
to publish his "poetry". Apl 30/95: Has been quiet.
a "Poet" - Eats & sleeps well. Reads, writes (see
tainments. Still shows his peculiar delusions
ndition very good, but no improvement noted, mentally.
he is not going to let his mind run on
et to "bricklaying". May 8/95: Noisy and
9/95. Complaining of pains in his chest.
chest improved. May 18/95: Behavior very good.
nts. May 29/95: Escaped, while being taken out
31 for a walk about 2³⁰ PM: was caught & returned to Hospital at 4 PM. May 31/95: Has
been quiet, since his return - Works some on hall. Otherwise, condition about as usual.
June June 1/95 Wt 147 lbs. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95: Stated he was content to stay here, for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95: Behavior quiet for some time past.
- 25 Still writes considerably. June 28/95. Refused food: Says "I will not eat, until he obtains his pardon"-
- 30 June 30/95. Appetite much improved. July 1/95: Wt 145 lbs. Pulse 84. Still shows delusions.
July Says he has more Spiritual power than the Almighty Being" - July 29/95: Desires to write
" 31 a Drama" - July 31/95: Behavior quiet — no change mentally. See Pamphlet Book "A" 218

1894

This patient was brought here by Deputy Sheriff Haas
and moral. There is history of heredity, his mother ha
Insanity is chronic. There is no accompanying
last fall, by incoherence. This is not the fi
now shown on the subjects of phrenol
or destructive habits. If succes
foundation for a house. H

June 12 On admission, w
" 13 on right leg
for 3 hours, sleep
good. Talks some,
" 14 - plaints or injuries
and Ref are normal. S
" 15 - Of his time writing poet
hours, last night. Is neat
" 16 June 16/94. Passed a pow
" 17 laughing to himself; goes out
" 18 Quite restless today; still given
last night. Pulse has continued a
" 19 June 19/94. Slept much better, last night
Talks some; makes no complaints.
" 20 June 20/94. Slept poorly, again, last night
" 21 last night. Conduct & behavior do not change
" 22 fairly well, last night. Is about as usual.
" 23 his time writing his poetry & items for the newspapers. June 24/94. Still manifests delusions; says
" 24 "his folks put him here; they are ignorant; do not realize his abilities." June 25/94. Has been sleeping
" 25 quite well, the past 2 nights. Is about the same each day. June 26/94. Restless 3 hours, sleeping
" 26 6 hours, last night. No change, today. Summary. Pulse & temperature have fluctuated but
little; they have kept about normal. On the whole, his behavior has been fairly good. By day, he
has been more & less restless, though now quiet & less nervous of late; talks & laughs to himself a good
deal. Does not seem to realize his condition & still shows delusions. Physical condition is good.
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking, regularly. Works some.
July 2/94 July 2/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached sample of same).
Works in dining-room; plays games - Appetite good; bowels regular. Goes walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 3/94. Visited by a friend. Reads; plays games; works some in
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimen - also of his letters &c).
" 29 Aug 29/94. Transferred to Ward East. Aug 31/94. Mental condition does not improve any.
Sept 4/94 Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

1894

Says that time will come when he shall rule this Country" - Keeps in ward. Habits are clean -
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 31/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients' entertainments, in which he
participates - Dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/94 Wt 144 lbs. (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says himself
the Christ". Has attained [illegible]; says he is going to kill Dr. Kilbourne, the first time
he saw him that day, he struck C. G. Anderson (supervisor).
writes poetry &c. Appetite good; bowels are regular -
Works some in ward - Behaves well - Talks freely but still
delusions; writes a good deal of poetry (?) & many letters (?) -
Neat & tidy - Works in ward; physical condition is good -
Head "off"; restless, walking the hall, talking &
restless but otherwise no special change noted -
Dec 1/94. Dec 25/94. Writes considerably (see old samples).
Says "Death". Is considerably off". Struck John Howe,
Ward to C. After coming in ward, was still in a very
about done - Feb 28/95. Expressed his regret for having struck
Improved in patient's condition, physically or mentally
Has been quiet & well-behaved, of late. Still has delusions
Eats & sleeps well. Physical condition good.
a very long argument against the injustice of
because he is a poet". Claims he has the power to
him I, through Congress - Claims also he can be
& publish his "poetry". Apl 30/95. Has been quiet.
as a "Poet" - Eats & sleeps well. Reads, writes (see
entertainments. Still shows his peculiar delusions
condition very good, but no improvement noted, mentally.
Says he is not going to let his mind run on
set to "bricklaying". May 8/95. Noisy and
5/95. Complaining of pains in his chest.
chest improved. May 18/95. Behavior very good.
May 29/95. Escaped, while being taken out
for a walk about 2:30 PM: was caught & returned to Hospital at 4 PM. May 31/95. Has
been quiet since his return - Works some in hall. Otherwise, condition about as usual.
June 1 June 1/95. Wt 147 lbs. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated "he was content to stay here, for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95. Behavior quiet for some time past.
" 28 Still writes considerably. June 28/95. Refused food. Says "he will not eat until he obtains his pardon" -
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions.
July 2 Says "he has more Spiritual power than the Almighty Being" - July 29/95. "Desires to write
" 29 a Drama" - July 31/95. Behavior quiet - no change mentally.
" 31

Pocket Book "A" 218

President Cleveland.

Rochester Minn

Your Cowardness: In answer to
your letter to Rep. Catchings of Miss I
must state that you have not yet been
sharp enough. You need tarif for revenue
to support the Government and for no
other purpose. Whom are you going to
protect. Nobody else but working men who
do not deserve it. Who want high wages
and no labor and millioncair. Your
systems, that is, all your factories we build
artificially and not naturally and tumble
by the least blow. If they can not stand on
their own footing why let them break down and
let other man start them up again. But the
trouble is when you have one million you want
2 millions and so on and are never satisfied
if you make an honest living. Money, Money
Money, Money, Money, money and money

Personal and Medical History of **Louis Schumann**

1894 BARRETT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy-Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor to any filthy or destructive habits. If suicidal, is not stated. Patient

June 12 On admission, was put on B² (S.D. Complexion dark; h
" 13 on right leg via tibia, caused by abscess; bodily co
for 8 hours, sleeping only 2 hours, last night. Am. Pul
good. Talks some; says he used to be a brick-layer, h
" 14 - plants or injuries to note, today. June 14/94. Slept
and Ic) are normal. Talks freely but manifests del
" 15 of his time writing poetry & letters to prominent
hours, last night. Is restless today; reads; write
" 16 June 16/94. Passed a poor night; restless 4 hours;
" 17 laughing to himself; goes out walking with the re
" 18 Quite restless today; still given to writing "poetry
last night. Pulse has continued about normal.
" 19 June 19/94. Slept much better, last night, being restle
Talks some; makes no complaints. Is very p
" 20 June 20/94. Slept poorly, again, last night. Restle
" 22 last night. Conduct & behavior do not change an
" 23 fairly well, last night. Is about as usual.
" 24 his time writing his poetry & items for the newsp
" 25 his folks put him here; they are ignorant; do no
" 26 quite well, the past 2 nights. Is about the sam
8 hours, last night. No change, today. Sleep
little; they have kept about normal. As the w
has been more or less restless, though more quie
deal. Does not seem to realize his condition &
" 30 June 30/94. Still shows delusions, writes "poetry" &c. Goes out walking; regularly. Works some.
July 2/ July 2/94. Wt 143 pds. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached Sample of same).
Works in dining-room; plays games - Appetite good; bowels regular. Goes walking. Still deluded.
Aug 1/ Aug 1/94. Wt 142 pds. Pulse 92. Aug 23/94. Visited by a friend. Reads; plays games; works some a
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29/ Aug 29/94. Transferred to 1st East. Aug 31/94. Mental condition does not improve any.
Sept 31/ Sept 4/94. Wt 143 pds. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

If you want reform take courage and step to the front and say. Here I am! I'll breaks you all up if you are shaky. I want reform I must have reform. I am in favor of letting all the wool in even if we have to go naked. I'll let all the coal in even if we have to freeze in the winter. We have to eat and water enough and let all the whisky and beer men combine and I tell you we will not go try. We democrats can hold out drinking whisky as long as you trust hold out. The trouble it is you country the capitalist want all the work done in one day and the fault with the laborers. If they get 4 Dall. a day they want 6 the next and 4 the other and 10 the next day. They strike all thy time. And how you treat the ladies!? Like babies. Whenever I came in a streetcar every man jumped up. Put them on the same foot with man. It is good enough to offer them the seat but say nothing like a fool. Ask a lady. will you have a seat please. If she says "No" Let her stand. Or she can ask too for it if she has education.

I have traveled considerable in Europe and think know all a little myself. I find the most uncivilized people in america. I have travelled here in diguise now 2 years and resumed the name and place of a bricklayer L. Schumann. My home is Germany and I tell you the Germans treat the Americanz more respectabbe. I have won a great bet for I have bet in Germany that the Americans would put a poet in prison but not insane asylum. Can you do that? As soon as I get back to Germany shall tell you my real name. I must say I have had a good education among the European nability and I tell you those noble men have more sense than your free people and they treat their laborers better than your millionaires. I shall call you Prince of Cleveland because you made me win my bet for if you had objected I would have lost it.

Personal and Medical History of **Louis Schumann**

1894

Says "that time will come when he shall rule this Country". Helps in ward. Habits are clean -
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 21/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients' entertainment, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/ Nov 1/94. Wt 144 pds. (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
" 26 to be Christ". Has retained

1895

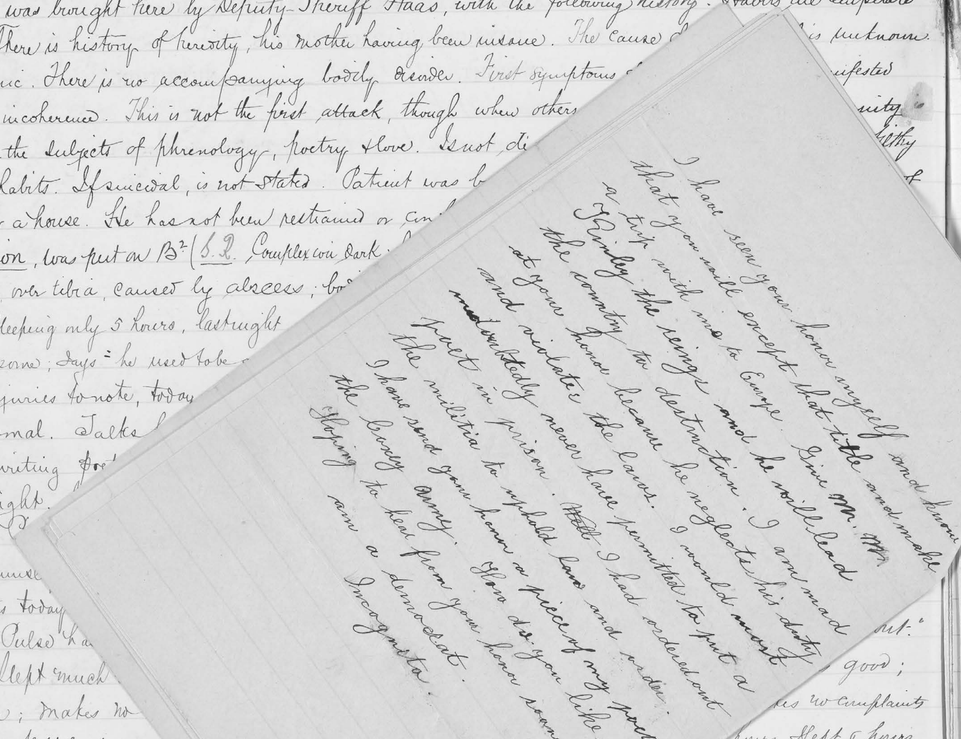
Says "he is going to kill Dr. Kilbourne, the first time I
I saw him, he struck C. G. Anderson (Supervisor).
poetry &c. Appetite good; bowels are regular -
some in ward - Behaves well - Talks freely but still
writes a good deal of poetry (?) & many letters (?) -
study - Works in ward; physical condition is good -
"off"; restless, walking the hall, talking &
restless but otherwise no special change noted -
Feb 28/95. Writes considerably (see old samples) -
Death". Is considerably off". Struck John Howe,
Co 3. After coming in ward, was still in a very
done - Feb 28/95. Expressed his regret for having struck
patient's condition, physically or mentally.
quiet & well-behaved, of late. Still has delusions.
Eats & sleeps well. Physical condition good.
very long argument against the injustice of
he is a Poet". Claims he has the power to
I, through Conquest - Claims also he can be
publish his "poetry". April 30/95: Has been quiet.
"Poet" - Eats & sleeps well. Reads, writes (see
ainments. Still shows his peculiar delusions
tion very good, but no improvement noted, mentally.
He is not going to let his mind run on
to "bricklaying". May 9/95: Noisy and
95. Complaining of pains in his chest.
est improved. May 18/95: Behavior very good.
May 29/95: Escaped, while being taken out
" 31 for a walk about 2:30 P.M.: was caught & returned to Hospital at 4 P.M. May 31/95: Has
been quiet since his return - Works some on hall. Otherwise, condition about as usual.
June 1 June 1/95. Wt 147 pds. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95: Stated he was content to stay here for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95: Behavior quiet for some time past.
" 24 still writes considerably. June 28/95. Refuses food: Says "he will not eat, until he obtains his pardon" -
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 pds. Pulse 84. Still shows delusions.
July 1/ Says "he has more Spiritual Power than the Almighty Being" - July 20/95: "Desires to write
" 21 a Drama" - July 31/95: Behavior quiet - no change mentally. Do Sample Book "A" 218

HERBERT, FULGAR & CHAMBERS, DAVENPORT, IOWA

1894

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause [illegible] is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms manifested last fall, by incoherence. This is not the first attack, though when others [illegible] now shown on the subjects of phrenology, poetry & love. Is not di[illegible] or destructive habits. If suicidal, is not stated. Patient was [illegible] foundation for a house. He has not been restrained or [illegible]

June 12 On admission, was put on B2 (S.D. Complexion dark [illegible]
" 13 on right leg over tibia, caused by abscess, [illegible] for 8 hours, sleeping only 5 hours, last night. Appetite good. Talks some; says he used to be [illegible]
" 14 - plaints or injuries to note, today [illegible] and Tº are normal. Talks [illegible]
" 15 of his time writing [illegible] hours, last night.
" 16 June 16/94. [illegible]
" 17 Laughing to himself [illegible]
" 18 Quite restless today [illegible] last night. Pulse & [illegible]
" 19 June 19/94. Slept much [illegible] Talks some; makes no [illegible]
" 20 June 20/94. Slept poorly, aga[illegible]
" 22 last night. Conduct & behavior [illegible]
" 23 fairly well, last night. Is abou[illegible] his time writing his poetry & items [illegible]
" 24 his folks put him here; they are igno[illegible]
" 25 quite well, the past 2 nights. Is about [illegible]
" 26 8 hours, last night. No change, today. [illegible] Pulse & temperature have fluctuated but little; they have kept about normal. On the whole, his behavior has been fairly good. For day, he has been more or less restless, though more quiet & less nervous of late; talks & laughs to himself a good deal. Does not seem to realize his condition & still shows Delusions. Physical condition is good.
" 30 June 30/94. Still shows Delusions; writes "poetry" &c. Goes out walking, regularly. Works none. —
July 2/ July 2/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given writing "poetry &c" (see attached Sample of same). Works in dining-room; plays games - Appetite good. Bowels regular. Goes walking. Still deluded.
Aug 1/ Aug 1/94. Wt 142 lbs. Pulse 92. Aug 23/94. Retires by a friend. Reads; plays games: works some on ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29 Aug 29/94. Transferred to 1st East. Aug 31/94. Mental condition does not improve any.
Sept 4/ 31 Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;



I hear some [illegible] voice [illegible] myself and [illegible]
that you would accept that title and [illegible]
a step with me to Europe. Since Mr. [illegible]
Finally the [illegible] and he would lead
the country to destruction, I am mad
at [illegible] because he neglects his duty
and gives [illegible] because he neglects his duty
mind would have permitted him [illegible]
must undoubtedly never have [illegible]
Insert in prison. [illegible] I had evidence
the militia to [illegible] and [illegible]
I shall send some [illegible] or pieces of my [illegible]
the Bandy Army. Your dev. [illegible]
Hoping to hear from you [illegible]
remain
Sincerely

The people of Europe and the rest of the world except the U. St of America.
Rochester Minn
Oct 15.
Children of God.
I Louis Schumann
born in 1862 in Langenleuba-Niederhain. Saxhsen Altenburg
Germany ask your aid to release me from confinement I have been inspired by our creator by the holy ghost.
The people in this country who believe in all the miracles in the bible do not believe me but declared me a lunatic and keep me confined in an insane asylum as crazy.
Should they not release me within 24 hours I give order to declare war against

1894

Says "that time will come when he shall rule this Country". Sleeps in ward. Habits are clean-
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 21/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients entertainment, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/ Nov 1/94. Wt 144 lbs - (Gained some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
25 to be Christ". Threatening in language quite often; says "he is going to kill Dr. Kilbourne, the first time
he sees him" - Transferred to B2 today. When taken there, he struck C. J. Anderson (Supervisor).
" 30 Nov 30/94. Behavior quite good. Still deluded. Writes poetry &c. Appetite good; bowels are regular -
Dec 1/ Dec 1/94. Wt 145 lbs. Pulse 84. Dec 31/94. Works some on ward - Behaves well - Talks freely but still
30 manifests delusions; reads some; plays checkers; writes a good deal of poetry (?) & many letters (?) -
[illegible] patients Dances, participating in them - Clean & tidy - Works on ward; physical condition is good -
[illegible] do "off"; restless, walking the hall, talking & [illegible] restless but otherwise no special change noted -
[illegible] day. Feb 28/95. Writes considerably (see old samples) -
[illegible] a Death". Is considerably off". Struck John Howe,
[illegible] to B3. After coming on ward, was still in a very
[illegible] not done - Feb 28/95. Expressed his regrets for having struck
[illegible] in patient's condition, physically or mentally
[illegible] been quiet & well-behaved, of late. Still has delusions.
[illegible] - Eats & sleeps well. Physical condition good.
[illegible] a very long argument against the injustice of
[illegible] use he is a Poet". Claims he has the power to
[illegible] een I, through Conquest - Claims also he can be
[illegible] to publish his "poetry". Apl 30/95: Has been quiet.
[illegible] as a "Poet" - Eats & sleeps well. Reads, writes (see
[illegible] tertainments. Still shows his peculiar delusions
[illegible] condition very good. Is to improvement noted, mentally.
[illegible] "he is not going to let his mind run on
[illegible] ject to "bricklaying". May 8/95: Noisy and
[illegible] 9/95. Complaining of pains in his chest.
[illegible] chest improved. May 18/95: Behavior very good;
[illegible]. May 29/95: Escaped, while being taken out
[illegible] med to Hospital at 4 P.M. May 31/95: Has
[illegible]. Otherwise, condition about as usual.
[illegible] ly is easily agitated. Health seems good.
[illegible] another year, & at the expiration of that time,
June 20/95: Behavior quiet for some time past.
- 24 still writes considerably. "June 28/95". Appetite good.
- 30 June 30/95. Appetite much improved. July 1/95: Says "he will not eat until he obtains his pardon" -
July 1/ " 22 Says "he has more Spiritual Power than the Almighty Being" - July 29/95: "Desires to write
" 31 a Drama" - July 31/95: Behavior quiet — no change mentally.

Personal and Medical History of **Louis Schumann**

1894

BARRATT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor has any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained or confined nor under medical treatment. —

June 12 On admission, was put on B² (S. D. Complexion dark; hair black; eyes gray; condition of skin good; scars on right leg over tibia, caused by abscess; bodily condition clean; behavior good). June 13/94. Restless for 8 hours, sleeping only 5 hours, last night. Am. Pulse good. Talks some; says he used to be a brick-layer, has complaints or injuries to note, today. June 14/94. Slept and Ate are normal. Talks freely but manifests delusions of his time writing poetry & letters to prominent hours, last night. Is restless today; reads; writes June 16/94. Passed a poor night; restless 4 hours; laughing to himself; goes out walking with the Quite restless today; still given to writing poetry last night. Pulse & Ate continue about normal. June 19/94. Slept much better, last night, being restless Talks some; makes no complaints. Is very res June 20/94. Slept poorly, again, last night. Restless last night. Conduct & behavior do not change any fairly well, last night. Is about as usual. his time writing his poetry & items for the newspa his folks put him here; they are ignorant; do not quite well, the past 2 nights. Is about the same 8 hours, last night. No change, today. Summa little; they have kept about normal. As the whole has been more or less restless, though more quiet & deal. Does not seem to realize his condition & th June 30/94. Still shows delusions; writes "poetry" &c. July 2/94. Wt 143 lbs. July 6/94. Tried to walk a July 31/94. Is quiet & well-behaved. Much given to Works in dining-room; plays games - Appetite go Aug 1/94. Wt 142 lbs. Pulse 96. Aug 2/94. Visited by a friend. Reads; plays games: Works some in ward. Behaves well & is quiet. Continually writing "poetry"; (see specimen - also of his letters &c). Aug 27/94. Transferred to 3rd East. Aug 31/94. Mental condition does not improve any. Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

Personal and Medical History of **Louis Schumann**

1894

Says "that time will come when he shall rule this Country" - Sleeps in ward - Habits are clean - Oct 2/94 - Wt 150 pounds. (Some gain in flesh) - Pulse 92. Oct 31/94. No change noticeable. Of anything, delusions seem to be more strong with him - Attends patients entertainment, in which he participates - dancing &c - Habits clean & neat - Patient is in quite good physical health. Nov 1/94. Wt 144 lbs - (Has lost some in flesh) - Pulse 84. Nov 25/94. Is very changeable. Says "himself is to be Christ". Threatening in language quite often; says "he is going to kill Dr. Kilbourne, the first time he sees him" - Transferred to B² today - When taken there, he struck C. J. Anderson (Supervisor). Nov 30/94. Behavior quite good. Still deluded. Writes poetry &c - Appetite good; bowels are regular - Dec 1/94. Wt 145 lbs. Pulse 84. Dec 31/94. Works some in ward - Behaves well - Talks freely but still writes a good deal of poetry (?) & many letters (?) - Is quiet & tidy - Works in ward; physical condition is good - "off"; restless, walking the hall, talking & restless but otherwise no special change noted - Feb 28/95. Writes considerably (see old samples) - Deaths". Is considerably off". Struck John Howe, & C³. After coming in ward, was still in a very done - Feb 28/95. Expressed his regret for having struck in patients' condition, physically or mentally. quiet & well-behaved, of late. Still has delusions. Eats & sleeps well. Physical condition Good. everlong argument against the injustice of he is a poet". Claims he has the power to I, through Conquest - Claims also he can be & publish his "poetry". Apl 30/95. Has been quiet. a "Poet" - Eats & sleeps well. Reads, writes (on tainments. Still shows his peculiar delusions dition very good, but no improvement noted, mentally he is not going & let his mind run on to "bricklaying". May 8/95. Noisy and /95. Complaining of pains in his chest. best improved. May 18/95. Behavior very good. May 29/95. Escaped, while being taken out ed to Hospital at 4 P.M. May 31/95. Has otherwise, condition about as usual. is easily agitated. Health seems good. June 3/95. Stated he was content to stay here, for another year, & at the expiration of that time, he will have received punishment enough". June 10/95. Behavior quiet, for some time past. still writes considerably. June 28/95. Refuses food. Says "I will not eat until I obtain his pardon" - June 30/95. Appetite much improved - July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions. Says "he has more of Spiritual Power than the Almighty Being" - July 20/95. "Desires to write a Drama" - July 31/95. Behavior Quiet — No change mentally

kill people and destroy them for they are the worst people I ever have come across. Even if I am amongst them I send this notice through them and hope you will fulfil the word of God who speaks through his chosen people. I prefer a death before confinement.

To Daily Book "A" 218

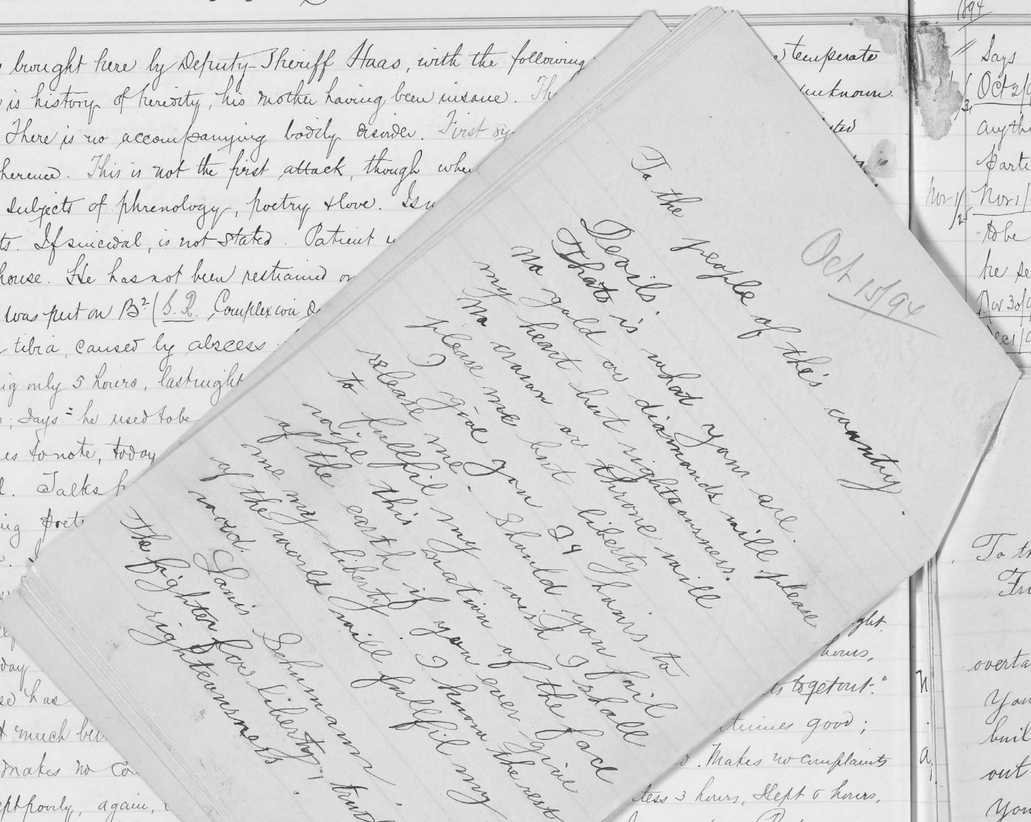
Personal and Medical History of **Louis Schumann**

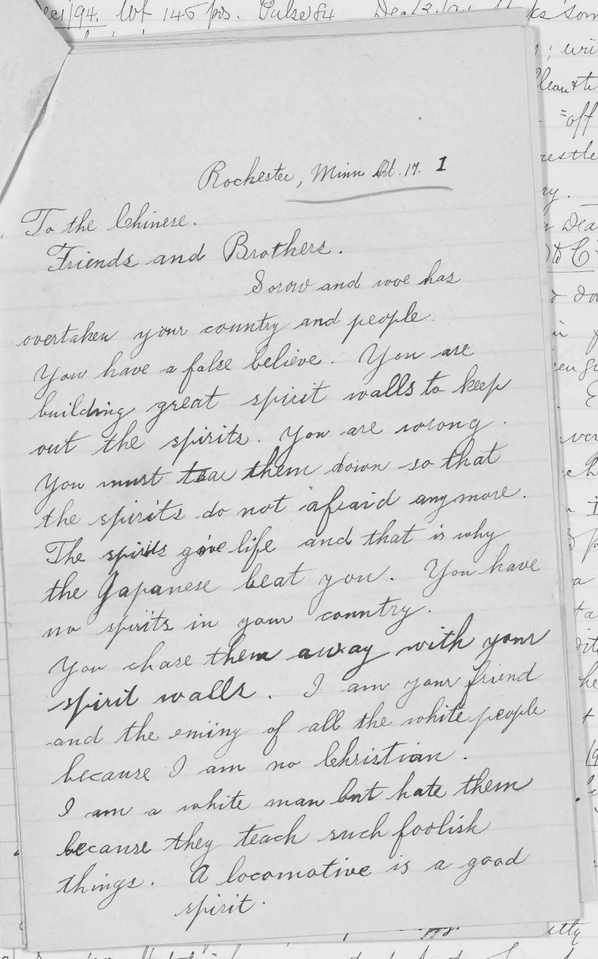
ROBERT, FOLAR & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy-Sheriff Haas, with the following
and moral. There is history of heredity, his mother having been insane. Th
Form is Chronic. There is no accompanying bodily disorder. First sy
last fall, by incoherence. This is not the first attack, though whe
now shown in the subjects of phrenology, poetry & love. Se
or destructive habits. If suicidal, is not stated. Patient
foundation for a house. He has not been restrained o

June 12 On admission, was put on B² (S.D. Complexion d
" 13 on right leg, ver tibia, caused by abscess
for 8 hours, sleeping only 3 hours, last night
good. Talks some; says he used to be
" 14 - plaints or injuries to note, today
and Pc) are normal. Talks h
" 15 of his time writing poet
hours, last night.
" 16 June 16/94. Sa
" 17 laughing to himself
" 18 Quite restless today
last night. Pulse has
" 19 June 19/94. Slept much bet
Talks some; makes no co
" 20 June 20/94. Slept poorly, again,
" 21 last night. Conduct & behavior doe
" 22 fairly well, last night. Is about a
" 23 his time writing his poetry & items for
" 24 his folks put him here; they are ignorant;
" 25 quite well, the past 2 nights. Is about the
" 26 6 hours, last night. No change, today. Summary. Pulse & temperature have fluctuated but
little; they have kept about normal. As the whole, his behavior has been fairly good. By day, he
has been more or less restless, though more quiet & less nervous of late; talks & laughs to himself a good
deal. Does not seem to realize his condition & still shows delusions. Physical condition is good.
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking; regularly. Works some.
July 2/94 July 2/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached sample of same).
Works in dining-room; plays games - Appetite good; bowels regular. Goes walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 3/94. Writes by a friend. Reads; plays games; works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c) -
" 29 Aug 29/94. Transferred to 1st East. Aug 31/94. Mental condition does not improve any.
Sept 4/94 Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;


To the people of this country.
Oct 15/94
Dear Sirs,
Christ is about down all.
His gold or diamonds will please
no man but righteousness.
my heart but righteousness.
Please me but Love
Jesus Christ
I should learn
I ask
to
Christ me
Christ
my
to
fulfill
If
the
earth
if
you
one
my
the
world
Louis Schumann
Dr. Eggleston
right
Kindness
Seventeenth


Rochester, Minn Oct. 17. 1
To the Chinese.
Friends and Brothers.
Sorrow and woe has
overtaken your country and people.
You have a false believe. You are
building great spirit walls to keep
out the spirits. You are wrong.
You must tear them down so that
the spirits do not ifraid any more.
The spirits give life and that is why
the Japanese beat you. You have
no spirits in your country.
You chase them away with your
spirit walls. I am your friend
and the friend of all the white people
because I am no Christian.
I am a white man but hate them
because they teach such foolish
things. A locomotive is a good
spirit.

Personal and Medical History of **Louis Schumann**

1894

Says that time will come when he shall rule this country". Sleeps onward. Habits are clean -
Oct 21/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 21/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients entertainments, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/94 Nov 1/94. Wt 144 lbs - (has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says himself
"to be Christ". Threatening in language quite often; says "he is going to kill Dr. Kellbourne, the first time
he sees him" - Transferred to B². today. When taken there, he struck C. G. Anderson (Supervisor).
Nov 30/94. Behavior quite good. Still deluded. Writes poetry &c. Appetite good; bowels are regular -
Dec 1/94. Wt 145 lbs. Pulse 84. Does some on ward - Behaves well - Talks freely but still
; writes a good deal of poetry (?) & many letters (?) -
clean & tidy - Works on ward; physical condition is good -
"off"; restless, walking the hall, talking &
restless but otherwise no special change noted -
ry. Feb 28/95. Writes considerably (see old samples) -
Death". Is considerably off". Struck John Howe,
& Co³. After coming on ward, was still in very
done - Feb 28/95. Expressed his regrets for having struck
in patient's condition, physically or mentally.
been quiet & well-behaved, of late. Still has delusions.
Eats & sleeps well. Physical condition Good.
very long argument against the injustice of
he is a poet". Claims he has the power to
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May 29/95: Escaped, while being taken out
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otherwise, condition about as usual.
ily & is easily agitated. Health seems good.
June 3/95 Stated" he was content to stay here, for another year, & at the expiration of that time,
he will have received punishment enough". June 20/95: Behavior quiet; for some time past
still writes considerably. June 28/95. Refused food: Says "he will not eat until he obtains his pardon" -
June 30/95. Appetite much improved. July 1/95: Wt 145 lbs. Pulse 84. Still shows delusions.
Says "he has more Spiritual power than the Almighty Being" - July 29/95: "Desires to write
a Drama" - July 31/95: Behavior quiet — no change mentally.

Personal and Medical History of **Louis Schumann**

1894

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shows on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor to any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained or confined nor under medical treatment. —

June 12 On admission, was put on B² (S.R. Complexion dark;
" 13 on right leg was tibia caused by abscess, bodily
for 8 hours, sleeping only 3 hours, last night. Appe
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" 14 - plaints or injuries to note, today. June 14/94. Slept
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" 18 Quite restless today; still given to writing "poetr
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" 19 June 19/94. Slept much better, last night, being restle
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" 20 June 20/94. Slept poorly, again, last night. Restle
" 22 last night. Conduct & behavior do not change any
" 23 fairly well, last night. Is about as usual.
" 24 his time writing his poetry & items for the newsp
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" 30 June 30/94. Still shows delusions; writes "poetry" &c
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" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c (see attached sample of same).
Walks in dining-room; plays games - Appetite good; bowels regular. Does walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 3/94. Writes by a friend. Reads; plays games: walks some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimen - also of his letters &c).
" 29 Aug 29/94. Transferred to 1st East. Aug 31/94. Mental condition does not improve any.
Sept 4/94 31 Sept 4/94. Wt 143 lbs. Pulse 76. Sept 30/94. Quiet & well-behaved. Spends most of his time in
30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

Telagraph is the holy ghost
but the white people do not tell
you the truth. As I am now
confined but shall come to your
country as soon as I am release.
I shall bring you new life
nice verses. Learn my language
root which is German and
shall learn your language.
Your country is the sacred country
but I wish you would send some
land or earth to this country so that
I can sanctify this country
so that your countrymen may be
buried here. Tear down your spirit
wall at any rate and you will
respect the Japanese.
I am your friend.
Louis Schumann
Songmaker.

To the Japanese.

Friends and Brothers.

I believe you have
punished the Chinese enough.
They will if they get my
letter from now lick you in
every battle. Make peace and
leave their country for the are tearing
down the spirit walls and the
spirits of the Chinese who have
been kept away by those spirit
walls will come down from heaven
and drive you away.
Those spirits you can not see
but will go into the bodies of
the Chinese.
Make haste and leave the Chinese
country before they are coming.
I am your friend and do not
like to see you killed in China.

Personal and Medical History of **Louis Schumann.**

1894

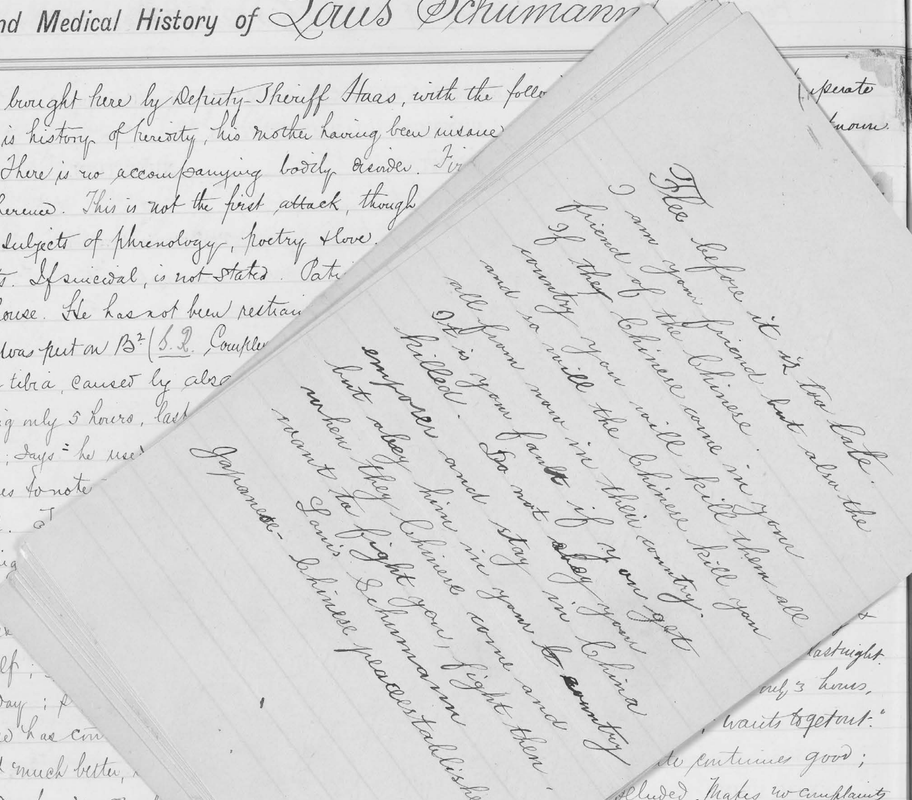
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Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 21/94. No change noticeable. If
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Nov 1/94 Nov 1/94. Wt 144 lbs. (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
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chest improved. May 18/95: Behavior very good;
t. May 29/95: Escaped, while being taken out
turned to Hospital at 4 P.M. May 31/95: Has
been quiet since his return - would come in hall. Otherwise, condition about as usual.
June 1 June 1/95. Wt 147 lbs. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated "he was content to stay here, for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95: Behavior quiet; for some time past
" 25 still writes considerably. June 28/95. Refuses food: says "he will not eat until he obtains his pardon"
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions.
July 2 Says "he has more spiritual power than the Almighty Being" - July 29/95: "Desires to write
" 29 a Drama" - July 31/95: Behavior quiet — no change mentally. To Ledger Book "A" 218
" 31

1894

EBERLY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy-Sheriff Haas, with the follo... and moral. There is history of heredity, his mother having been insane... Form is Chronic. There is no accompanying bodily disorder. Fi... last fall, by incoherence. This is not the first attack, though... now shown on the subjects of phrenology, poetry & love... or destructive habits. If suicidal, is not stated. Pate... foundation for a house. He has not been rectiar...

June 12 On admission, was put on B² (S.D. Complex...
" 13 on right leg over tibia, caused by also... for 3 hours, sleeping only 3 hours, last... good. Talks some; says he met... " 14 - plants & injuries to note... and Pel are normal. T...
" 15 Of his free writing... hours, last nigh...
" 16 June 16/94. Pass...
" 17 laughing to himself; ...
" 18 Quite restless today; ... last night. Pulse has cre...
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" 20 June 20/94. Slept fairly, again, last...
" 22 last night. Conduct & behavior do not...
" 23 fairly well, last night. Is about as re...
" 24 his knee writing his poetry & items for the ...
" 25 his folks put him here; they are ignorant; do...
" 26 quite well, the past 2 nights. Is about the same each day. June 26/94. Restless 3 hours, sleeping 5 hours, last night. No change, today. Summary. Pulse & temperature have fluctuated but little; they have kept about normal. As the whole, his behavior has been fairly good. By day, he has been more or less restless, though more quiet & less nervous of late; talks & laughs to himself a good deal. Does not seem to realize his condition & still shows Delusions. Physical condition is good.
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking, regularly. Works none. —
July 5/6 July 7/94. Wt 143 pds. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached Samples of same). Works in dining-room; plays games - Appetite good; bowels regular. Goes walking. Still deluded.
Aug 1/31 Aug 1/94. Wt 142 pds. Pulse 92. Aug 3/94. Visited by a friend. Reads; plays games; works some on ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29/31 Aug 29/94. Transferred to 4th East. Aug 31/94. Mental condition does not improve any.
Sep 4/30 Sep 4/94. Wt 143 pds. Pulse 78. Sep 30/94. Quiet & well-behaved. Spends most of his time in reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;


The Japanese before it is too late.
I am your friend & the Chinese
friend of the Chinese come in your
country & will help them all
I can if they will help them
and in their country.
All from now in their country.
Oh it is your fault if you get
killed. Do not stay
emperor and stay
but obey him in your
no how they Chinese come and
retreat for fright your fight them
Louis Schumann
Louis Schumann
Japanese
Please establish

1894

Says "that time will come when he shall rule this country". Sleeps in ward. Habits are clean - Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 31/94. No change noticeable. If anything, delusions seem to be more strong with him. Attends patients entertainments, in which he participates - dancing &c - Habits clean & neat - Patient is in quite good physical health. Nov 1/94. Wt 144 pds - (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself is to be Christ". Characterized in language quite often; says "he is going to kill Dr. Kilbourne, the first time he sees him" - Transferred to B². Today - When taken there, he struck C. J. Anderson (Supervisor). Dec 3/94. Behavior quite good. Still deluded. Writes poetry &c - Appetite good; bowels are regular - Works some on ward - Behaves well - Talks freely but still ...; writes a good deal of poetry (?) & many letters (?) - Keeps clean & tidy - Works on ward; physical condition is good - ... "off"; restless, walking the hall, talking & restless but otherwise no special change noted - ...ay. Feb 28/95. Writes considerably (see old Samples). ...s Deaths". Is considerably off". Struck John Howe, ...ed to C³. After coming on ward, was still in a very ...ed done - Feb 28/95. Expressed his regret for having struck ... in patients' condition, physically or mentally ... been quiet & well-behaved, of late. Still has delusions ... - Eats & sleeps well. Physical condition good. ... a very long argument against the injustice of ...use he is a "poet". Claims he has the power to ...ion I, through Conquest - Claims also he can be ... to publish his "poetry". Apl 30/95. Has been quiet. ...s a "Poet" - Eats & sleeps well. Reads, writes (se... entertainments. Still shows his peculiar Delusions ...ndition very good, but no improvement noted, mentally. ... "he is not going to let his mind pass on ... ject to "bucklayng". May 8/95 - Noisy and ... 7/95. Complaining of pains in his chest. ... chest improved. May 16/95. Behavior very good; ... May 23/95. Escaped, while being taken out ...rned to Hospital at 4 P.M. May 31/95. Has ...el. Otherwise, condition about as usual.

Rochester, Minn. Oct 5, '94

Mr. Grover Cleveland
President of the U. S. of A.

Your Honor:- Circumstances compell me to trouble you with a few lines.

I believe you know the constitution of this country. As far as I know it garrantees liberty to every citizen as long as he is not violating the laws of this country. Have I violated such laws?

I have first been arrested and put in jail for several days and afterwards thrown into this crazy house through the... Schumann who claims I am not able to take care of my self. Is that man the God or a doctor or expert who has the authority to do what he pleases? Had I been committed by the state or a man of knowledge I would

June 1/95. Wt 147 pds. P 91. Retains incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated "he was content to stay here, for another year, & at the expiration of that time, he will have received punishment enough". June 20/95. Behavior quiet for some time past.
" 27 still writes considerably. June 28/95. Retains good. Says "he will not eat, until he obtains his pardon".
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 pds. Pulse 84. Still shows delusions.
July 1/30 Says "he has more Spiritual Power than the Almighty Being". July 29/95. "Desires to write a Drama". July 31/95. Behavior quiet — no change mentally.
" 31

to Ramp Book "A" 218

1894

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits and temperate and moral. There is history of heredity, his mother having been insane. The cause of the attack is not known. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor to any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained or confined nor under medical treatment. —

June 12 On admission, was put on B² (S.S. Complexion dark; hair black, eyes gray; condition of skin good; scars
" 13 on right leg over tibia, caused by abscess; bodily
for 8 hours, sleeping only 5 hours, last night. Tem.
good. Talks some; says he used to be a brick-layer
" 14 - plants or injuries to note, today. June 14/94. Ske
and D.R. are normal. Talks freely, but manifests
" 15 of his time writing poetry & letters to prominen
hours, last night. Is restless today; reads; wri
" 16 June 15/94. Passed a poor night; restless & hour
" 17 laughing to himself; goes out walking with the
" 18 Quite restless today; still given to writing poe
last night. Pulse has continued about normal
" 19 June 19/94. Slept much better, last night, being rest
Talks some; makes no complaints. Is very
" 20 June 20/94. Slept fairly, again, last night. Kept
" 22 last night. Conduct & behavior do not change a
" 23 fairly well, last night. Is about as usual.
" 24 his time writing his poetry & items for the news
" 25 his folks put him here; they are ignorant; do n
" 26 quite well, the past 2 nights. Is about the sa
8 hours, last night. No change, today. June
little; they have kept about normal. Outside
has been more or less restless, though more fri
deal. Does not seem to realize his condition &
" 30 June 30/94. Still shows delusions; writes "poetry" &
July 2/ July 2/94. Wt. 143 pds. July 6/94. Tried to walk
" 31 July 31/94. Is quiet & well-behaved. Much given to
books in dining-room; plays games - Appetite good; bowels regular. Does walking. Still deluded.
Aug 1/ Aug 1/94. Wt 143 pds. Pulse 92. Aug 2/94. Visited by a friend. Reads; plays games: works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 2 Aug 2/94. Transferred to 11th East. Aug 31/94. Mental condition does not improve any.
Sep 4/ Sep 4/94. Wt 143 pds. Pulse 78. Sep 30/94. Quiet & well-behaved. Spends most of his time in
30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

1894

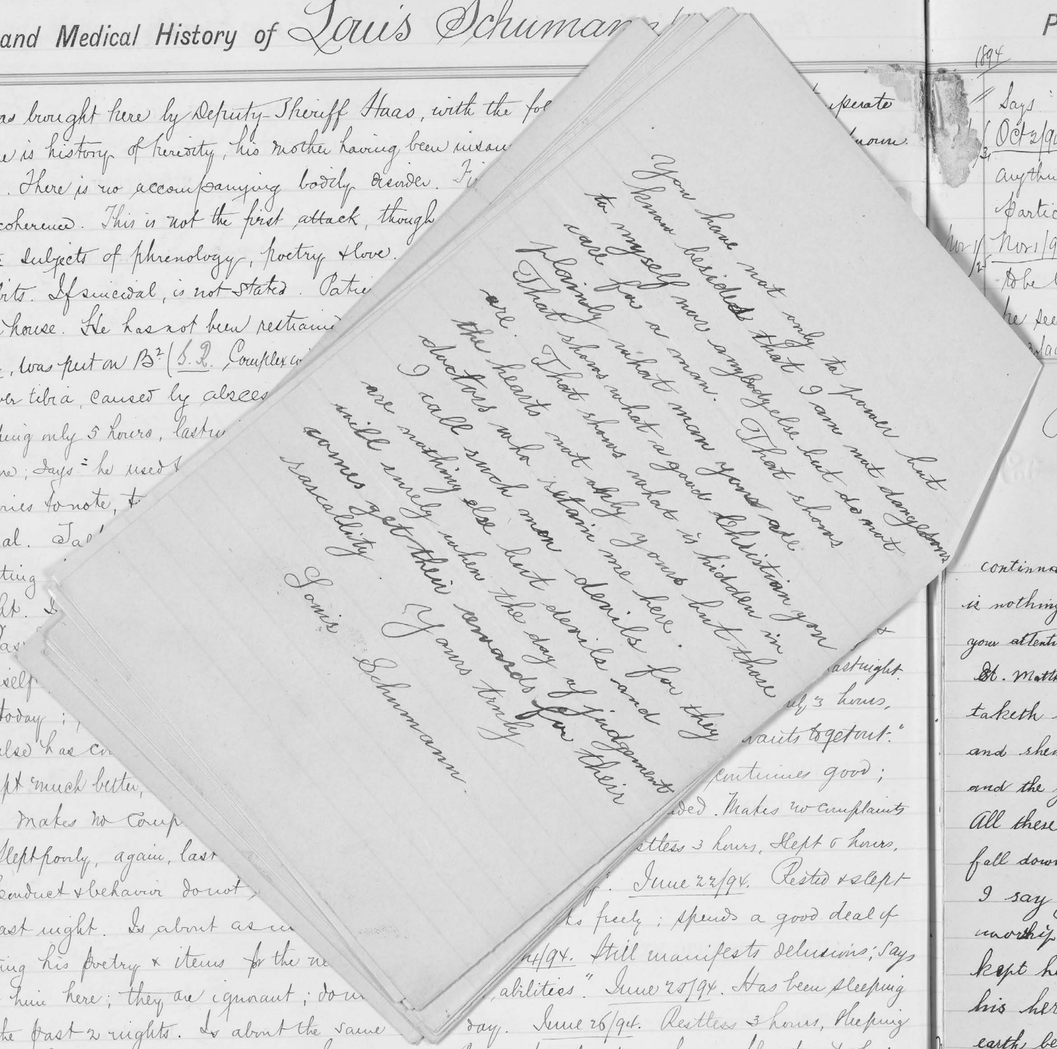
says "that time will come when he shall rule this Country". Sleeps onward. Habits are clean-
Oct 2/ Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 31/94. No change noticeable of
3 anything, delusions seem to be more strong with him. Attends patients entertainments in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/ Nov 1/94. Wt 144 pds. (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
12 to be Christ". Threatening in language quite often; says "he is going to kill Dr. Kilbourne, the first time
he sees him" - Transferred to B². today. When taken there, he struck C. G. Anderson (Supervisor).
" 30 Nov 30/94. Behavior quite [illegible] writes poetry &c. Appetite good; bowels are regular -
[illegible] some on ward - Behaves well - Talks freely but still
[illegible]; writes a good deal of poetry (?) & many letters (?) -
Clean & tidy - Works on ward; physical condition is good -
do "off"; restless, walking the hall, talking &
restless but otherwise no special change noted -
day. Feb 28/95. Writes considerably (see old samples) -
"Death". Is considerably off: Struck John Howe,
red to C³. After coming on ward, was still in a very
[illegible] done - Feb 28/95. Expressed his regret for having struck
in patient's condition, physically or mentally
been quiet & well-behaved, of late. Still has delusions
- Eats & sleeps well. Physical condition good.
a very long argument against the injustice of
use he is a "Poet". Claims he has the power to
con I, through Conquest - Claims also he can be
to publish his "poetry". Apl 30/95: Has been quiet.
as a "Poet". Eats & sleeps well. Reads, writes (as
tertainments. Still shows his peculiar delusions
ndition very good, but no improvement noted, mentally.
"he is not going to let his mind run on
ject to "bricklaying". May 8/95: Noisy and
9/95. Complaining of pains in his chest.
chest improved. May 18/95: Behavior very good;
. May 19/95. Escaped, while being taken out
turned to Hospital at 4 P.M. May 31/95: Has
[illegible] hall. Otherwise, condition about as usual.
June June 1/95 Wt 147 pds. P 91. Is talks incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated "he was content to stay here for another year, & at the expiration of that time,
he will have received punishment enough". June 10/95. Behavior quiet, for some time past.
" 25 Still writes considerably. June 28/95. Refuses food: says "I will not eat, until he obtains his pardon".
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 pds. Pulse 84. Still shows delusions.
July/ Says "he has more Spiritual power than the Almighty Being". July 20/95: Desires to write
" 21 a Drama". July 31/95: Behavior quiet — no change mentally. To Journal Book "A" 218

not complain at all but by a man
who in reality knows nothing I
object to such treatment.
I have of course as they claim not
foolish because I wanted to leave my
former stopping place by
C.G. Hanft who is married to a cousin
of mine. I claim that I had a right
I have a right
like it. I ask nothing else but my
liberty for liberty is the greatest wealth.
I shall leave this country forever
imediatly after my release and shall
trouble nobody. It is true I have
taken out the naturalization papers
and am a citizen of this country.
I will state that I have renounced
my citizenship and shall ~~be~~ again
become a subject to the
German Emperor who I think
will protect me so nobody can
take away my liberty any more
of course as long I am here I am
in your power. I believe you think
yourself smart because you have
kidnapped a crazy poet but I
have also been smart and have sent
my works to Germany long before
anybody knew much about my
crazy poetry and my brothers
and friends in that country know
where I am. You of course make
those people believe I am in
reality inacurably insane and
they of course believe it because my
dear mother was so importunate as
to be weakminded. Had I had
the means in those days I would
never have permitted that she were
committed to a state institution
but had employed somebody to
take care of her. Unfortunately we
were poor & and I was powerless to
prevent such a thing as that.

1894

This patient was brought here by Deputy-Sheriff Haas, with the fol
and moral. There is history of heredity, his mother having been insan
Form is Chronic. There is no accompanying bodily disorder. Fi
last fall, by incoherence. This is not the first attack, though
now shown on the subjects of phrenology, poetry & love.
or destructive habits. If suicidal, is not stated. Patie
foundation for a house. He has not been pertinac

June 12 On admission, was put on B² (S.D. Coughlin) ward
" 13 on right leg over tibia, caused by abscess
for 3 hours, sleeping only 5 hours, restless
good. Talks some; says he need
" 14 - plants or injuries to note, t
and Pol are normal. Ta
" 15 of his time writing
hours, last night.
" 16 June 16/94. Ta
" 17 laughing to himself
" 18 Quite restless today;
last night. Pulse has c
" 19 June 19/94. Slept much better,
Talks some; makes no comp
" 20 June 20/94. Slept poorly, again, last
" 22 last night. Conduct & behavior do not
" 23 fairly well, last night. Is about as u
" 24 his time writing his poetry & items for the n
" 25 his folks put him here; they are ignorant; dow
" 26 quite well, the past 2 nights. Is about the same
5 hours, last night. No change, today. Summary. Pulse & temperature have fluctuated but
little; they have kept about normal. As the whole, his behavior has been fairly good. By day, he
has been more or less restless, though now quiet & less nervous of late; talks & laughs to himself a good
deal. Does not seem to realize his condition & still shows Delusions. Physical condition is good.
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking; regularly. Works none. —
July 2/3 July 2/94. Wt 143 pds. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached Samples of same).
Works in dining-room; plays games - Appetite good; bowels regular. Goes walking. Still deluded.
Aug 1/3 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 3/94. Writes by a friend. Reads; plays games: works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29 Aug 29/94. Transferred to Ward East. Aug 31/94. "Mentate condition does not improve any.
Sep 3/4 Sep 4/94. Wt 143 pds. Pulse 78. Sep 30/94. Quiet & well-behaved. Spends most of his time in
4/30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;



1894

Says that time will come when he shall rule this Country". Sleeps a ward. Habits are clean -
Oct 2/94 - Wt 150 pounds. (Some gain in flesh) - Pulse 92. Oct 21/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients entertainment, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/94 Wt 144 lbs - (has lost some in flesh) - Pulse 84. Nov 25/94. Is very changeable. Says himself
"to be Christ". Threatening in language quite often; says he is going to kill Dr. Kilbourne, the first time
he sees him" - Transferred to B². today - When taken there, he struck C. G. Anderson (Supervisor).
ter poetry &c - Appetite good; bowels are regular -
ks some on ward - Behaves well - Talks freely but still
s; writes a good deal of poetry (?) & many letters (?) -
Clean & tidy - Works a ward; physical condition is good -
= "off"; restless, walking the hall, talking &
restless but otherwise no special change noted -
ay. Feb 25/95. Writes considerably (see old Samples).
s Death". Is considerably off. Struck John Howe,
d C³. After coming on ward, was still in a very
t done - Feb 28/95. Expressed his regret for having struck
in patient's condition, physically or mentally
een quiet & well-behaved, of late. Still has illusions
- Eats & sleeps well. Physical condition Good.
a very long argument against the injustice of
se he is a Poet". Claims he has the power to
n I, through Conquest - Claims also he can be
to publish his "poetry". Apl 30/95. Has been quiet.
a "Poet". Eats & sleeps well. Reads, writes (see
tainments. Still shows his peculiar Delusions
ndition very good, but no improvement noted, mentally.
he is not going to let his mind run on
et to "bricklaying". May 8/95. Noisy and
9/95. Complaining of pains in his chest.
chest improved. May 18/95. Behavior very good.
. May 29/95. Escaped, while being taken out
turned to Hospital at 4 P.M. May 31/95. Has
remained since his return - works some on hall. Otherwise, condition about as usual.
June 1 June 1/95. Wt 147 pds. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated he was content to stay here, for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95. Behavior quiet, for some time past.
" 25 still writes considerably. June 28/95. Refuses food: says "he will not eat, until he obtains his pardon" -
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 pds. Pulse 84. Still shows delusions.
July 1/2 Says he has more Spiritual Power than the Almighty Being" - July 29/95. "Desires to write
" 31 a Drama" - July 31/95. Behavior Quiet — no change mentally. (To Sample Book "a" 218)

Be sure to answer.

continuation. You further know that the whole bible
is nothing else but a book of history. I shall call
your attention to some paragraphs which I don't believe in.
St. Matthew 3d. 4. Verse 8. Again the devil
taketh him up into an exceeding high mountain.
and sheweth him all the kingdoms of the world
and the glory of them; and saith unto him
All these things will I give thee if thou will
fall down and worship me.
I say Jesus should have fallen down and
worship the devil seemingly and still
kept his heart pure and cheated him of
his hereditary portion if such a beautiful
earth belongs to the devil for I do not believe it
sin to cheat his wickedness, the devil.
And do you believe that the Jews did not know
Jesus Christ that Judas had to betray him?
Everybody must have known him for the people
gave Him a great reception by entering Jerusalem
in palm Sunday.

SEIBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor to any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained or confined nor under medical treatment. —

June 12 On admission, was put on B² (S.D. Complexion dark.
" 13 on right leg via tibia, caused by abscess; bodily
for 3 hours, sleeping only 3 hours, last night. Am. C
good. Talks some; says he need to be a brick-layer,
" 14 - plaints or injuries to note, today. June 14/94. Sle
and Pel are normal. Talks freely, but manifests
" 15 of his time writing poetry & letters to "prominen
hours, last night. Is restless today; reads; wri
" 16 June 16/94. Passed a poor night; restless & hous
" 17 laughing to himself; goes out walking with the
" 18 Quite restless today; still given to writing "poe
last night. Pulse has continued about normal
" 19 June 19/94. Slept much better, last night, being res
Talks some; makes no complaints. Is very
" 20 June 20/94. Slept poorly, again, last night. Rest
" 21 last night. Conduct & behavior do not change a
" 23 fairly well, last night. Is about as usual.
" 24 his time writing his poetry & items for the news
" 25 his folks put him here; they are ignorant; do
" 26 quite well, the past 24 nights. Is about the s
6 hours, last night. No change, today. Sle
little; they have kept about normal. As the
has been more & less restless, though none fo
deal. Does not seem to realize his condition
" 30 June 30/94. Still shows delusions; writes "poetry
July 2/ July 2/94. Wt 143 pds. July 6/94. Tried to walk
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (See attached Sample of same).
Works in dining-room; plays games - Appetite good; bowels regular. Does walking. Still deluded.
Aug 1/ Aug 1/94. Wt 142 pds. Pulse 92. Aug 23/94. Bitten by a friend. Reads; plays games: works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29 Aug 29/94. Transferred to Ward East. Aug 31/94. Mental condition does not improve any.
Sep 4/ Sep 4/94. Wt 143 pds. Pulse 78. Sep 30/94. Quiet & well-behaved. Spends most of his time in
reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

And furthermore is it not possible that Judas was with Jesus and acknowledged that he was one of His followers when on the Jews took Judas hung him and soon tore up his body and then said he took his own life. Peter denied Jesus. Who is the best? Those who deny a friend in distress or the other who stick to him?

Did they give Judas the bounty because he was a bad man and appropiated as much money as possible to his own use or because every account was correct?

I can call your attention to a great many points which are inconsistent with each other. All those miracles which Jesus wrought are simply a lie; for if Jesus feeds 6000 Men the Jews have sense enough not to murder him.

It is not Jesus who is the defaulter but the future people who wanted to make an easy living out of it, and with all those lies in it the Christian Religeon will never conquer the world. Jesus did not write a book himself. Could He write? Since I am gone that far I shall try to find the bottom of the truth which is the word of God. I intend to imitate God on earth and if the whole world is full of devils shall not rest until the truth is found and falsehood buried forever. I know that my teachings will conquer the world and if I can not have the pleasure of seeing it but I know it now positively because nobody dares to condradict me. You can safely trust yourself in my care even if you do not believe all I am saying. You further know that the bible says Man must be born again before he can enter the king dom of heaven. I earnestly believe that the word has been fulfilled in me

Says "that time will come when he shall rule this Country". Keeps in ward. Habits are clean-
Oct 2/ Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 21/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients' entertainment, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/ Nov 1/94 Wt 144 pds - (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
is to be Christ". Threatening in language quite often; says "he is going to kill Dr. Kilbourne, the first time
he sees him" - Transferred to B². Today - When taken there, he struck C. G. Anderson (Supervisor).
[illegible] poetry &c - Appetite good; bowels are regular -
[illegible] some on ward - Behaves well - Talks freely but still
[illegible]; writes a good deal of poetry (?) & many letters (?) -
[illegible] Clean & tidy - Works on ward; physical condition is good -
[illegible] "off"; restless, walking the hall, talking &
[illegible] restless but otherwise no special change noted -
[illegible] day. Feb 7/95. Writes considerably (See old Samples) -
[illegible] Death". Is considerably off". Struck John Howe,
[illegible] to C³. After coming on ward, was still in a very
[illegible] done - Feb 28/95. Expressed his regrets for having struck
[illegible] in patients' condition, physically or mentally.
[illegible] been quiet & well-behaved, of late. Still has delusions.
[illegible] - Eats & sleeps well. Physical condition good.
[illegible] a very long argument against the injustice of
[illegible] see he is a Poet". Claims he has the power to
[illegible] on I, through Conquest - Claims also he can be
[illegible] to publish his "poetry". Apl 30/95. Has been quiet.
[illegible] as a "Poet" - Eats & sleeps well. Reads, writes (See
[illegible] entertainments. Still shows his peculiar delusions
[illegible] condition very good. Intro improvement noted, Mentally.
[illegible] he is not going to let his mind run on
[illegible] not to "bricklaying". May 8/95. Noisy and
[illegible] 9/95. Complaining of pains in his chest.
[illegible] chest improved. May 18/95. Behavior very good.
[illegible]. May 19/95. Escapes, while being taken out
[illegible] returned to Hospital at 4 P.M. May 31/95. Has
been quiet since his return - Works since on hall. Otherwise, condition about as usual.
June 1 June 1/95. Wt 147 pds. Pulse 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated "he was content to stay here for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95. Behavior quiet for some time past.
" 25 still writes considerably. June 28/95. Refused food: says "he will not eat until he obtains his pardon" -
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 pds. Pulse 84. Still shows delusions.
July 2/ Says "he has more Spiritual Power than the Almighty Being" - July 29/95. Desires & wrote
" 21 a "Drama" - July 31/95. Behavior quiet — No change mentally.

to Sample Book "A" 218

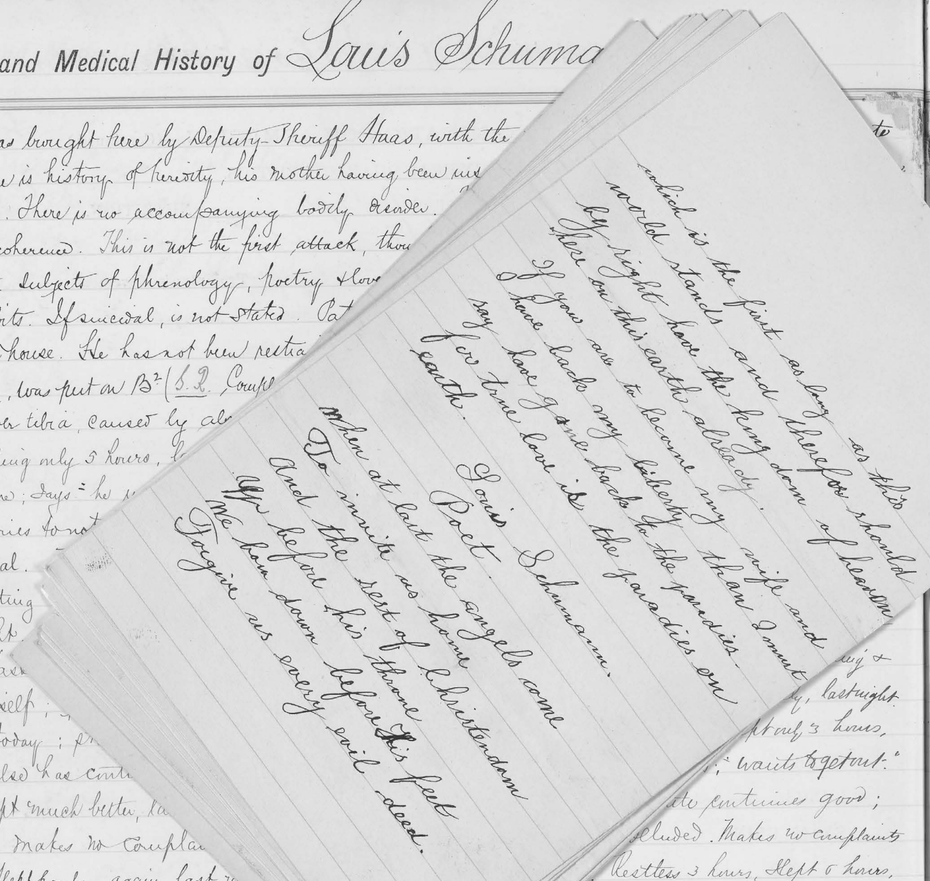
Personal and Medical History of Louis Schuma

1894

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy-Sheriff Haas, with the
and moral. There is history of heredity, his mother having been in
Form is Chronic. There is no accompanying bodily disorder.
last fall, by incoherence. This is not the first attack, tho
now shown on the subjects of phrenology, poetry & love
or destructive habits. Of suicidal, is not stated. Pat
foundation for a house. He has not been restra

June 12 On admission, was put on B² (6.2. Compl
" 13 on right leg, ver tibia, caused by ab
for 8 hours, sleeping only 3 hours, t
good. Talks some; says "he w
" 14 - plaints or injuries to not
and [illegible] are normal.
" 15 Of his time writing
hours, last night.
" 16 June 16/94. Pat
" 17 laughing to himself;
" 18 Quite restless today; p
last night. Pulse has cont
" 19 June 19/94. Slept much better, ta
Talks some; makes no complai
" 20 June 20/94. Slept only, again, last n
" 22 last night. Conduct & behavior do not ch
" 23 fairly well, last night. Is about as usu
" 24 his time writing his poetry & items for the news
" 25 "his folks put him here; they are ignorant; do not
" 26 quite well, the past 2 nights. Is about the same each day. June 26/94. Restless 3 hours, Sleeping
8 hours, last night. No change, today. Summary. Pulse & temperature have fluctuated but
little; they have kept about normal. On the whole, his behavior has been fairly good. By day, he
has been more or less restless, though more quiet & less nervous of late; talks & laughs to himself a good
deal. Does not seem to realize his condition & still shows Delusions. Physical condition is good.
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking, regularly. Works some.
July 1/94 July 2/94. Wt 143 pds. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry" &c (See attached Sample of same).
Works in dining-room; plays games - Appetite good; bowels regular. Goes walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 pds. Pulse 92. Aug 2/94. Visited by a friend. Reads; plays games; walks some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29 Aug 29/94. Transferred to 1st East. Aug 31/94. Mental condition does not seem to have any.
Sept 31/30 Sept 4/94. Wt 143 pds. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;


which is the first as long as this
world stands and there for should
By right have the King down of heaven
By right on this earth also by.
Of you are to become my wife and
Have back my liberty to have I must
Have gone back to the paradise on
For one time, back is the paradise
earth.
Louis Schumann,
Poet.
When at last the angels come
To invite us home
To the rest of a Christendom
And the host of his throne
Appear before this feet
We bow down before Him
Forgive us every evil deed.

Personal and Medical History of Louis Schumann.

1894

Says "that time will come when he shall rule this country". Keeps on ward. Habits are clean-
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 21/94. No change noticeable. If
anything, believes been to be more strong with him. Attends patients' entertainment, in which he
participates - dancing &c. Habits clean & neat. Patient is in quite good physical health.
Nov 1/94 Wt 144 pds. (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
is the Christ". Characterizing in language quite often; says "he is going to kill Dr. Kilbourne, the first time
sees him". [illegible] Nov 28/94. Knocked down Patient Thos Tuite, he struck C. G. Anderson (Supervisor).
Writes poetry &c. Appetite good; bowels are regular.
Walks some on ward. Behaves well. Talks freely but still
deluded; writes a good deal of poetry (?) & many letters (?).
Keeps clean & tidy. Works on ward; physical condition is good.
Is quiet & well-behaved; of late "off"; restless, walking the hall, talking &
restless but otherwise no special change noted.
Dec 28/94. Dec 28/94. Dec 28/94. Dec 28/94. Writes considerably (See old samples).
Talks of "Deaths". Is considerably off: Struck John Howe,
Wt 148 pds. Pulse 84. Dec 28/94.

Personal and Medical History of **Louis Schumann**

1894

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is supposed to be Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor to any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained or confined nor under medical treatment. —

June 12 On admission, was put on B² (S.D. Complexion dark;
" 13 on right leg over tibia, caused by abscess; bodily
for 8 hours, sleeping only 5 hours, last night. Am.
good. Talks some; says he used to be a brick-layer,
" 14 - plaints or injuries to note, today. June 14/94. Slept
out Do are normal. Talks freely but manifests de
" 15 of his time writing poetry & letters to prominent
hours, last night. Is restless today; reads; write
" 16 June 16/94 Passed a poor night; restless 4 hours;
" 17 laughing to himself; goes out walking with the
" 18 Quite restless today; still given to writing "poetr
last night. Pulse & Res continue about normal.
" 19 June 19/94. Slept much better, last night, being restl
Talks some; makes no complaints. Is very
" 20 June 20/94. Slept fairly, again, last night. Restle
" 22 last night. Conduct & behavior do not change an
" 23 fairly well, last night. Is about as usual.
" 24 his time writing his poetry & items for the news
" 25 his folks put him here; they are ignorant; do no
" 26 quite well, the past 2 nights. Is about the sam
8 hours, last night. No change, today. Sleep
little; they have kept about normal. Both w
has been more or less restless, though none fie
deal. Does not seem to realize his condition &
" 30 June 30/94. Still shows delusions; writes "poetry" &
July 2/ July 2/94. Wt 143 pds. July 6/94. Tried to walk
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached Samples of same).
Works in dining-room; plays games - Appetite good; bowels regular. Does walking. Still deluded.
Aug 1/ Aug 1/94. Wt 142 pds. Pulse 92. Aug 2/94. Visited by a friend. Reads; plays games: works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 2 Aug 2/94. Transferred to H. East Aug 31/94. Mental condition does not improve any.
Sept 4/ Sept 4/94. Wt 143 pds. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

I know we will be happy together. If you believe our relationship is to near you are simply foolish. Even cousins are allowed to marry and we are no cousins whatever but simply called each other so. It is true your grandfather and my father were half-brothers, but that is no more relationship to prevent our marriage at all. You know the bible says that Isaak send to his relatives to get a wife for his son and now-a-days relatives are forbidden to marry each other. you further know that the bible teaches: No rich man can enter the kingdom of heaven. I therefor offer myself to take the earth and be the savior of men, and when my time comes, go to hell, if God sends me there and declare war to the devil and even rescue as many as possible. One must be the man and I believe I am able to do it just as good as somebody else. The Christian believe will never conquer the world as it stands to-day and I shall also try to form a new church, called

The Church of Truth or
The Church of God

for the glory of God and the benefit of mankind. The Christian Church teaches many things what is not comprehensive to the human mind, and everything is written in parables and riddles. Who can understand that? who can believe that? And besides it is all I might say: "rotten to the core" They teach brotherly love and whenever there is a chance rob one another. Some teachings are alright but others are no good at all.

What is belive? Nothing at all but possibilities
What is truth? ———
That is the question of to-day
What is righteousness? ———
What is poverty? ———
What are riches?

I say to you: Righteousness will conquer everything and even love will fall down before it and be crushed to nothing. You need not fear anything and no other persons who do right but the wicked, the bad, the lawless

Personal and Medical History of **Louis Schumann**

1894

Says "that time will come when he shall rule this Country". Sleeps onward. Habits are clean-
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 31/94. No change noticeable. If
3 anything, delusions seem to be more strong with him. Attends patients entertainment, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/ Nov 1/94. Wt 144 pds - (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
12 to be Christ". Threatening in language quite often; says "he is going to kill Dr Kilbourne, the first time
he sees him" - Transferred to B² today. When taken there, he struck C. J. Anderson (supervisor).
" 2 [illegible] poetry &c. Appetite good; bowels are regular -
" 3 some on ward - Behaves well - Talks freely but still
" 4 writes a good deal of poetry (?) & many letters (?) -
" 5 keeps tidy. Works onward; physical condition is good -
" 6 " off"; restless, walking the hall, talking &
" 7 restless but otherwise no special change noted -
" 8 " 9 Feb 7/95. Writes considerably (see old Samples).
" 10 Death". Is considerably off. Struck John Howe,
" 11 B³. After coming onward, was still in a very
" 12 done - Feb 28/95. Expressed his regrets for having struck
" 13 patients' condition, physically or mentally
" 14 quiet & well-behaved, of late. Still has delusions.
" 15 Eats & sleeps well. Physical condition Good.
" 16 very long argument against the injustice of
" 17 he is a Poet". Claims he has the power to
" 18 I, through Conquest - Claims also he can be
" 19 publish his "poetry". Apl 30/95: Has been quiet.
" 20 a "Poet" - Eats & sleeps well. Reads, writes (see
" 21 tainments. Still shows his peculiar delusions
" 22 dition very good, but no improvement noted, mentally.
" 23 he is not going to let his mind run on
" 24 to "bricklaying". May 8/95: Noisy and
" 25 5/95. Complaining of pains in his chest.
" 26 chest improved. May 18/95: Behavior very good;
" 27 May 9/95. Escaped, while being taken out
" 28 turned to Hospital at 4 P.M. May 31/95: Has
" 29 been quiet since his return - Works some on hall. Otherwise, condition about as usual.
June 1 June 1/95 Wt 147 pds. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated "he was content to stay here for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 10/95. Behavior quiet for some time past.
" 24 Still writes considerably. June 28/95. Refused food: says "he will not eat, until he obtains his pardon"-
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 pds. Pulse 84. Still shows delusions.
July " Says "he has more Spiritual Power than the Almighty Being" - July 20/95. "Desires to write
" 21 a Drama" - July 31/95. Behavior Quiet — No change mentally. Jo Record Book "A" 218

Personal and Medical History of **Louis Schumann**

1894 BRIGHT, FOLAN & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of insanity, his mother having been insane. The cause of this attack is supposed to be ~~unknown~~ [illegible] of the disease were manifested [illegible] is not stated. Insanity [illegible] Form is chronic. There is no accompanying bodily disorder. First [illegible] thers, nor any filthy last fall, by incoherence. This is not the first attack, though wh[illegible] and in digging of now shown in the subjects of phrenology, poetry & love. Is su[illegible] or destructive habits. If suicidal, is not stated. Patient wa[illegible] foundation for a house. He has not been restrained or [illegible] nt. —

June 12 On admission, was put on B² (S.D. Complexion dark
" 13 on right leg over tibia, caused by abscess; bod[illegible] for 8 hours, sleeping only 3 hours, last night. [illegible] good. Talks some; says he used to be a bu[illegible]
" 14 - plaints or injuries to note, today. Ur[illegible] and Pc) are normal. Talks freely h[illegible]
" 15 of his time writing poetry & lett[illegible] hours, last night. Is restless
" 16 June 16/94 Passed a fo[illegible]
" 17 laughing to himself; sp[illegible]
" 18 Quite restless today [illegible] last night. Pulse[illegible]
" 19 June 19/94. Is[illegible] Talks some [illegible]
" 20 June 20/94. [illegible]
" 22 last night. [illegible]
" 23 fairly well, last [illegible]
" 24 his time writing his p[illegible]
" 25 "his folks put him here; [illegible]
" 26 quite well, the past 2 nights.
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Does not walking; regularly. Works some. —
July 1/95 July 1/94. Wt 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Struck given writing "poetry &c" (see attached Sample of same). Works in dining-room; plays games - Appetite good; bowels regular. Does walking. Still deluded.
Aug 1/95 Aug 1/94. Wt 143 lbs. Pulse 92. Aug 3/94. Visited by a friend. Reads; plays games: works some in ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 27 Aug 27/94. Transferred to Ward East Aug 31/94. Mental condition does not improve any.
Sept 4/94 Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

The end must come at last
Me have had misery enough as long as life
world stands and I alone shall declare
war to the knife. I know you always back
something for the unfortunate and that is what
I admired of you most of all. I know you
Did to make life as pleasant for me as possible
that is why I loved you so, but that you only
wanted to be associated with me for pastime I did
not believe of so sensible a woman like you are
and you are the helper, edifier
if you leave the not love me. You never permit to see you disgraced
honor. I can never permit to see you disgraced
and I must worryfull you to marry me.
When you press me to the church
Oh what a future high
For we are come to God to search
In marriage as the tie.
Dougjon are as true as gold And I myself I will be bold
Louis Schumann Pack.

8/6 94

Honorable Mr. Ireland: Bishop.
St. Paul. Minn.
Dear Sir: Examine everything
and keep the best of it:
You know as well as I do that
the on account of religion that
great mishaps has befallen mankind.
Countries have been depopulated
Wars have raged for centuries;
and what for? Simply because
people differed in opinion but in
this great country we can not say
that is has brought as much
misery as in other countries, but
still too much.
It has been the custom with
you to oppose mad riagers
between Catholics and Protestants.
If the Protestant would not
Educate the offspring in the Catholic
faith

Personal and Medical History of **Louis Schumann**

1894

Says "that time will come when he shall rule this Country". Sleeps nu ward. Habits are clean-
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 31/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients entertainment, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/94 Nov 1/94 Wt 144 lbs. (Has lost some in flesh). Pulse 84. Nov 25/94. Is very changeable. Says "himself
to be Christ". Threatening in language quite often; says "he is going to kill Dr. Kilbourne, the first time
he sees him" - Transferred to B². To-day - When taken there, he struck C. G. Anderson (supervisor).
" 30 Nov 30/94. Behavior quite good. Still deluded. Writes poetry &c. Appetite good; bowels are regular -
Dec 1/94 Dec 1/94. Wt 145 lbs. Pulse 84 [illegible] 31/94. Works some on ward - Behaves well - Talks freely but still
manifests [illegible] checkers; writes a good deal of poetry (?) & many letters (?) -
[illegible] them - Clean & tidy - Works on ward; physical condition is good -
[illegible] 4/95. Is "off"; restless, walking the hall, talking &
[illegible] less restless but otherwise no special change noted -
[illegible] off" today. Feby 28/95. Writes considerably (see old Samples) -
[illegible] liberty or Death". Is considerably off". Struck John Howe,
[illegible] transferred to C³. After coming on ward, was still in a very
[illegible] he had done - Feb 28/95. Expressed his regrets for having struck
[illegible] able in patient's condition, physically or mentally.
[illegible] Has been quiet & well-behaved, of late. Still has delusions.
[illegible] haved - Eats & sleeps well. Physical condition Good.
[illegible] made a very long argument against the injustice of
[illegible] because he is a Poet". Claims he has the power to
[illegible] Napoleon I, through Conquest - Claims also he can be
[illegible] owed to publish his "poetry". Apl 30/95: Has been quiet.
[illegible] he is as a "Poet" - Eats & sleeps well. Reads, writes (see
[illegible] entertainments. Still shows his peculiar delusions
[illegible] Condition very good. Is no improvement noted, mentally.
[illegible] says "he is not going to let his mind run on
[illegible] to attend to "bricklaying". May 8/95: Noisy and
[illegible] May 9/95. Complaining of pains in his chest.
[illegible] chest improved. May 18/95: Behavior very good;
[illegible] ts. May 27/95: Escaped, while being taken out
[illegible] owned to Hospital at 4 P.M. May 31/95: Has
[illegible] ll. Otherwise, condition about as usual.
[illegible] city & is easily agitated. Health seems good.
[illegible] was content to stay here, for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95: Behavior quiet, for some time past.
" 24 still writes considerably. June 28/95. Refuses food: says "I will not eat, until I obtain his pardon" -
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions.
July 1/95 Says "he has more Spiritual power than the Almighty Being" - July 29/95: "Desires to write
" 31 a Drama" - July 31/95: Behavior quiet — no change mentally. To Sample Book "A" 218

Personal and Medical History of **Louis Schumann**

1894

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of insanity, his mother having been insane. The cause of this attack is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor to any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained or confined nor under medical treatment. —

June 12 On admission, was put on B² (S.S. Complexion dark; hair black; eyes gray; condition of skin good; scars on right leg over tibia, caused by abscess; bodily condition clean; behavior good). June 13/94. Restless for 3 hours, sleeping only 3 hours, last night. Tem. Pulse etc. Tongue normal. Behavior is good; Appetite also
" 13 good. Talks some; says he used to be a brick-layer, &
" 14 complaints or injuries to note, today. June 14/94. Sleeps and Tongue are normal. Talks freely but manifests de-
" 15 of his time writing poetry & letters to prominent
hours, last night. Is restless today; reads; writes
" 16 June 16/94. Passed a poor night; restless 4 hours;
" 17 laughing to himself; goes out walking with the
" 18 Quite restless today; still given to writing poetry
last night. Pulse has continued about normal.
" 19 June 19/94. Slept much better, last night, being restless
Talks some; makes no complaints. Is very re-
" 20 June 20/94. Slept poorly, again, last night. Restless
" 22 last night. Conduct & behavior do not change any
" 23 fairly well, last night. Is about as usual.
" 24 his time writing his poetry & items for the newspa-
" 25 his folks put him here; they are ignorant; do not
" 26 quite well, the past 2 nights. Is about the same
6 hours, last night. No change, today. Summa
little; they have kept about normal. On the whole
has been more or less restless, though more quiet
deal. Does not seem to realize his condition & t
" 30 June 30/94. Still shows delusions; writes "poetry" etc.
July 2/ July 2/94. Wt. 143 lbs. July 6/94. Tried to walk
" 31 July 31/94. Is quiet & well-behaved. Much given to
works in dining-room; plays games. Appetite g
Aug 1/ Aug 1/94. Wt 143 lbs. Pulse 92. Aug 2/94. Retires by
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens — also of his letters etc).
" 29 Aug 29/94. Transferred to W. East. Aug 31/94. Mental condition does not improve any.
Sep 4/ 31/ Sep 4/94. Wt 143 lbs. Pulse 78. Sep 30/94. Quiet & well-behaved. Spends most of his time in
30 reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

Do you call that free believe? I do not. Read that Chapter, Paul to the Corinthe Seventh Chapter 14 Verse. -and you will come to the conviction that your church has done wrong by opposing any marriage whatsoever. I do not only write by imagination but experience. You further teach that the virgin state is the only true state to enter into the King dom of heaven. God made man and woman. What for? If he wanted no marriage he would, I am sure, let man grow out of the earth, and since "Love is the kingdom of heaven" with me I believe in marriage. You as ordained priest not not fall off your believe for it is not nesseray that everybody enters the king dom of heaven. Some can go the other road if they so choose. It is with me the only right way to live manely: a happy married life. You need not believe that you rise higher in the next world by opposing nature for "Those who oppose nature oppose God" Those who check the progress in filling the earth & and conquering it check God we intend to do so. but nothing else but true love should ever induce any person to marry for misemarriage is hell on this earth.

Personal and Medical History of **Louis Schumann**

1894

Says "that time will come when he shall rule this Country". Sleeps in ward. Habits are clean-
Oct 2/ Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 31/94 - No change noticeable. If
3 anything, delusions seem to be more strong with him. Attends patients entertainment, in which he
participates - dancing etc - Habits clean & neat - Patient is in quite good physical health.
Nov 1/ Nov 1/94. Wt 144 lbs. (Has lost some in flesh). Pulse 64. Nov 25/94. Is very changeable. Says "himself
12 to be Christ". Threatening in language quite often; says "he is going to kill Dr. Kilbourne, the first time
he sees him" - Transferred to B². today. When taken there, he struck C. G. Anderson (supervisor).
" 30 Dec 30/94. Behavior quite good. Still deluded. Writes poetry etc. Appetite good; bowels are regular -
Dec/ Dec/94. Wt 145 lbs. Pulse 64. Dec 31/94. Works some on ward - Behaves well - Talks freely but still
14 manifests delusions; read some - Clean closets; writes a good deal of poetry (?) & many letters (?) -
Clean & tidy - Works in ward; physical condition is good -
- "off"; restless, walking the hall, talking &
restless but otherwise no special change noted -
ay. Feb 28/95. Writes considerably (see old samples).
a death". Is considerably off". Struck John Have,
ed to C³. After coming in ward, was still in a very
ad one - Feb 28/95. Expressed his regret for having struck
in patients' condition, physically or mentally.
been quiet & well-behaved, of late. Still has delusions
d - Eats & sleeps well. Physical condition Good.
) a very long argument against the injustice of
use he is a "poet". Claims he has the power to
leon I, through Conquest - Claims also he can be
d to publish his "poetry". Apl 30/95: Has been quiet.
as a "Poet" - Eats & sleeps well. Reads, writes (see
tertainments. Still shows his peculiar delusions
condition very good, but no improvement noted, mentally.
ys "he is not going to let his mind run on
tellect to "bricklaying". May 8/95: Noisy and
ay 9/95. Complaining of pains in his chest.
: chest improved. May 18/95: Behavior very good;
its. May 29/95. Escaped, while being taken out
turned to Hospital at 4 P.M. May 31/95: Has
all. Otherwise, condition about as usual.
uetly & is easily agitated. Health seems good.
June 3/95. Stated [illegible] for another year, & at the expiration of that time,
he will have received punishment enough". June 10/95: Behavior quiet for some time past
" 20 still writes considerably. June 28/95. Refused food: says "he will not eat, until he obtains his pardon"-
" 28 June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions.
" 30 July/ Says "he has more spiritual power than the Almighty Being" - July 29/95: "Desires to write
" 31 a Drama" - July 31/95: Behavior quiet — no change mentally. (See Daily Book "A" 218)

1894

GIBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The [illegible] this attack is sustenance Form is Chronic. There is no accompanying bodily disorder. First signs [illegible] noted manifested last fall, by incoherence. This is not the first attack, though when [illegible] stated. Insanity is now shown on the subjects of phrenology, poetry & love. Is not [illegible] any filthy or destructive habits. If suicidal, is not stated. Patient was [illegible] digging of foundation for a house. He has not been restrained or [illegible]

June 12 On admission, was put on B² (S. D. Complexion dark
" 13 on right leg over tibia, caused by abscess; [illegible]
for 8 hours, sleeping only 5 hours, last night
good. Talks some; says he used to be
" 14 - plaints or injuries to note, today
out Pol are normal. Talks [illegible]
" 15 of his time writing poet
hours, last night.
" 16 June 16/94. [illegible]
" 17 laughing to [illegible]
" 18 Quite restle
last night.
" 19 June 19/94. [illegible]
Talks some; [illegible]
" 20 June 20/94. Slept four
" 22 last night. Conduct & be
" 23 fairly well, last night.
" 24 his time writing his poetry &
" 25 his folks put him here; they are
" 26 quite well, the past 2 nights. Is a
8 hours, last night. No change, today
little; they have kept about normal. [illegible]
has been more or less restless, though more [illegible] less nervous of late; talks & laughs to himself a good
deal. Does not seem to realize his condition & still shows Delusions. Physical condition is good
" 30 June 30/94. Still shows delusions; writes "poetry" &c. Goes out walking; regularly. Works some. —
July 2/94 July 2/94. Wt. 143 lbs. July 6/94. Tried to walk away, today; had a little trouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached Samples of same)
works in dining-room; plays games - Appetite good: bowels regular. Goes walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 3/94. Visited by a friend. Reads; plays games: works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 29 Aug 27/94. Transferred to 1st East. Aug 31/94. Mental condition does not improve any.
Sep 4/94 Sep 4/94. Wt 143 lbs. Pulse 78. Sep 30/94. Quiet & well-behaved. Spends most of his time in
reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;



God is love
Love is the kingdom
of heaven.
Falsehood will be buried
forever.
Do as much good as possible.
What is now in his frenzy.

Love D.
Louis Schumann
insulted you by writing
what ever was my
God has given me.

You all can go to the
devil as far as me
is concerned.

1894

Says "that time will come when he shall rule this Country". Sleeps on ward. Habits are clean-
Oct 2/94 - Wt 150 pounds. (Some gain in flesh). Pulse 92. Oct 31/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients' entertainment, in which he
participates - dancing &c. Habits clean & neat. Patient is in quite good physical health.
Nov 1/94 Nov 1/94. Wt 144 lbs. (Has lost some in flesh). Pulse 84. Nov 30/94. Is very changeable. Says "himself
is the Christ". Threatening in language quite often; says "he is going to kill Dr Kilbourne, the first time
he sees him". Transferred to B². today. When taken there, he struck C. G. Anderson (Supervisor).
" 30 Dec 30/94. Behavior quite good. Still deluded. Writes poetry &c. Appetite good; bowels are regular.
Dec 1/94 Dec 1/94. Wt 145 lbs. Pulse 84. Dec 31/94. Works some on ward. Behaves well. Talks freely but still
manifests delusions; reads some; plays checkers; writes a good deal of poetry (?) & many letters (?).
" 31 Attends patients' Dances, participating in them. Clean & tidy. Works on ward; physical condition is good.
[illegible]: Is "off"; restless, walking the hall, talking &
[illegible] less restless but otherwise no special change noted.
[illegible] day. Feb 28/95. Writes considerably (see old Samples).
[illegible]ty a Death". Is considerably off. Struck John Howe,
[illegible]ferred to C³. After coming on ward, was still in a very
he had done. Feb 28/95. Expressed his regret for having struck
[illegible]ble in patient's condition, physically or mentally.
Has been quiet & well-behaved, of late. Still has delusions.
[illegible]haved. Eats & sleeps well. Physical condition good.
[illegible]ade a very long argument against the injustice of
[illegible] because he is a Poet". Claims he has the power to
[illegible]apoleon I, through Conquest. Claims also he can be
[illegible]lowed to publish his "poetry". Apl 30/95: Has been quiet.
[illegible]ties as a "Poet". Eats & sleeps well. Reads, writes (see
[illegible] entertainments. Still shows his peculiar Delusions.
[illegible]cal condition very good. Intro no improvement noted. Mentally
[illegible]e says "he is not going to let his mind run on
[illegible] intellect to "bricklaying". May 8/95: Noisy and
May 9/95. Complaining of pains in his chest.
[illegible]in: chest improved. May 18/95: Behavior very good;
[illegible]plaints. May 19/95: Escaped, while being taken out
[illegible] returned to Hospital at 4 P.M. May 31/95: Has
[illegible]hall. Otherwise, condition about as usual.
[illegible]hemently & easily agitated. Health seems good.
[illegible]ue, for another year, & at the expiration of that time,
[illegible]gh". June 20/95: Behavior quiet for some time past.
- 27 still writes considerably. June 28/95. Appetite good: says "he will not eat, until he obtains his pardon" -
- 30 June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions.
July 1/ says "he has more Spiritual power than the Almighty Being" - July 20/95: Desires to write
" 31 a Drama" - July 31/95: Behavior quiet — no change mentally. To Sample Book "a" 218

Personal and Medical History of Louis Schumann

EARLEY, FOLEY & CHAMBERS, DAVENPORT, IOWA

1894

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor is any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained or confined nor under medical treatment. —

June 12 On admission, was put on B² (S.D. Complexion dark; hair black; eyes gray; condition of skin good; scars on right leg over tibia, caused by abscess; bodily condition clean; behavior good). June 13/94. Rested fair 5 hours, sleeping only 3 hours, last night. Appetite good. Talks some; says he used to be a brick-layer; " 14 – plaints or injuries to note, today. June 14/94. Sleep[t] and [a]ppetite are normal. Talks freely but manifests de[l]usions of his time writing poetry & letters to prominent " 15 hours, last night. Is restless today; reads; writ[es] " 16 June 15/94. Rested a poor night; restless 4 hours; " 17 laughing to himself; goes out walking with the [a]ttendants " 18 Quite restless today; still given to writing "poetry" last night. Pulse has continued about normal. " 19 June 19/94. Slept much better, last night, being restless Talks some; makes no complaints. Is very [q]uiet " 20 June 20/94. Slept only, again, last night. Restless " 22 last night. Conduct & behavior do not change and " 23 fairly well, last night. Is about as usual. " 24 his time writing his poetry & items for the news[p]apers " 25 his folks put him here; they are ignorant; do not " 26 quite well, the past 2 nights. Is about the same 8 hours, last night. No change, today. June[ ] little; they have kept about normal. As the [c]ase has been more or less restless, though more [q]uiet deal. Does not seem to realize his condition & " 30 June 30/94. Still shows delusions; writes "poetry" July 1/94 July 2/94. Wt. 143 lbs. July 6/94. Tried to walk " 31 July 3/94. Is quiet & well-behaved. Much given to books in dining-room; plays games – Appetite

Aug 1/93 Aug 1/94. Wt 142 lbs. Pulse 92. Aug 3/94. Retires hyg[ienic] ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens – also of his letters &c) – " 29/30 Aug 29/94. Transferred to 3rd East. Aug 31/94. "Mental condition does not improve any. Sept 1/30 Sept 4/94. Wt 143 lbs. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

you do not insult me
by keeping me in an
insane asylum
but God
who has given
me these gifts
keep me there forever.
I have to eat and to
drink
but you prevent me
from seeing my love
rule the king dom of
heaven.

God will reward you
for your kindness.
Sa. Schumann
Doktor of
Theology.

Personal and Medical History of Louis Schumann.

1894

Says "that time will come when he shall rule this Country". Sleeps in ward. Habits are clean – Oct 2/94 – Wt 150 pounds. (Some gain in flesh) – Pulse 92. Oct 31/94. No change noticeable. If anything, delusions seem to be more strong with him. Attends patients' entertainment, in which he participates – dancing &c – Habits clean & neat – Patient is in quite good physical health. Nov 1/94. Wt 144 lbs – (Has lost some in flesh) – Pulse 64. Nov 25/94. Is very changeable. Says "himself to be Christ". Threatening in language quite often; says "he is going to kill Dr Kilbourne, the first time he sees him" – Transferred to B². today – When taken there, he struck C. G. Anderson (Supervisor). Nov 30/94. Behavior quite good – Still deluded. Writes "poetry" &c – Appetite good; bowels are regular – Dec 1/94. Wt 145 lbs. Pulse 64. Dec 23/94. Works some on ward – Behaves well – Talks freely but still manifests delusions; writes a good deal of poetry (?) & many letters (?) – Dec 30/94. Clean & tidy – Works in ward; physical condition is good – Jan 1/95. Wt 144 lbs. Pulse 64. Jan 2/95. Works in ward; physical condition is good – Jan 3/95. Says "off"; restless, walking the hall, talking & Jan 4/95. Restless but otherwise no special change noted – Jan 5/95. Writes considerably (see old samples) – Jan 6/95. Talks of "Death". Is considerably off: Struck John Howe, Jan 7/95. Struck C³. After coming in ward, was still in a very Jan 8/95. Bad day – Feb 28/95. Expressed his regret for having struck Mar 1/95. No change in patient's condition, physically or mentally. Mar 2/95. Has been quiet & well-behaved, of late. Still has delusions. Mar 3/95. Stated" he was content to stay here, for another year, & at the expiration of that time, Mar 4/95. Eats & sleeps well. Physical condition good. Mar 5/95. Has a very long argument against the injustice of Mar 6/95. Because he is a "poet". Claims he has the power to Mar 7/95. Reign I, through Conquest – Claims also he can be Mar 8/95. Allowed to publish his "poetry". Apl 30/95: Has been quiet. Apl 1/95. As a "Poet". Eats & sleeps well. Reads, writes (on Apl 2/95. Entertainments. Still shows his peculiar delusions Apl 3/95. Condition very good, but no improvement noted, mentally. Apl 4/95. Says "he is not going to let his mind run on Apl 5/95. Select to "bricklaying". May 8/95. Noisy and May 9/95. Complaining of pains in his chest. May 10/95. Chest improved. May 18/95. Behavior very good. May 16/95. Quiet. May 17/95. Escapes, while being taken out May 18/95. Returned to Hospital at 4 P.M. May 31/95. Has June 1/95. Been ill. Otherwise, condition about as usual. June 2/95. Pretty & is easily agitated. Health seems good. June 3/95. Stated" he was content to stay here, for another year, & at the expiration of that time, June 10/95. He will have received punishment enough". June 10/95. Behavior quiet for some time past June 15/95. Still writes considerably. June 28/95. Refused food. Says "I will not eat, until he obtains his pardon" – June 30/95. Appetite much improved. July 1/95. Wt 145 lbs. Pulse 84. Still shows delusions July 2/95. Says "he has more Spiritual Power than the Almighty Being" – July 20/95. Writes "Desires to write July 21/95. a Drama" – July 31/95. Behavior Quiet — no change mentally

to Number Book "A" 218

1894

GIBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff Haas, with the following history. Habits are temperate and moral. There is history of heredity, his mother having been insane. The cause of this attack is unknown. Form is Chronic. There is no accompanying bodily disorder. First symptoms of the disease were manifested last fall, by incoherence. This is not the first attack, though when others occurred is not stated. Insanity is now shown on the subjects of phrenology, poetry & love. Is not disposed to injure others, nor to any filthy or destructive habits. If suicidal, is not stated. Patient was buried under falling ground in digging of foundation for a house. He has not been restrained or confined nor under medical treatment. —

June 12 On admission, was pa… in of skin good; scars
" 13 on right leg over tibia …). June 13/94. Restless
for 3 hours, sleeping only … mor is good; Appetite also
good. Talks some; says … rting "poetry". No com-
" 14 - plaints or injuries to m… 3 hours or so. Mm. Pulse
and T@ are normal. Ta… good. Spends a good deal
" 15 of his time writing "poe… 4 hours, sleeping only 5
hours, last night. June … tones on the ward. -
" 16 June 16/94. Waxed a… gain, today; talking &
" 17 laughing to himself; spo… 4 slept poorly, last night
" 18 Quite restless today; p… ours, slept only 3 hours,
last night. Pulse had … tless; wants to get out."
" 19 June 19/94. Slept much … te continues good;
Talks some; makes … ded. Makes no complaints
" 20 June 20/94. Slept poorly … 3 hours, slept 6 hours,
" 22 last night. Conduct & … e 22/94. Rested & slept
" 23 fairly well, last night … spends a good deal of
" 24 his time writing his "p… nifests delusions; says
" 25 "his folks put him here … 7/94. Has been sleeping
" 26 quite well, the past … dless 3 hours, sleeping
6 hours, last night. … and fluctuates but
little; they have kept … irly good. By day, he
has been more or less … laughs to himself a good
deal. Does not seem … ead condition is good.
" 30 June 30/94. Still shows … Works none. —
July 1/94 July 1/94. Wt 143 pds. … ouble to get him back.
" 31 July 31/94. Is quiet & well-behaved. Much given to writing "poetry &c" (see attached Samples of same).
Works in dining-room; plays games - Appetite good; bowels regular. Does walking. Still deluded.
Aug 1/94 Aug 1/94. Wt 142 pds. Pulse 92. Aug 23/94. Writes by a friend. Reads; plays games: works some on
ward. Behaves well & is quiet. Continually writing "poetry"; (see specimens - also of his letters &c).
" 20 Aug 27/94. Transferred to Ward East. Aug 31/94. Mental condition does not improve any.
Sept 4/94 Sept 4/94. Wt 143 pds. Pulse 78. Sept 30/94. Quiet & well-behaved. Spends most of his time in
reading, writing letters & composing "poetry". Has delusions. Talks unreasonably;

To the President
of the
U. S. of America.

Be a member of
Schumann's Company
in Cuba file

1894

Says "that time will come when he shall rule this Country". Sleeps on ward. Habits are clean -
Oct 3/94 - Wt 150 pounds. (Some gain in flesh) - Pulse 92. Oct 31/94. No change noticeable. If
anything, delusions seem to be more strong with him. Attends patients' entertainments, in which he
participates - dancing &c - Habits clean & neat - Patient is in quite good physical health.
Nov 1/94 Nov 1/94. Wt 144 pds - (has lost some in flesh). Pulse 64. Nov 30/94. Is very changeable. Says "himself
is the Christ". Threatening in language quite often; says "he is going to kill Dr. Kilbourne, the first time
he sees him" - Transferred to B2. today. When taken there, he struck C. G. Anderson (Supervisor).
" 30 Nov 30/94. Behavior quite good. Still deluded. Writes "poetry" &c. Appetite good; bowels are regular -
Dec 1/94 Dec 1/94. Wt 145 pds. Pulse 84. Dec 31/94. Works some on ward - Behaves well - Talks freely but still
manifests delusions; reads some; - plays checkers; writes a good deal of poetry (?) & many letters (?) -
1895 Attends patients' Dances, participating in them - Cleanly in his habits. Works on ward; physical condition is good -
Jan 2/95 Jan 2/95. Wt 149 pds. Pulse 76. Jan 24/95. Is "off"; restless, walking the hall, talking &
" 31 gesticulating - Jan 31/95. Is somewhat less restless but otherwise no special change noted -
Feb 5/95 Feb 5/95. Wt 147½ pds. P 88 - Feb 8/95. Is "off" today. Feb 15/95. Writes considerably (see old samples).
" 27 Feb 27/95. Writing away; says "he wants liberty or Death". Is considerably off. Struck John Howe,
and became very violent & excited - Transferred to C3. After coming on ward, was still in a very
" 28 excited condition, but appeared sorry for what he had done - Feb 28/95. Expressed his regret for having struck
John Howe. No change specially noticeable in patients' condition, physically or mentally.
Mar 1/95 March 1/95. Wt 143 pds. P 76. March 10/95. Has been quiet & well-behaved, of late. Still has delusions.
" 31 March 31/95. No change to note. Quiet & well-behaved - Eats & sleeps well. Physical condition good.
Apl 1/95 April 1/95. Wt 145 pds. P 89 - Apl 15/95. Made a very long argument against the injustice of
incarcerating a man in an Insane Asylum "because he is a poet". Claims he has the power to
accomplish more with his "poetry" than Napoleon I, through Conquest - Claims also he can be
" 30 chosen Emperor of the United States, if allowed to publish his "poetry". Apl 30/95: Has been quiet.
tho' has excited talking; "Spells" about his abilities as a "Poet" - Eats & sleeps well. Reads, writes (see
copy of letter; all in about same style) - attends entertainments. Still shows his peculiar delusions
(being a Poet &c) - Habits neat & clean. Physical condition very good. Is no improvement noted, mentally.
May 1/95 May 1/95. Wt 149 pds. Pulse 66. May 2/95. He says "he is not going to let his mind run on
" 8 poetry any more, but is going to devote his intellect to "bricklaying". May 8/95. Noisy and
" 9 threatening during doctor's visiting rounds. May 9/95. Complaining of pains in his chest.
" 13 May 13/95. Has been under treatment for these pains: chest improved. May 18/95. Behavior very good;
" 18 the past few Days: has made no complaints. May 19/95. Escaped, while being taken out for
" 19 a walk about 2.30 P.M.: was caught & returned to Hospital at 4 P.M. May 31/95. Has
" 31 been quiet since his return. Works some on hall. Otherwise, condition about as usual.
June 1 June 1/95 Wt 147 pds. P 91. Details incoherently & is easily agitated. Health seems good.
" 3 June 3/95. Stated "he was content to stay here, for another year, & at the expiration of that time,
" 20 he will have received punishment enough". June 20/95. Behavior quiet, for some time past.
" 25 Still writes considerably. June 28/95. Refuses food. Says "he will not eat, until he obtains his pardon" -
" 30 June 30/95. Appetite much improved. July 1/95. Wt 145 pds. Pulse 84. Still shows delusions.
July 1 Says "he has more Spiritual Power than the Almighty Being" - July 20/95. "Desires to write
" 20 a Drama" - July 31/95. Behavior quiet — no change mentally. To Sample Book "A" 218
" 31

Personal and Medical History of John Freyer

GIBBS, PICKS & CHAMBERS, DAVENPORT, IOWA

Whole No. 3745.
Residence, Red Wing, Goodhue County
Date Admission, 13th June 1894. —
Admitted by, Dr Phelps Hour, 2 oc Pm
How Sent, S. J. Nelson, Court Commr. Goodhue County
Sex, Male
Age, — 25 —
Civil Condition, Single
Children,
Age Youngest Child, —
Occupation, Laborer
Degree Education, not stated —
Profession Religion, Not known
Habits, Quite correct —
Nativity, Indiana —
Physicians Committing, E Dearborn and O. J. Brown
Correspondents, Mrs Sarah Bartlett
Red Wing - Minn.

No. for Year, 315.
Insane Relatives, mother & sister
Cause Exciting, not known
Cause Predisposing, heredity.
Form,
Accompanying Bodily Disorder, None
Suicidal or Not, Has spoken of suicide.
Date of this Attack, about 10 Days ago
Duration, about 10 days.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, — 25 —
Time of Leaving, 17th July 1895
Time in Hospital, 1 Year — 1 mo. 4 Days
Result, Died: phthisis pulmonalis

EXAMINATION ON ADMISSION.

Exd by D. Ely, June 6/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, quick
MEMORY:
Past Events,
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull,
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, poor
Own Mental State, poor
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Can get no connected account of him.

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Yes
Depressed,
DELUSIONS:
Systematized or Not, Not systematized; no persecution
Special Subjects,
Transitory or Not, Transitory
HALLUCINATIONS: "of hearing" & "sight."
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Incoherent
Voluble or Reticent, voluble; keeps up a continual talk about different ones doing things against him. —

Personal and Medical History of John Freyer

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 feet WEIGHT, 145 lbs. NUTRITION, Quite good.
WOUNDS OR ABNORMALITIES, See Supervisor's report, on next page
TONGUE, Tremors, none Coatings, Light coating Promptness Movement, prompt
PUPILS, Equality, Equal Size, dilated
Response Light, Yes Accommodation, Yes
SIGHT, Seems good
HEARING, good
COORDINATION, Arms, Finger to nose, eyes shut, slight incoordination.
Legs, Standing, eyes shut, Stands steady. —
TREMORS, Hands, none Tongue, None
Facial Muscles, General,
REFLEXES, Patellar, Equal — about 2. —
Other Reflexes,
ARTICULATION, Hesitating, good Slurred,
FACIAL EXPRESSION,
SENSIBILITY, normal.
HEART, Good.
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,

Personal and Medical History of John Freyer

1894

This patient was brought here by Deputy Sheriff Alexander Anderson, with the following history: patient is quite correct in his habits. There is history of heredity, mother & sister being insane; cause of attack is not known; form is acute exalted and somewhat paranoiacal. There is no accompanying bodily disorder. The first symptoms of disease were manifested about 10 days since; had an attack of acute mania. This is the 1st attack. Insanity is now shown on reading and music principally & religion. Patient has a bad temper, has also spoken of suicide. He (Examining Physicians) first self-abuse has been a prominent factor in producing his insanity. Patient has not been under medical treatment.

June 13 On admission, was put on B3. (S.R. Complexion sandy; hair dark; eyes blue; condition of skin good; there are some slight scratches on left hip and on hands: bodily condition dirty. Behavior good). Pulse 84. R 36
" 14 T(o) 100. June 14/94. Slept poorly, only 3 hours, last night: was restless for 2 hours; noisy about 4 hours. Am. B30. R 38. T(o) 99.8. Appetite good; bowels regular; no cough observed; is very noisy today; walking up & down hall,
" 15 most of the time; shows hallucinations. No complaints or injuries to report. June 15/94. Restless 3 hours, noisy 1 hour, slept only 5 hours, last night. AM. Pulse 78. T(o) 99. Has been very restless & noisy during the day;
" 16 sings & talks all the time; destructive; tears his clothes; dirty in habits. June 16/94. Restless 1 hour; very noisy 2 hours; destructive 5 hours, last night; slept scarcely any; AM. Pulse 75. T(o) 98.8. Very restless
" 17 and noisy, again today. Appetite good; bowels regular. June 17/94. Extremely noisy 5 hours, sleeping but 4 hours, last night. Am. Pulse 78. T(o) 98.8. (Was so very destructive, last night, that pants had to be
" 18 put on patient to prevent his tearing clothes) Appetite good; bowels moved. June 18/94. Slept fairly well, 7 hours, though he was noisy 2 hours or so, during the night. AM. Pulse 78. Has been noisy all day;
walks up & down hall, singing & talking. Is almost continually playing on the flute, day after day.
" 19 June 19/94. Slept 6 hours, noisy 3 hours, last night. AM. Pulse 75. Not so noisy today; seems to be
" 20 improving some; works some on the ward. June 20/94. Restless 2 hours, somewhat noisy 2 hours, but slept 5 hours, last night. AM. Pulse 78. Seems improving slowly; is more quiet. Talks quite rationally.
" 21 June 21/94. Seems quite a good deal improved. Appetite very good; bowels regular. Works in dining-
" 28 room; habits are clean. June 28/94. During the past week, improvement seems to have kept up. He has been sleeping well, (about 7 hours), each night. Pulse has been about normal. Appetite good; bowels regular; is still rather restless, by day; does not seem to realize why he is confined in this place; thinks he can leave anytime he wants to. Has delusions, though he talks quite rationally, at times. Has a fife which he is continually playing, and especially when out walking. Thinks the patients can't walk unless furnished with music. Habits neat & clean; works in dining-room. Is
" 30 apparently in good physical condition. (See attached letter). June 30/94. About as above described. Has not been feeling very well, the past 2 days; has been complaining of his stomach troubling him.
July 2 July 2/94. Wt 152 pds. (Note. If this be correct, it shows a very marked gain in flesh). Pulse 90. ——
" 12 July 12/94. Was today transferred to B3. Is quiet & well-behaved. Has had no "spells". Works with the patients.
" 17 July 17/94. Has continued working at painting until 4 day, when he refused to work & was left on the ward. —
" 22 July 22/94. Patient has been having a bad "spell": has been quite noisy for the past 3 days; would not stay in bed, at night. Day day, would wander about the ward, taking everything he could carry into
" 23 his room & talking about ladies, all the time. Was moved to B3. July 23/94. Was noisy & restless
" 24 6 hours, slept only 3 hours, last night. Tore up his clothing. July 24/94. Is very noisy & stubborn. Cannot keep any clothing on him, as he tears it all up: tore up 2 shirts in a short time, and

Personal and Medical History of John Freyer.

37/269

CLINICAL REPORT.

Patient's Name John Freyer Case Number 37 45 Record Commences January 11 94
DATE.

January 11	80			80			10 30 Patient came on ward from
							B 3 E. quite weak.
							ate fairly well for dinner and supper.
							Night slept 6 hours
12	80			80			Patient remains up on ward
13							Eats well / bowels fairly regular
14	120			96			Patient is very quiet during day. appears
							dull and listless. speaks to no one
15							Appetite fair. sleeps well
16	84	22	98.6	72			On medicine 3 times a day
17	80	26	98.6	68			appetite rather big bl. Patient works in
							dining room
18	72			68			
19	76	20	98.4	84	24	99.6	
20	80	24	98.4	72	22	98.8	
21	76	20	98.6	72	20	98.2	
22	80			84			Eats quite well. bowels fairly regular
27							Patient very quiet. Sleeps quite well
31							Appetite good. works in dining room
							some. Is very quiet. sits in
							some place most of the day.

(carried to page 348)

night, lately. Appetite good: bowels regular. Is on Ultra Diet. Seems somewhat improved.
May 2 May 2/95. Wt 115 pds. (Still losing in weight): patient lies steadily in bed. May 9/95. No special change.

1894

June 13 " 14 " 15 " 16 " 17 " 18 " 19 " 20 " 21 " 28 " 30

July 5 " 12 " 17 " 22 " 23 " 24

stays in bed, at night. Nop day, would wander about the ward, taking everything he could carry into his room + talking about ladies, all the time. Was moved to B3. July 23/94. Was noisy + restless 6 hours, slept only 3 hours, last night. Tore up his clothing. July 24/94. Is very noisy + stubborn. Cannot keep any clothing on him, as he tears it all up: tore up 2 shirts in 2 short times, and

Rochester, July. 26th. 94.

Dear, Sir.

How are you, getting along? I, am well; + hope, you are the same. I thank, God. that, I was brought, for. But I dont, thank you, at all. You, + Mrs. M.K. Mullan, are the cause, of, all my, trouble. Say my Dear, Friend. I wish you, would tell, me. how She. Is getting, along. I mean my Sweetheart, Alice. Is she still, living in Menomonie? If so. Please, tell me, where. If not, Please tell me where, She is; I am very, anxious, to know,

Over.

was noisy + restless for 7 hours and slept only 1½ hours, last night: was restless + noisy 6 hours or so. July 27/94. Slept . July 31/94. Appetite good; bowels apparently regular; days. However, still talks incoherently + is occasionally at on 6 in day time (see attached Extra Nurses Records). — About ⅓ of the nights this month, patient has one night, all night; has slept very poorly - Is also incoherently + has delusions - Is destructive; filthy in ork. Patient does not seem to improve any. — 2, in past month) - Pulse 114. Resp 19. During past part of each night - Resp 0/94. Last night, before during the day - Growing worse every day, for last week - sleeps poorly. Patient makes no improvement. of late + seems improving some, though slowly - Behaves well. Is more quiet. Seems to be all right - — Habits are clean + tidy - Physical health good - seem growing) worse, the last few days; quite noisy, Nov 24/94. Has improved some of late, but still appears Appetite good; bowels regular. Is well - behaved, at present and mostly all day; troublesome at night. Habits clean. some in his condition. Still quite dull + stupid - ferred to "Infirmary Ward". Was quite weak. Slept 6 hours, last night. Remains up, in the ward. et; appears dull + listless; speaks to no one. Works keeps well. Is very quiet + dull; sits in the same fairly regular. (See attached Nurses-record).

Feby 15 Feb 15/95. Appetite Good; bowels regular; he coughs a little, at times. Reticent; speaks only when spoken to - " 21/28 Feb 21/95. No change noted. Transferred to B3 (today) - Feb 28/95. Depressed + melancholy; sits in one place, all the time. Does not go out walking. Talks only when addressed, not communicative. no delusions noticed. Physical condition is not good. Appetite fairly good; bowels free. — Mar 2/15 March 2/95. Wt 148 lbs. Pulse 84. March 6/95. Sits in settee, all the time. Talks but very little " 21/31 Melancholy and depressed. March 27/95. Coughs, at times. March 31/95. Seems much depressed. Sits in seat, all the time. Talks quite sensibly, when addressed. Works some. Does not walk out or recreate in any way; Appetite medium; is on extra diet. Habits clean and tidy - Apl 1 Apl 1/95. Wt 143 lbs. Pulse 104. (Has been steadily failing in flesh the past 5 months). Pulse — " 10 Apl 10/95. Coughs + expectorates a good deal, at times. Is still losing in flesh. — " 25 Apl 25/95. Still coughs. Walks out, at times - Seems stupid + depressed - Transferred to 7 W. E. " 30 appeared much run - down + was put to bed. Apl 30/95. Has been sleeping quite well, at night, lately. Appetite good; bowels regular. Is on extra diet. Seems somewhat improved - May 3/9 May 3/95. Wt 115 lbs. (Still losing in weight). Patient lies steadily in bed. May 4/95. No special change.

(carried to page 348)

How is my brother.
Is he well & working?
Tell him, not to worry about me. I am happy. I'm already
Capt. Freyer. I was,
Prof. Freyer. in, Menomonie,
I am going to run independant
this fall, for Governor of
the State of Minnesota, &
There is no doubt but what
I'll be elected, I'll make a
good, for you know.
How is Clara, I am very much
in love with her do, you
favor my suit? She is too
young, I know, but there is
no hurry. I am willing to
wait for her. that is, if
Allie. dont give me any more
Encourgement. I'm not, going to,
die, ever one, ~~boy~~ lady. that
would be folly. There are plenty
more in the world. (Ha Ha)

How, are all, your family?
Say, Sheriff. Where are my,
Things? Namely, my music, both,
vocal, & instrumental. & My musical,
Instruments, my Silver, fife, my,
tin, fife, & my, Harmonica.
I think I shall be with you,
soon. When I come, back, again
Then, with you, I'll stay, my dear.
I am going to join the American
Theatre, Wald & Organize, my own
troupe. Will Duke money, Amt.
Dont you want to be with us. I want,
you & your family. I know, &
you, know, that, you'll make
more, money, with me, than you
Do, now, your time as Sheriff
Expires, this fall, I believe.
Now what better, can you do?
Than, join me, & Enjoy, yourself.
You are about as good a friend
As I have. I know that to be fact.
(Over.)

1894

June

" 1

" 1

" 1

" 1

" 1

" 2

" 2

" 2

" 30

July

" 12

" 17

" 22

" 23 his room & talking about ladies, all the time. Was moved to B3. July 23/94. Was noisy & restless

" 24 6 hours, slept only 3 hours, last night. Tore up his clothing. July 24/94. Is very noisy & stubborn. Cannot keep any clothing on him, as he tears it all up. tore up 2 shirts in short time, and

Was noisy & restless for 7 hours and slept only 1½ hours, last
night: was restless & noisy 6 hours or so. July 27/94. Slept
July 31/94. Appetite good; bowels apparently regular;
days. Hovers, still talks incherently & is occasionally
at 6¾ in day time (see attached letter, shows delusions).
In about 3 of the nights this month, patient has
one night, all night; has slept very poorly. Is also
incoherently & has delusions. Is destructive; filthy in
ork. Patient does not seem to improve any. —
(, in past month). Pulse 114. Sep 5/94. Hovering past
part of each night. Sep 6/94. Last night, before
ening the day. Growing worse every day, for last week.
sleeps poorly. Patient makes no improvement.
t of late & seems improving some, though slowly.
Behaves well. Is more quiet. Seems to be all right.
— Habits are clean & tidy. Physical health good.
new growing) worse, the last few days; quite noisy,
Oct 24/94. Has improved some of late, but still appears
Appetite good; bowels regular. Is well-behaved, at present
ined mostly all day; works some at ward. Habits clean.
ge broke in his condition. Still quite dull & stupid.
ferred to "Infirmary Ward". Was quite weak.
slept 6 hours, last night. Remains up, at the ward.
et; appears dull & listless; spits & mo-ans. Works
keeps well. Is very quiet & dull; sits in the same
fairly regular. (See attached Nurses-record).

Feby 15 Feb 15/95. Appetite good; bowels regular; he coughs a little, at times. Reticent; speaks only when spoken to.

" 21/28 Feb 21/95. No change noted. Transferred to B3 (today). Feb 28/95. Depressed & melancholy; sits in one place, all the time. Does not go out walking. Talks only when addressed, not communicative. no delusions noticed. Physical condition is not good. Appetite fairly good; bowels free. —

Mar 2/15 March 2/95. Wt 148 lbs. Pulse 84. March 15/95. Sits on settee, all the time. Talks but very little.

" 27/31 Is melancholy and depressed. March 27/95. Coughs, at times. March 31/95. Seems very much depressed. Sits on seat, all the time. Talks quite sensibly, when addressed. Works some. Does not walk out or recreate in any way; Appetite medium; is on extra diet. Habits clean and tidy.

Apl 1 Apl 1/95. Wt 143 lbs. Pulse 104. (Has been steadily failing in flesh the past 5 months). Pulse —

" 10 Apl 10/95. Coughs & expectorates a good deal, at times. Is still losing in flesh. —

" 25 Apl 25/95. Still coughs. Walks out, at times. Seems stupid & depressed. Transferred to F W. E.

" 30 Appears much run-down & weak but not febed. Apl 30/95. Has been sleeping quite well, at night, lately. Appetite good; bowels regular. Is on extra diet. Seems somewhat improved.

May 3/9 May 3/95. Wt 115 lbs. (Still losing in weight); patient lies steadily in bed. May 9/95. No special change.

(carried to page 348)

Personal and Medical Hist...

Personal and Medical History of John Freyer.

(R. S.) Address J. W. Freyer,
Rochester, Olmsted Co Minn,
Care of Dr. Kellogg, Supt of Asylum.

Captain, in Christ's Army,
I am only a Private in the Lord's Army,
I will lead us all to Glory
I will the triumph we'll share
Shout the triumph, read this carefully.
Sweet Please, read it to the Old Paint Brush.
Shrid, send it to the Allen Pub. Co. St. Paul. Minn. Do not Publish.
Press. Ste. Paul. Minn. Do not Publish.
I wish to hear it Published.
Can't you, write to, Dr. Kilbourne
To let me come home, I can assure
Mind need rest. The excitement
For great Jesus. It is wearing out
Because there are a great
Last a long time, nevertheless
Answer.
Well I guess will have to close.
Love to All. Please speedily.
From, Yrs. J. W. Freyer.

Olmstead, Co.
Minn.
Asylum.

Rochester, June, 27th 94.

Dear Emma.

I dont suppose you ever thought of getting a letter from me, that was written in an insane asylum. But its all right. I am all right. I can go home any time as soon as I get the Supt's consent. And that wont be hard to get. I am a favorite with the officers & Patients. am 2nd Cook in the Dining Room. And play the fife every day when we march out for a walk. I help keep order also; and you bet I can.

...Was noisy & restless for 7 hours and slept only 1½ hours, last ...te night: was restless & noisy 6 hours or so. July 27/94. Slept ...rs. July 31/94. Appetite good; bowels apparently regular; ...days. However still talks incoherently & is occasionally ...ept an 6½ in day time (see attached Notes, showing delusions). ...— At about 3 of the nights this month, patient has ...one night all night; has slept very poorly. Is also ...incoherently & has delusions. Is destructive; filthy in ...work. Patient does not seem to improve any. — ...2, in past month). Pulse 114. Sept 5/94. During past ...part of each night. Sept 6/94. Last night, before ...during the day. Growing worse every day, for last week. ...sleeps poorly. Patient makes no improvement. ...of late & seems improving some, though slowly. ...Behaves well. Is more quiet. Seems to be all right. ... — Habits are clean & tidy — Physical health good ...seem growing) worse, the last few days; quite noisy, ...Nov 24/94. Has improved some, of late, but still appears ...Appetite good; bowels regular. Is well-behaved, at present ...laced mostly all day; works some in ward. Habits clean. ...no change in his condition. Still quite dull & stupid — ...ferred to "Infirmary Ward". Was quite weak. ...Slept 6 hours, last night. Remains up, in the ward. ...diet; appears dull & listless; speaks to no one. Works ...keeps well. Is very quiet & dull; sits in the same ...power is good. bowels fairly regular. (See attached Nurses' Record).

Feby 15 Feb 15/95. Appetite good; bowels regular; he coughs a little, at times. Reticent; speaks only when spoken to.
" 21/24 Feb 21/95. No change noted. Transferred to B3 (today). Feb 28/95. Depressed & melancholy; sits in one place, all the time. Does not go out walking. Talks only when addressed; not communicative. No delusions noticed. Physical condition is not good. Appetite fairly good; bowels free. —
Mar 2 March 2/95. Wt 148 pds. Pulse 84. March 16/95. Sits in settee, all the time. Talks but very little.
" 24/31 Melancholy and depressed. March 27/95. Coughs, at times. March 31/95. Seems very much depressed. Sits in seat, all the time. Talks quite sensibly, when addressed. Works some. Does not walk out or recreate in any way; Appetite medium; is on extra diet. Habits clean and tidy —
Apl 1 Apl 1/95. Wt 143 pds. Pulse 104. (Has been steadily failing in flesh the past 5 months). Pulse —
" 10 Apl 10/95. Coughs & Expectorates a good deal, at times. Is still losing in flesh. —
" 25 Apl 25/95. Still coughs. Walks out, at times. Seems stupid & depressed. Transferred to T W. E.
" 30 appeared much run-down & was sent to bed. Apl 30/95. Has been sleeping quite well, at night, lately. Appetite good; bowels regular. Is on extra diet. Seems somewhat improved.
May 3/9 May 3/95. Wt 115 pds. (Still losing in weight). Patient lies steadily in bed. May 9/95. No special change.

(carried to page 348)

...his room & talking about ladies, all the time. Was moved to B3. July 23/94. Was noisy & restless ...6 hours, slept only 2 hours, last night. Tore up his clothing. July 24/94. Is very noisy & stubborn. ...Cannot keep any clothing on him, as he tears it all up: tore up 2 shirts in a short time, and

Personal and Medical History of [illegible]

Personal and Medical History of John Freyer.

1894

Cant you or your mother or Father or any of you come and see me home? The State will pay my way as far as I go in Minn+ that will be Wabasha. From there I can get to Menomonie all right. Thats where I shall go. Because my True Love lives there + I shall get married as soon as I see her again. We are engaged now + I've known her Just since April 19th its a case of love at first sight by both of us. Well make a fine Couple and dont you forget it. She's the Darling of my heart. And we'll surely never part. She's rich + I'm not Poor by a good deal. I can make lots of money. Easy employment

Traveling has always been my ambition. and now I can travel as much as I like. I suppose you heard about the troup Theatre troup I organized in Menomonie. I was head man Prof Freyer my title. and everyone said I deserved it too. after I get home I shall be known as Prof J. H. Freyer allover in a very short time. That case I wrote you about I suppose is settled but not as far as I'm concerned I shall have some money out it or I'll know the reason why. I am not Crazy at all. and everyone knows it. I dont know what I was sent here for

June

" 16

" 17

" 18

" 19

" 20

" 21

" 28

July 12

" 17

" 22

" 23

" 24

[illegible] this

[illegible] times.

[illegible] the

[illegible] Is

[illegible] ibed.

[illegible] in.

[illegible] Vanita.

[illegible] ot

his room + talking about ladies, all the time. Was moved to B3. July 23/94. Was noisy + restless 6 hours, slept only 2 hours, last night. Tore up his clothing. July 24/94. Is very noisy + stubborn. Cannot keep any clothing on him, as he tears it all up: tore up 2 shirts in short time, and

Use noisy + restless for 4 hours and slept only 1½ hours, last to night: was restless + noisy 5 hours or so. July 27/94. Slept re. July 31/94. Appetite good; bowels apparently regular; days. Howevr, still talks incoherently + is occasionally ept as 6th in day-time (see attached letter showing delusions). — In about ⅓ of the nights this month, patient has me night, all night; has slept very poorly - Is also ri incoherently + has delusions - Is destructive; filthy in ork. Patient does not seem to improve any. — l, in past month) - Pulse 114. Sep 1/94. During past part of each night - Sep 6/94. Last night, he tore During the day. Growing worse every day, for last week. sleeps poorly. Patient makes no improvement. t of late + seems improving some, though slowly - Behaves well. Is more quiet. Seems to be all right - — Habits are clean + tidy - Physical health good - new growing) worse, the last few days; quite noisy, Nov 24/94. Has improved some, of late, but still appears Appetite good; bowels regular. Is well - behaved, at present laid mostly all day; works some at ward. Habits clean. ge to note in his condition. Still quite dull + stupid - ferred to "Infirmary Ward". Was quite weak. Slept 6 hours, last night. Remains up, in the ward. iet; appears dull + listless; speaks to one. Works Sleeps well. Is very quiet + dull; sits in the same

Feby 15 Feb 15/95. Appetite good; bowels regular; he Coughs a little, at times. Reticent; speaks only when spoken to -

" 21/28 Feb 21/95. No change noted. Transferred to B2 (today) - Feb 28/95. Depressed + melancholy; sits in one place, all the time. Does not go out walking. Talks only when addressed; not communicative. no delusions noticed. Physical condition is not good. Appetite fairly good; bowels free. —

Mar 2/15 March 2/95. Wt 148 pds. Pulse 84. March 6/95. Sits in settee, all the time. Talks but very little.

" 27/31 Is melancholy and depressed. March 27/95. Coughs, at times. March 31/95. Is very much depressed. Sits in seat, all the time. Talks quite sensibly, when addressed. Works some. Does not walk out or recreate in any way; Appetite medium; is on extra diet. Habits clean and tidy -

Apl 1 Apl 1/95. Wt 143 pds. Pulse 104. (Has been steadily failing in flesh the past 5 months). Pulse —

" 10 Apl 10/95. Coughs + expectorates a good deal, at times. Is still losing in flesh. —

" 25 Apl 25/95. Still coughs. Walks out, at times - Is very stupid + depressed - Transferred to 7 W. E.

" 30 Appears much run-down + worn out at times. Apl 30/95. Has been sleeping quite well, at night, lately. Appetite good; bowels regular. Is on extra diet. Seems somewhat improved -

May 3/9 May 3/95. Wt 115 pds. (Still losing in weight). Patient lies steadily in bed. May 4/95. No special change.

(carried to page 348)

1894

June

July

July 23 — " 24 — was put in a straight-vest. July 25/94. Was noisy & restless for 7 hours and slept only 1½ hours, last night. July 26/94. Slept only 3 hours, during the night: was restless & noisy 5 hours or so. July 27/94. Slept but 2½ hours, last night; was noisy for 5 hours. July 31/94. Appetite good; bowels apparently regular; patient has improved somewhat, in the past 4 days. Howevr, still talks incoherently & is occasionally destructive. Habits are filthy. Is at present kept in 6⅝ in day-time (see attached Notes, showing delusions).

Aug 1/94. Wt 148 pds. Pulse 56. Aug 31/94. On about 3 of the nights this month, patient has been noisy & restless from 5 to 7 hours - & on one night, all night; has slept very poorly - Is also restless & noisy, quite often by day. Talks incoherently & has delusions - Is destructive; filthy in habits & slouchy in dress - Violent; does no work. Patient does not seem to improve any. -

Sept 3/94. Wt 132½ pds (some gain in flesh, in past month) - Pulse 114. Sept 5/94. During past 5 nights, he has been restless & noisy, the greater part of each night - Sept 6/94. Last night, he tore up his shirt & pillow; also destroys his clothing, during the day - Growing worse every day, for last week. Sept 30/94. Continues noisy & restless, at night, & sleeps poorly - Patient makes no improvement.

Oct 1/94. Wt 156 pds. Pulse 80. Oct 4/94. Is quiet of late & seems improving some, though slowly - Oct 31/94. Apparently, sleeps better at night - Behaves well. Is more quiet - Seems to be all right - Talks quite rationally. Works some in ward - Habits are clean & tidy - Physical health good.

Nov 1/94. Wt 162 pds. Pulse 66 - Nov 12/94. Has been growing worse, the last few days; quite noisy, during both night & day & slightly destructive. Nov 24/94. Has improved some of late, but still appears somewhat dull & stupid, at present - Nov 30/94. Appetite good; bowels regular. Is well-behaved, at present but appears rather dull & stupid; remains in one place mostly all day; works some in ward. Habits clean.

Dec 1/94. Wt 158 pds. Pulse 72. Dec 31/94. No change to note in his condition. Still quite dull & stupid -

Jan 2/95. Wt 154. " 63 - Jan 11/95. Transferred to "Infirmary Ward". Was quite weak. " 12 — Ate fairly well, for dinner & supper. Jan 12/95. Slept 6 hours, last night. Remains up, in the ward. " 17 — Jan 17/95. Appetite rather light. Patient is quiet; appears dull & listless; speaks but one. Works in dining-room. Takes medicine. " 31 — Jan 31/95. Sleeps well. Is very quiet & dull; sits in the same place most of the day. Appetite is good: bowels fairly regular. (See attached Nurses' record).

Feby 15 — Feb 15/95. Appetite good; bowels regular; he coughs a little, at times. Reticent; speaks only when spoken to - " 27/28 — Feb 27/95. No change noted - Transferred to I W 2 (today) - Feb 28/95. Depressed & melancholy; sits in one place, all the time. Does not go out walking. Talks only when addressed; not communicative. No delusions noticed. Physical condition is not good. Appetite fairly good; bowels free. -

Mar 2/95. Wt 148 pds. Pulse 84. March 6/95. Sits in settee, all the time. Talks but very little. " 27/31 — Melancholy and depressed. March 27/95. Coughs, at times. March 31/95. Seems very much depressed. Sits in seat, all the time. Talks quite sensibly, when addressed. Works some. Does not walk out or recreate in any way; Appetite medium; is on extra diet. Habits clean and tidy -

Apl 1 — Apl 1/95. Wt 143 pds. Rise 10 pds. (Has been steadily failing in flesh the past 5 months). Pulse - " 10 — Apl 10/95. Coughs & expectorates a good deal, at times. Is still losing in flesh. - " 25 — Apl 25/95. Still coughs. Walks out, at times - Seems stupid & depressed - Transferred to I W E -

" 30 — Appears much run-down & weak - Put to bed. Apl 30/95. Has been sleeping quite well, at night, lately. Appetite good; bowels regular. Is on extra diet. Seems somewhat improved -

May 3/95. May 3/95. Wt 115 pds. (Still losing in weight); patient lies steadily in bed. May 4/95. No special change.

(carried to page 341)

" 23 — his room & talking about ladies, all the time. Was moved W 13. July 23/94. Was noisy & restless " 24 — 6 hours, slept only 3 hours, last night. Tore up his clothing. July 24/94. Is very noisy & stubborn. Cannot keep any clothing on him, as he tears it all up: tore up 2 shirts in a short time and

---

I want to see you all very much. Please come and get me. Bring Red Dog with you. Sheriff the along with you and that young Sheriff up there. I say that you must come and get me out of here. I want to get out of here. I will not stay here any longer. I will kill you all if you don't get me out of here. I will kill you all if you don't get me out of here.

Yours truly
Ann Freyer
Mrs. L. M. Freyer
Rochester, Olmstead Co. Minn.

Personal and Medical History of Charles Reynolds

GIBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3749.
Residence, Austin, Minnesota.
Date Admission, 15th June 1894
Admitted by, Dr. Phelps Hour, 1 AM
How Sent, S. S. Washburn Jct P. Mower County
Sex, Male.
Age, 27 years
Civil Condition, Single
Children, none
Age Youngest Child, —
Occupation, Laborer
Degree Education, not given —
Profession Religion, not a church member
Habits, Good —
Nativity, "Yost State"
Physicians Committing, E. N. Washburn (w) Alex. Macdonald
Correspondents, Alexander Reynolds
Austin, Minn —

No. for Year, 319.
Insane Relatives, none (Father mother 2 Cousins)
Cause Exciting, not stated.
Cause Predisposing, "chronic"
Form,
Accompanying Bodily Disorder, none
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, about 24.
Time of Leaving, Apr. 4 '95
Time in Hospital, 9 m 18 d
Result, Imp.

EXAMINATION ON ADMISSION.

Exly D. Ely. June 6/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, Quick
MEMORY:
Past Events, not good
Recent Events, fair
Special Subjects,
PERCEPTIVITY:
Alert or Dull, alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Good
Own Mental State, fair
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

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

Personal and Medical History of Charles Reynolds

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 3/8 WEIGHT, 135½ pds. NUTRITION, ✓
WOUNDS OR ABNORMALITIES, see "S. R." on next page
TONGUE, Tremors, no tremors; large; flabby Coatings, Coated Promptness Movement, prompt
PUPILS, Equality, Equal Size, Dilated
Response Light, Yes Accommodation, Yes
SIGHT, Impaired; blurs upon reading.
HEARING, Good
COORDINATION, Arms, incoordination of both hands.
Legs, staggering, eyes shut, sways considerable
TREMORS, Hands, none Tongue, none
Facial Muscles, General,
REFLEXES, Patellar, Equal — about 3 or 4.
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds good
LUNGS, Sounds good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, 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,

Personal and Medical History of Charles Reynolds

BARNEY, PUGLAY & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy Sheriff Bassett + another man with the following history. His habits have been good. There is no history of heredity. Cause of attack is not stated; form is chronic. - There is no accompanying) bodily disorder. First symptoms of the disease were manifested 3 years ago, with pain in the head + sleeplessness. This 1st attack. The attack now varies; insanity shown in no particular subject. Patient is disposed to injure others, from sudden passion, but is not suicidal. Has destructive habits: destroyed 2 rifles, when in fits of passion. There is no history of any bodily disease or any injury to head. He has not been restrained or confined. Was under medical treatment, 3 years ago, for about 4 months + seemed to improve some, for a time. Father + mother 2d Cousins.

June 16 On admission was put on B2 (S.R. Complexion, dark; hair dark; eyes black; condition of skin good. Some scars on right side of larynx + one on forehead: bodily condition clean; behavior good). 1 AM. Pulse 78 R 20. T(e) 99.4; 7 PM P 80 R 19 T(e) 99. June 17/94. Restless a couple of hours, but slept 6 hours, last night. AM. Pulse 80. R. 18. T(e) 99. Appetite fairly Good; bowels free. Behavior is good; talks freely, when addressed; no delusions noted. PM. Pulse 82. R 18 T(e) 99.2. No complaints or injuries to report.

" 18 June 18/94. Slept 6 hours; restless 2 hours a.m, last night. AM. Pulse 78 R 17. T(e) 98.6. Appetite is good. Talks quite freely; plays games some; makes no complaints. Is on medicine. PM. Pulse 76.

" 19 R 18. T(e) 98.8. June 19/94. Rested quite well + slept 7 hours, last night. AM. Pulse 74. Patient

" 20 seems improving; talks quite freely + sensibly. Works some. June 20/94. Slept 8 hours, last night.

" 21 AM. Pulse 74. Behaves well: talks freely. June 21/94. Restful. Sleeping 7 hours, last night. Behaves well; makes no

" 22 complaints; plays games &c. Habits cleanly. Pulse about normal. June 22/94. About the same. Pulse 74.

" 23 June 23/94. Continues quiet + well-behaved; appetite good; bowels seem normal. Keeps with work; habits are clean.

" 30 June 30/94. During this, the second week of his stay, patient has been resting + sleeping well, about 8 hours each night. Behavior has been very good; he has been orderly + causing no trouble. Talks very freely + sensibly; no delusions have been noted. Reads some; plays games &c. At first seemed to be weak, probably on account of sickness + complained some of headache. Seems much improved now physically. Is willing to help and work, daily, in the dining-room in his ward. Seems improved some mentally, also. Habits clean. Is on medicine.

July 2/31 July 2/94. Wt 143½ pds (a gain of 8 pounds, since admission). July 31/94. Quiet + well-behaved. Talks freely + sensibly. Appetite good; bowels regular. Does not walking daily. Works some in the dining-room

Aug 7/31 Aug 7/94. Wt 150 pds. (a further gain in flesh). Pulse 78. Aug 31/94. Continues quiet + well behaved. Talks freely + sensibly; reads some; plays games &c. Helps some with ward-work. Seems quite improved.

Sept 1/30 Sept 1/94. Wt 149 pds. Pulse 104. Sept 30/94. Keeps on improving. Talks freely + rationally - works some.

Oct 1/6 Oct 1/94. Wt 146½ " " 70. Oct 6/94 Complains of bowels moving too freely. Given medicine.

" 8/9 Oct 8/94. Complains of cramps + feels sick. Is in bed, today. Oct 9/94. Abed today. Complains

" 10 of stomach being sore. Eats nothing, or but little. Is on medicine. Oct 10/94. Up today + feels

" 21 some better - Oct 31/94. Behaves well. Reads some. Habits clean. No complaints. Is much improved.

Nov 7/10 Nov 7/94. Wt 158 pds. Pulse 76. Nov 10/94. Visited by father. Nov 13/94. Abed, most of the day.

" 15 Appetite poor; complains of stomach. Nov 15/94. Complains of head, but upon examination Dr. H. found nothing.

" 30 Nov 30/94. Sits up + down from his bed; complaining of his stomach troubling him &c. Talks but little. Stays in room, most of the time. Talks quite freely + sensibly, at times, but is depressed. Works in dining-room.

Dec 1/31 Dec 1/94. Wt 158 pds. Pulse 78. Dec 31/94. No special change either in mental or physical condition.

1895 Jan 2/10 Jan 1/95. Wt 158½ " " 82. Jan 11/95. In bed, part of the day. Is melancholy + depressed.

Personal and Medical History of Charles Reynolds

1895

Jan 31 Jan 31/95. Appetite is poor; at times refuses his meals; complains, sometimes, of not feeling well + will then go to bed for part of a day. He reads some; talks but little. Is melancholy + depressed. (Visited by friends today)

Feb 1/28 Feby 1/95. Wt 159 pds. Pulse 92. Feb 18/95. Sits about; very much depressed; talks but little. -

" 28 Feb 28/95. Appetite good; reads some; talks but little; is not communicative; melancholy;

Mar 2 plays games. Is clean + tidy. Does no work. Mar 2/95. Wt 153 pds. Pulse 72. Still depressed.

" 31 Mar 31/95. Still quiet + melancholy; talks but little; talks sensibly. Reads; plays games; does no work.

Apl 1/4 Apl 1/95. Wt 154 pds. Pulse 80. April 4/95. Taken home by his father, on trial, today -

Discharged

John Simenson

1895 From 288.

May 2/31 May 1/95. Wt 127 pds. Pulse 68. May 12/95. Complains of pain in stomach. May 31/95. Still shows delusions: "thinks that he is going to be killed + that his wife is dead" - Pale. Does no work

June 1/15 June 1/95. Wt 128 pds. Pulse 96. June 15/95. Visited by daughter. June 24/95. Visited by sister.

" 30 June 30/95. Is old + childish in his delusions. Physical condition fairly good. Does no work.

July 1/30 July 1/95. Wt 126 pds. Pulse 75. July 30/95. Visited by a friend. July 31/95. No change to note.

Aug 7 Aug 7/95 Wt 125 " " 80 Feb 2/95. Wt 125 pds. Pulse 72. Oct 1/95. Wt 125 pds. Pulse 86.

Sept 7 Oct 31/95. Quiet + melancholy; thinks some one is going to hurt him, during the night; frequently

Oct 31 asks "if his family is living?" Is quite feeble, not being able to walk very far a fast. -

Nov 2 Nov 2/95. Wt 126 pds. Pulse 76. Dec 2/95. Wt 129 pds. Pulse 84. Jan 1/96. Wt 123 pds. Pulse 72.

Dec 2 Jan 1/96. Transferred to B3. (on account of a general change of wards). Jan 31/96. Patient is

1896 Jan 1/4 quite feeble and quite often makes various complaints of rheumatism + headaches, especially

" 31 of late. Is restless + walks up + down hall, most of the day. Is quiet + despondent. Appetite good. bowels in good condition. Rest well. Still holds delusions: thinks his wife + family are

Feb 1 destroyed + that he is going to be killed by somebody." — Feb 1/96. Wt 125 pds. Pulse 96. —

Mar 1 Mar 1/96. Wt 125 pds. BP. Apl 1/96. Wt 127 pds. P 90. Apl 30/96. Patient Continues despondent + melancholy.

Apl 1/30 Walks up + down hall, almost Continually, during day. Still has delusions: "thinks his family are dead, and that some one is going to kill him". Physically, is weak, due mostly to age.

May 1/96 to Aug 1/97 Summary Nurses Notes by Dr. Phelps. Patient rather sullen: is usually melancholy but more more actively so during early part of his stay here. During 97 has become rather more chronic or rather more quiet + also the same ideas prevail. A sharp knife was found on him in Jan 97. he said he had had it some time: General health rather poor. Complains somewhat at times of rheumatism: Wt. July 1/97 120 lbs. Much is, however, only 3 lbs. less than a year previous.

Aug 31/97 Wt. 154th Oct 31/97 Health fairly good. Is rather melancholy in appearance. Walks about in a bent + stooped fashion: Is quite senile. Visited on 8th by relatives.

Jan 31/99 No change in behavior or condition Continued by Dr. Winona. Mch 4/99 While assisting in dining room had a chill followed by fever; put to bed. 2:15 P.M. Temp. 102° Vomited slightly at 3 P.M. Mch 5

Mch 5 Improved. Complains of rheumatic pain in right hand. Mch 7 Up + dressed. Aug 1/99 Patient very restless: much worried about family affairs: careless about personal appearance Aug 2d Transferred with other patients to Annex temporarily. Sept 1 No change in condition

See Folio 120

Personal and Medical History of Charles Sommers

EMERY, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3750.

Residence, Town of Jordan, Fillmore Co. Minn.

Date Admission, 16th June 1894 —

Admitted by, Dr Phelps Hour, 8:30 A.M.

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

Sex, Male —

Age, about 37.

Civil Condition, Married

Children, (None living 2 Dead = Died 5 - 6 years before the

Age Youngest Child, Oldest) Came on —

Occupation, Farmer

Degree Education, not stated

Profession Religion, Lutheran

Habits, Does not drink intoxicants; Never has drunk — Moral

Nativity, Germany —

Physicians Committing, M. A. Frow and Chas H. Cooper

Correspondents, Gustavus Baker, Pleasant Grove,

(Brother in-law) Minn; Olmsted County

No. for Year, 320.

Insane Relatives, None, that are known of —

Cause Exciting, Religion; Came on suddenly while reading Bible

Cause Predisposing, "Chronic"

Form,

Accompanying Bodily Disorder, None

Suicidal or Not, not —

Date of this Attack, about 8 years ago

Duration, about 8 years.

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 30.

Time of Leaving, July 8th 94

Time in Hospital, 17 ds.

Result, Improved.

EXAMINATION ON ADMISSION.

Exd by Dr. Ely; June 16/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, clear

Quick or Sluggish, quick

MEMORY:

Past Events, good

Recent Events, good

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Alert

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, good

Own Mental State, Poor

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, yes

Depressed,

DELUSIONS:

Systematized or Not, Unsystematized

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none

ILLUSIONS: none

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Voluble —

Personal and Medical History of Charles Sommers

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7in WEIGHT, 188 lbs. NUTRITION, Good

WOUNDS OR ABNORMALITIES, See "S. R." on next page.

TONGUE, Tremors, Slight tremors Coatings, heavy white coat Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, yes Accommodation, Yes.

SIGHT, Good

HEARING, Impaired slightly

COORDINATION, Arms, Finger to nose, eyes shut, Correct.

Legs, Standing, eyes shut, Stands steady.

TREMORS, Hands, none Tongue, Slight

Facial Muscles, General,

REFLEXES, Patellar, Equal — about st. —

Other Reflexes,

ARTICULATION, Hesitating, / Slurred, Foreign accent

FACIAL EXPRESSION,

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.,

Accounts 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 Charles Sommers

1894

This man was brought here by the town-Marshall of Chatfield, with the following history. (Patients wife also came here, as a patient, at same time). Their cases seem parallel ones). Habits are good and moral; no history of heredity known of. Supposed cause of this attack is religion; it came on suddenly while reading the Bible: form of this attack is chronic, exalted. There is no accompanying bodily disorder. He shows a single delusion; believes that Jesus Christ is directly guiding him; will acknowledge no other authority. This is the 1st attack; came on here, at home, about 8 years ago. Always the same, since first symptoms; gradually growing worse. Insanity now shown in the subject of religion. He said that he would injure anyone, even to killing, if Christ told him to. Is not suicidal, however. Has no filthy or destructive habits. There is no history of any bodily disease &c or injury to the head. - He has not been restrained or confined, nor under medical treatment. -

June 16 On admission, was put on B½ (I. R. Complexion dark; hair dark with gray; Eyes brown; Condition of skin Good. Bodily condition clean: front fingers of left hand off at 2nd joint; varicose veins on right leg. I.K.S. and a "girl" on right fore-arm, in India Ink.). When taken inward, Pulse 102 R 18 T 99.4. -

" 17 June 17/94. Was restless for a couple of hours, but slept 6 hours, last night. AM. 98 - 17 - 99 -. Appetite good; bowels constipated, but he will not take medicine. No cough noticed. Behavior is good; Talks quite freely but he shows delusions. Says he is a medium between Christ and man". PM. Pulse 104. R 17 T 99. - No complaints

" 18 or injuries to report. June 18/94. Slept only 5 hours; was restless for 3 hours, last night. AM. Pulse. T 98.8.

" 19 Appetite good. Behaves well. Talks but little except when addressed. PM. Pulse 108. R 19 99.2. June 19/94. Again somewhat restless, but slept 6 hours, last night. Behaves well. Works some. Still shows delusions in regard to

" 20 religion &c. PM. Pulse 104. R 17. T 98.8. June 20/94. More restful, sleeping 7 hours, last night. AM. P 104.

" 21 Behaves well; makes no complaints. Visited by friends, today. June 21/94. Again, slept 7 hours, last night. AM. Pulse 100. Appetite good. Talks some but still shows delusions. Works some inward.

" 22 June 22/94. Slept 8 hours, last night. AM. Pulse 96. Behavior is good. Sleeps regularly, with the ward-work.

" 23 June 23/94. Slightly restless a couple of hours, but slept 6 hours, last night. AM. Pulse 98. Still deluded.

" 30 June 30/94. During past week, he has continued quiet & restful at night, sleeping about 8 hours at each. By day has been up & about; behavior has been very good. He eats well. Bowels, however, have been much constipated. Patient talks some, but still shows Delusions in the subject of religion. Also says that "they have no right to keep him here". He does not grow excited when talking of his "belief" but still sticks steadily and firmly to his "religious delusions." Pulse has been much accelerated, but he has not complained of any ill-feeling. He has been clean & tidy in his personal habits. Has helped with the work. Is in good Physical Condition. -

July 1/3 July 1/94. Wt 195 pds. (has gained 7 pds. since admission). July 3/94. No material change to note. Patient was, today, permitted to return home.

— Discharged —

Personal and Medical History of Louis Wohlers

From 184

July 26/94. Appetite very poor: he has to be almost forced to eat, now. July 27/94. Was groaning, at times, last night.

" 31 July 31/94. Patient is steadily confined to his bed; lies there quietly. Sleeps, in the average, 6½ hours, nightly. Appetite improving some. During nights, he groans a good deal; yet does not complain of severe ill feeling. (See attached Record)

Aug 10 Aug 1/94. Wt (in underclothes) 80 pds. Is losing in flesh. Aug 6/94. Appears to be growing more strong.

" 17 Aug 7/94. Lies steadily in bed. Can seem change in patient, from day to day. Sleeps 6 to 7 hours, nightly.

" 31 Aug 21/94. Appetite fairly good. He sleeps & eats quite well. Is fed by nurse. Seems growing stronger, daily.

Sept 1/8 Sept 1/94. Wt (in underclothes) 82 pds. - Sept 8/94. Lies steadily in bed; Appetite good; is still fed by the nurse;

" 10 Bowels are regular; at times, groans, as if in pain. Sept 10/94. Appears to be growing somewhat stronger, of late. -

" 15 Sept 15/94. Patient sleeps from 6 to 7 hours, nightly - Appetite keeps good; bowels regular. Patient still in bed.

" 18/25 Sept 18/94. Appetite fairly good; bowels regular. He is still in bed & is fed, daily, by the nurse - Sept 23/94. At times, groans, as if in pain; is more restless, of late; appetite not so good, of late - Bowels probably constipated -

" 27/30 Sept 27/94. Given enema; bowels afterward moved, but only a little. Sept 30/94. Patient still keeps his bed; lies there fairly quietly - Sleeps from 5 to 6 hours, nightly - Seems in pain at times - Bowels costive.

Oct 1 Oct 1/94. Wt 177 pounds. (in underclothes) - a loss of 5 pds in the past month. Patient is failing.

" 5 Oct 5/94 - Low regular & extra diet. Fed by nurse daily. Lies steadily in bed; bowels are costive.

" 10 Oct 10/94. Patient has been very cross & cranky, at times, the past few days. Bowels are constipated &

" 14 Enemata have to be quite frequently given. He eats but very little - Oct 14/94. Patient sometimes refuses to take medicine: bowels are costive; he takes but very little nourishment: appetite poor.

" 15/17 Oct 15/94. Is very restless, of late. Oct 17/94. Patient has been sleeping 6 to 7 hours, nightly -

" 18/20 Oct 18/94. Eats but very little; was fed by nurse today. Oct 20/94. Enema given; bowels have since moved: passage quite hard & lumpy. Oct 24/94. Bowels have moved but very little;

" 24 Patient appears to be gradually growing weaker. Oct 26/94. Again given an Enema;

" 26 bowels moved slightly. He has refused all nourishment today. Oct 27/94. 7 am. Feet

" 27 are cold: hot sand bags placed to feet. 5 PM. Pulse is very weak. Patient has been quite restless, all day; groaning & holding to bed, as if in pain. 7.30 PM. Was given hypodermic of morphine ¼ gr. Oct 28/94. Was fairly quiet, all night: hot sandbags kept to feet.

" 28 Patient, however, is rapidly failing. Friends & relatives had been notified of his very critical condition. 6 Am. Continues to sink rapidly. 7.20 Am. Died.

Patients relatives were notified of his death. Body sent them for burial, as per their instructions. -

— Died —

Personal and Medical History of John Burger

LIBERTY, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3753.
Residence, Goodhue, Minn.
Date Admission, 19th June 1894. –
Admitted by, Dr Phelps. Hour, 7 PM.
How Sent, O.D. Anderson, Jof P, Goodhue County
Sex, Male.
Age, 76.
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Carpenter
Degree Education, not stated –
Profession Religion, Claims to be a Church member
Habits, nothing known as regards these
Nativity, Germany —
Physicians Committing, Geo. C. Welzer and Bruno Jacking
Correspondents, Dr Overholt — and Mr A. T. Kjos of Kenyon Minn

No. for Year, 323
Insane Relatives, not known, if any heredity
Cause Exciting, not known
Cause Predisposing, not stated – chronic –
Form,
Accompanying Bodily Disorder, none
Suicidal or Not, not stated
Date of this Attack, not known
Duration, not known
No. of Attack, not known.
No. of Admissions, 1st
Age First Attack, not known.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Eddy Dr. Ely; June 21/94 – MENTAL CHARACTERISTICS.

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

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

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

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

GENERAL DESCRIPTIVE REMARKS:

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

DELUSIONS:
Systematized or Not,
Special Subjects, } none noted
Transitory or Not,

HALLUCINATIONS: none brought out
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent –
Voluble or Reticent, reticent –

Personal and Medical History of John Burger

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4in WEIGHT, 116 lbs. NUTRITION, not very Good –
WOUNDS OR ABNORMALITIES, see "S. R." on next page
TONGUE, Tremors, marked Coatings, large, flabby, slight Coating Promptness Movement, prompt
PUPILS, Equality, equal Size, normal
Response Light, yes Accommodation, ye
SIGHT, seems fair
HEARING, – Good –
COORDINATION, Arms, finger to nose, eyes shut, no incorrectness –
Legs, standing eyes shut, stands quite firm
TREMORS, Hands, some Tongue, yes
Facial Muscles, yes General, —
REFLEXES, Patellar, equal – about 8 or 9 –
Other Reflexes,
ARTICULATION, Hesitating, good Slurred, foreign accent
FACIAL EXPRESSION, blank
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.,
CRANIAL MEASUREMENTS,

Records

HISTORICAL.

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

Personal and Medical History of John Burger

1894

FOREST, FULLER & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff, W. J. Goodfellow, with following history, which is rather meagre. As to his habits, any insane relatives, cause of attack, when 1st symptoms appeared, number of attack, history of any bodily disease or head-injury, if under medical treatment, nothing is known. — Form of attack is chronic; there is no accompanying bodily disorder. Insanity now manifested as to subject in particular. Patient has shown no disposition to injure others; if suicidal, is not stated. As to any filthy or destructive habits, cannot be ascertained. Has been kept in confinement for 2 nights. Patient was found in the streets in Kenyon; acted strangely & was examined by Dr. Overholt who pronounced him insane. — " " " " "

June 19 On admission, was put on B.3 (S.A. Complexion dark; hair dark brown; eyes brown; condition of skin good; no marks, scars or bruises noted; bodily condition dirty. Behavior good). Pulse (taken upward) 74.
" 20 R 20. T 98.6. June 20/94. Was restless for 2 hours, but slept 7 hours, last night. AM Pulse 78 R 20. T 98.6. Appetite fair; bowels regular; no coughs noticed; Behavior is very good; he is very quiet. No complaints or injuries to report.
" 21 " June 21/94. Slept 8 hours, restless about 2 hours, last night. AM Pulse 74. T 98.8. June 22/94. Am. P 72 T 98.6.
" 23 June 23/94. Restless 3 hours, Sleeping 6 hours, last night. Appetite fairly good; bowels apparently regular. Is somewhat restless, today. Is slouchy & untidy in appearance.
" 24 June 24/94. Slept poorly, only 4 hours, last night. Appetite good; bowels regular.
" 25 June 25/94. Restless 5 hours, sleeping only about 4 hours, last night. Is restless by day; does not appear to be contented unless walking about; has to be watched very closely, when out walking as he is always trying to "sneak" away.
" 26 June 26/94. Was restless, also noisy, for 6 hours, during the night, sleeping but 3 hours. Appetite continues good; bowels regular. Continues quite restless, by day.
" 30 June 30/94. Continues restless at night, but has been sleeping from 5 to 7 hours, in each of past few nights. Appetite continues good; bowels regular. Still restless & uneasy, by day. Talks to himself a good deal. Requires Constant watching, while out on the grounds. (Attempted to run away on the 28th inst, while out walking).
July 1 July 1/94. Slept only 5 hours, being restless 14 hours, last night. Appetite good; bowels regular. Behavior, by day, does not change any. July 2/94. Rested poorly, again, last night sleeping only 4 hours, or so. —
" 3 July 3/94. More restful, sleeping 7 hours, last night. Summary. Patient is restless & contrary. Does not seem to realize much of anything; very discontented & uneasy; Continually watching for an opportunity to escape. Talks incoherently & to himself, a good deal. To all appearance, does not seem to have much mental power. Slouchy & untidy about clothing. Habits are filthy; he does no work. —
" 4/8 July 4/94. Wt 120 pds. (a slight gain); Pulse 65. July 6/94. Slept only 4 hours, was restless 8 hours, last night.
" 11/31 July 11/94. Was restless all night. July 31/94. Occasionally restless at night, & sleeping poorly. Appetite is fairly good; bowels regular. Is restless & troublesome by day: talks incoherently: does not seem to have any idea of what is going on around him: is slouchy in dress & appearance: filthy in habits. Is somewhat quieter than he was at first; does not realize what is said to him or when he is spoken to. Does no work.
Aug 1/37 Aug 1/94. Wt 118 pds. Pulse 64. Aug 31/94. On nearly ½ the nights, this month, patient has been restless for from 5 to 8 hours each night; sometimes noisy. Has slept very poorly, (only 3 or 4 hours each night). Is restlessly behaved by day: hardly ever speaking to any one, & when he does it is in an incoherent manner. He does not seem to realize anything & apparently mental power is very much affected. He is violent; does no work. Personal habits are filthy.
Sep 3/17 Sep 3/94. Wt. 120 pds. Pulse 78. Sep 17/94. Struck by Patient Rhodes, causing nose-bleed. Sep 30/94. No special change.
Oct 31/50 Oct 1/94. Wt 125 " " 80. Oct 31/94. Keeps about the same: no particular change to note.

Personal and Medical History of John Burger

1894

Nov 1 Nov 1/94. Wt 129 pds. Pulse 72. Dec 1/94. Wt 129 pds. Pulse 78. Jan 3/95. Wt 129 pds. Pulse 88.
Dec 1 Jan 31/95. Appetite good; bowels regular. Is restless & ill-at-ease; generally wandering around on hall, as if lost; talks but very little & incoherently. Habits clean, but he is slouchy in dress. He does not work any —
Jan 31/95 Feb 1/95. Wt 126 pds. Pulse 72. Feb 28/95. Quiet; hardly ever speaking to anyone: will, at times, strike other patients when passing him in hall, or sitting alongside of him. Slouchy in dress: rather filthy in habits. Mar 1/95. Was
Feb 28/95 transferred to Annex today. March 30/95. No change noticeable. April 30/95. Patient is quiet. Does
March 1 no work, otherwise, about the same as above described for some months past. —
" 30 May 1/95. Keeps in quite good flesh. During this quarter, there has been no special change to note.
Apr 30 Patient has been quiet, but stubborn, at times. Indolent & vile; does no work: seldom speaks:
May 1/95 seems rather dull & stupid. Habits clean, but dress untidy. Health apparently good. —
June 30 During this quarter, patient has been quiet: stupid & demented: Idle & does no work:
July 31 sleeps a good deal of the time: habits clean but dress untidy: Health is good. —
Aug 1/95 Nov 1/95. Wt 130 pds. Pulse 100. Nov Dec & to Jany 31/96. During this period patient's condition has
Sept 30/95 shown no change. Quiet; stupid: seldom speaking: Indolent & vicious at times. Health good.
Oct 31 Feb 1/96. Wt 133 pds. Pulse. Feb March & to April 30/96. No change noticeable: quiet & seems stupid: no work:
Nov 1/95 sits in one place, most of time: seldom speaking unless spoken to: Habits rather filthy: Demeanor: Health apparently good.
Dec 1/95 to Jan 31/96 Summary. Nurses Notes by Dr. Phelps. A chronic case: usually well behaved, rather stubborn: Since November '96 has been at Annex: No bodily illness noted: Wt. from 129 to 133 lbs.
Feb 1/96 to April 30/96
May 1/96 to Aug 1/96
Aug 3/97 '97 Wt. 127th Oct 31/97. Health good: Untidy in habits: Works on farm: Quite demented:
Jan 28/98 Eloped while at work. 25 Returned from Chatfield - Jan 31/99 At present doing no work: Behavior & general condition same as before. Feb 1 July 31 (Dr. Warrens) Appetite good: Behavior good: Sleeps well: No mental change.
Aug 1900 Jan 31/1900. (Dr. Chapple) No change during period. Physical condition good: Behavior inclined to be
Jan 31 mischievous: Quite deluded & demented. Joins in amusements but does no work: Is un-
Feb 1 tidy in habits. Feby 1900. Wt 122th Oct. March 10. Ten days' temperature, shows very slight varia-
March 10 tions. May 19. Ran away from Mattress-Shop: was returned from City. July 20. Vaccinated: result good.
July 31 No change: physical condition quite good: is very demented: silly in manner: addicted to masturbation.
Aug 1 untidy in habits: does no work. Is contrary, & mischievous & liable to run away. Aug 1. Wt. 118 #
Sep 10 1900 Transferred to D.W. Nov 30. No change to note: Jany 31/1901. Very little change: Health fairly good: -
Jan 31 habits rather untidy: is restless; wanders about ward: sings noisily: watches for an oppor-
tunity to elope. Irrational, and rather silly in conversation: plays games but does very little work. -
Feby 28/1901 Transferred to D.W.: Feby 6. Circumcised for phimosis. Feby 8. Up in ward - Feby 11. To D.W.
May 1901 Wt 117th Aug 1. Wt 118# - Nov 1. Wt 113# - Jany 31/02 No change mentally: very talkative: silly:
Jan 31 1902 delusional: occasionally writes a letter (in German): does scarcely any work. "Wants to be sent home &c" - Habits rather slouchy. Jany 31/03. Severely in habits: does little or
Jany 31 1903 nothing: talks very incoherently & silly: is fairly peaceable, however, but occasionally becomes very violent. —

Personal and Medical History of John Simenson

HERBERT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3754.
Residence, Faribault, Minn.
Date Admission, 20th June 1894.
Admitted by, Dr. Eby Hour, 5.00 PM.
How Sent, R. A. Mott. Jof P, Rice County
Sex, Male.
Age, 65.
Civil Condition, married.
Children, One
Age Youngest Child,
Occupation, Cabinet-maker
Degree Education, not stated
Profession Religion, Lutheran
Habits, are the very best
Nativity, Norway
Physicians Committing, D. M. Cool and J. S. Seeley
Correspondents, Miss Anna Simonson (his Daughter)
E. 622 Mootes Ave. Spokane, Wash.
(See slip attached)

No. for Year, 324
Insane Relatives, none; no history of heredity.
Cause Exciting, not known
Cause Predisposing, not stated (previous attack)
Form,
Accompanying Bodily Disorder, None
Suicidal or Not, Yes: admits he intends to kill himself.
Date of this Attack, 2nd (one 20 years ago)
Duration, Probably short (of this attack)
No. of Attack, 2nd (one 20 years ago)
No. of Admissions, 1st here (in St Peter for 2 years)
Age First Attack, about 45.
Time of Leaving, Sept. 19. 1899
Time in Hospital, 5 yr. 2 m. 30 d.
Result, Died Dying to brain-Traumatic.

EXAMINATION ON ADMISSION.

Eby by Dr. Eby, July 10/94 MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Yes
DELUSIONS:
Systematized or Not, of persecution
Special Subjects, of self & family
Transitory or Not,
HALLUCINATIONS: "of hearing"
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent and
Voluble or Reticent, quite free —

Simenson

Copy of notice of hearing petition for appointment of Annie Helen Simonson as guardian for John Simonson, insane, served upon Dr A.T. Kilbourne, Med. Supt. & filed with Commitment papers July 20th 1899

Rice Hosp 3754

Description of John Simonson at time of death. 27 285

Small old scratch on left shoulder.
Left hand & wrist, nearly entire surface of back inward suffered to have been covered from trying to defend himself from blow.
Abrasion on left elbow.
Bruise & few small scratches on right elbow & arm.
Discoloration on inner surface of right ankle.
Small sore on upper lip.
Discoloration below right shoulder caused from lying in bed.
Discoloration at base of spine, starting of bed sore.
Bunch on back about size of goose egg.
Two scars on head.
One tooth missing on upper jaw.

SSION.—(Continued.)

CS.

NUTRITION, Quite good.
Promptness Movement, prompt
Normal
Yes

shut, Quite good.
Quite steady.
ume
ume —

John
Ray Swepi accent

Careless,
Irregular,
Poor,
Irregular,
TEMP.,

RICAL.

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

Personal and Medical History of John Simenson

SHERMEY, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3754.
Residence, Faribault, Minn.
Date Admission, 20th June 1894.
Admitted by, D. Eby Hour, 5:00 PM.
How Sent, R. A. Mott. Jof P, Rice County
Sex, Male.
Age, 65.
Civil Condition, married.
Children, One
Age Youngest Child,
Occupation, Cabinet-maker
Degree Education, not stated
Profession Religion, Lutheran
Habits, are the very best
Nativity, Norway
Physicians Committing, D. M. Cook and J. S. Seeley
Correspondents, Miss Anna Simonson (his Daught
(See slip attached) E. 622 Wooster Ave. Sp

No. for Year, 324
Insane Relatives, none; no history of heredity.
Cause Exciting, not known
Cause Predisposing, no[illegible]t. N (previous attacks)
Form,
Accompanying Bodily D[illegible]
Suicidal or Not, Yes:
Date of this Attack
Duration,
No. of Attac[illegible]
No. of Ad[illegible]
Age F[illegible]
Tir[illegible]

EXAMINATIO

Eby D. Eby, July 10/94 MENTA

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

HALL[illegible]
ILLUSIONS
CONVERSATION.
Coherent or Incoherent, Coherent and
Voluble or Reticent, Quite free

There are in, but rooms occupied.
Old rear one right reborn.
Old rear one right ankle.
" " left hip.

copy of notice of hearing petition for appointment of Annie Helen Simonson as guardian for John Simonson, insane, served upon Dr A.T. Kilbourne, Med. Supt. & filed with Commitment papers July 20th 1899

In case of death of John Simonson notify undertaker Ray of Faribault - Swede daughter.

Aug. 99.

SSION.—(Continued.)
OS.
NUTRITION, Quite good.
page -
Promptness Movement, prompt
Normal
Yes

CORDINATION, Arms, Finger to nose, eyes shut, Quite good.
Quite steady.
none
none -

Sweps accent

OPHTHALMOSCOPIC EXAM.,

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

Record

CRANIAL MEASUREMENTS,

HISTORICAL.

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

Personal and Medical History of John [illegible]

HERBERT, PUCKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3754.

Residence, Faribault, Minn.

Date Admission, 20th June 1894.

Admitted by, D. Eby Hour, 5.00 P.m.

How Sent, D. A. Mott. Jo P. Rice County

Sex, Male.

Age, 65.

Civil Condition, married.

Children, One

Age Youngest Child, —

Occupation, Cabinet-maker

Degree Education, not stated

Profession Religion, Lutheran

Habits, are the very best.

Nativity, Norway

Physicians Committing, D. M. Cook and J. S. Seeley

Correspondents, Miss Anna Simonson (his Dau

(See slip attached) E. 622 Twenty Ave.

EXAMINAT

Eby & Eby, July 10/94 MF

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish,

MEMORY:

Past Events, Fair

Recent Events, Fair

Special Subjects,

PERCEPTIVITY:

Alert or Dull,

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Poor

Own Mental State, Impaired

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

[illegible] tion

[illegible] family

HALL [illegible] hearing

ILLUSIONS [illegible]

CONVERSATION.

Coherent or Incoherent, Coherent and

Voluble or Reticent, quite free —

Personal and Medical History of John Simenson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 2 in WEIGHT, 132 lbs NUTRITION, Quite good.

WOUNDS OR ABNORMALITIES, see 5. D. next page —

TONGUE, Tremors, none Coatings, Coated. Promptness Movement, prompt

PUPILS, Equality, Equal Size, Normal

Response Light, Yes Accommodation, Yes

SIGHT, Impaired

HEARING, Good

COORDINATION, Arms, Finger to nose, eyes shut, quite good.

Legs, Standing, eyes shut, Stands quite steady.

TREMORS, Hands, Slight Tongue, none

Facial Muscles, Slight General, none —

REFLEXES, Patellar, Equal; about 1 or 2 —

Other Reflexes,

ARTICULATION, Hesitating, Good Slurred, Swedish accent

FACIAL EXPRESSION, Depressed

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, 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,

1894

This patient was brought here, in due form, by a deputy-Sheriff, with the following history. His habits are the very best. There is no hereditary history. Cause of this attack, which is probably recent, is not known. Form of attack is paroxysmal. There is no accompanying bodily disease. First symptoms of the disease were manifested about 20 years ago, when he had a similar attack, supposed to be caused by loss of Employment, and he was in Hospital at St Peters, Minn., about 2 years. This is then probably, the 2nd attack, as there have been none since, until the present time. Insanity is now shown by fits of anger, and he will seize any object within reach & bite & endeavor to destroy it. Has never tried to injure persons. He has threatened to kill himself, but has never made an attempt to carry out the threat, yet he admits he intends to kill himself. At one time, in a fit of anger, he tore his shop-apron with his teeth. There is no history of any bodily disease &c or injury to head. When family have left the house, they have, usually, locked him in his room. He took some medicine, sent him from Chicago, during the past winter; no one here knows what it was, or its effects. — " —

June 20 On admission, was put on B² (S.R. Complexion light; hair, dark (gray streaked); eyes Blue; Condition of skin clean; has a scar from felon, on right thumb; also a lump on back: bodily Condition, clean; has some varicose veins on right ankle; also very dark colored behavior quiet). P 104 R 21 T 99⅘

" 21 June 21/94. Fairly restful, sleeping 6 hours, last night. AM. Pulse 96 R 19 T 100⅖. Appetite fairly good; bowels Genually free. Behavior is good. He talks but little; no delusions noted. no cough observed.

" 22 PM. Pulse 104. R 21. T 100. No Complaints or injuries to report. He went out walking today. June 22/94. Slept 7 hours, last night; was quiet. AM. Pulse 102. R 20. T 100; Appetite still good; behaves well; talks when

" 23 questioned; no delusions yet noticed. PM P 100 " 20 " 99.8. June 23/94. Rested well & slept 7 hours, last night. AM. Pulse 98. R 20. T(a) 99.8. Is restless, today. Answers questions but timid & seems somewhat weak.

" 24 PM " 100 " 19 " 100. Complains that he cannot sleep, at all. June 24/94. Slept 6 hours, during the night. Is again restless, today. Pulse 100. T(a) 99.6. June 25/94. Restless for 4 hours, Sleeping but 5 hours, last night. AM. Pulse 102. Restless again today. Shows delusions. Says "some one is after him to

" 26 put him in jail". Appetite only fairly good. June 26/94. Restless 2 hours, but Sleeping 6 hours, last night. AM. Pulse 98. Still shows delusions of fear & persecution. Says "he wants to stay here, for is afraid they

" 27 are going to take him to Jail." June 27/94. Rested fairly well, sleeping 7 hours, last night. AM. P 88. Appetite good. Talks but little; makes no complaint. June 28/94. restless 2 hours, sleeping 6 hours, last

" 29 night. AM. Pulse 90. Is very restless; walking about most of the time. June 29/94. Very restless for 6 hours, last night, Sleeping only about 2 hours. Restless & very uneasy. Tried to take a table knife;

" 30 says "he wants to kill himself". Pulse 88. June 30/94. Fairly restful; slept 7 hours, last night. Restless ly-day, walking the floor, most of the time. Still "wants to kill himself". Pulse, this morning, 88. —

July 1 July 1/94. Was restless, the greater part of the night; slept only 4 hours or so. AM. Pulse 98. Tried to

" 2 cut his throat on a wire fence today; making some slight scratches. July 2/94. Restless 5 hours and slept but 3 hours, last night. AM. Pulse 96. Very restless today. Appetite only medium. Wt. 123 ℔ (has

" 3 lost 4 pounds in weight, since admission). July 3/94. Less restless last night; slept 6 hours. AM P 96.

" 4 Very restless, again, today. Appetite improving. July 4/94. Slept 7 hours, during the night. AM P 92. Restless, walking aimlessly about the hall, today. Appetite good. Still shows Delusions (as above)

Summary. Has been, ever since admission, very restless by day, walking about nearly all the time. So much Depressed, at times, "wants to kill himself". (Expresses this desire quite frequently). Still manifests

1894

July 1 delusions. Says "some one is going to put him in jail". Delusions seem to be both "of fear" and

27-285
37-54

DETAILED HISTORY OF SICKNESS OF MR. John Simenson
DIAGNOSIS.

A. L. E.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
Aug 1	7	5	60	56					
2	7	5	60	48					Weight 113½ lbs.
3	7	5	60	50					
4	7	5	60	62					Patient has not left ward unless at times were sent out on walks and ask when he is going to be released
5	7	5	60	60					
6	7	5	60	48					
7	7	5	64	56					
8	7	5	70	78					Appetite good. Is working in Dept of Mechanical Arts at times. Appears well enough to be up.
9	7	5	60	66					
10	7	5	76	88					2 P.M. report ward cleaned
11									Appetite good. Bowels regular. Goes out on grounds.
15									Seems to think he is going to be released tomorrow. Is always asking what is going to be done to him. Appetite good. Bowels regular
30									Appetite good. Bowels regular. Working day days on B.H.
31									Seems to think some one is going to kill him. Sleeps from 6 to 7 hours nightly.

— carried to 275 —

DETAILED HISTORY OF SICKNESS OF MR. John Simenson
DIAGNOSIS.

1894 C 2.

DATE	HOUR AM	HOUR PM	PULSE AM	PULSE PM	RESP. AM	RESP. PM	TEMP AM	TEMP PM	
July 16		5		64		24		100	2 P.M. Cargo on two of from bed. Put to bed at 5 for supper.
17	7	5	60	66		24		100.4	Night. Complains of his stomach. Out of bed a number of times during the day. 1 A.M. 12.30 6.30 Medicine. Appetite good.
18	7	5	70	66	28	22	99.8	100	Complains of pains in stomach. 12.30 6.30 Medicine. 7 P.M. Dose for bowels.
19	7	5	60	57		26		100	7 12.30 6.30 Medicine.
20	7	5	66	56					7 12.30 6.30 " " Appetite good.
21	7	5	64	48		24		99	7 12.30 6.30 " "
22	7	5	66	50					7.00 12.00 " "
23	7	5	60	54					7.00 12.00 " " 7.30 A.M. Bath.
									3 P.M. Bowels moved.
24	7	5	60	48					7 A.M. Medicine. Appetite good.
25	7	5	64	52					Complains of pain in Stomach. Bowels moved without Coction. Night. Was quite restless. needed 1 night. Out of bed frequently.
26	7	5	66	48					Appetite good.
27	7	5	70	52					Sleeps on an average of 2 hrs nights.
28	7	5	64	48					
29	7	5	60	50					Seems to think his family is going to leave. Get out of bed frequently and talks about them
30	7	5	60	48					
31	7	5	60	60					7.30 A.M. Bath

delusions. Says "some one is going to put him in jail". Delusions seem to be both "of fear" and "of persecution". Physical condition seems fairly Good for a man of his age. Habits, temperate, Chastity. July 11/94. Complains of headache: given medicine. [illegible] has been

[illegible] left the house, they [illegible] with his teeth.

[illegible] from Chicago, during the past [illegible] causes seem [illegible] there.

[illegible] light; hair, dark (gray streaked); eyes blue; condition [illegible] him, during [illegible] right thumb; also a lump on back: bodily condition clean, [illegible] regularly. [illegible] right ankle; also very dark colored; behavior quiet). P 104. R 21. T 99.8. [illegible] Bowels have [illegible] restful, sleeping 6 hours, last night. AM. Pulse 96. R 19. T 100.2. Appetite [illegible] better, Nearly [illegible] bowels Genually free. Behavior is good. He talks but little; no delusions noted. No cough observed. dispatio. — [illegible] PM. Pulse 104. R 21. T (a) 100. No complaints or injuries to report. He went out walking today. June 22/94. Slept 7 quietly, [illegible] hours, last night; was quiet. AM. Pulse 102. R 20. T (a) 100; Appetite still good; behaves well; talks when " 23 questioned; no delusions yet noticed. PM P 100 " 20 " 99.8. June 23/94. Rested well slept 7 hours, last night. AM. Pulse 98. R 20. T (a) 99.8. Is restless, today. Answers questions but mind seems somewhat weak. " 24 PM " 100 " 19 " 100. Complains that he cannot sleep, at all. June 24/94. Slept 6 hours, during " 25 the night. Is again restless, today. Pulse 100. T (a) 99.6. June 25/94. Restless for 4 hours, Sleeping but 5 hours, last night. AM. Pulse 102. Restless again today. Shows delusions. Says "some one is after him to " 26 put him in jail". Appetite only fairly good. June 26/94. Restless 2 hours, but Sleeping 6 hours, last night. AM. Pulse 98. Still shows delusions of fear & persecution. Says "he wants to stay here, but is afraid they " 27 are going to take him to jail". June 27/94. Rested fairly well, Sleeping 7 hours, last night. AM. P 88. " 28 Appetite good. Talks but little; makes no complaints. June 28/94. Restless 2 hours, Sleeping 6 hours, last " 29 night. AM. Pulse 90. Is very restless; walking about most of the time. June 29/94. Very restless for 6 hours, last night, Sleeping only about 2 hours. Restless & very uneasy. Tried to take a table knife; " 30 says "he wants to kill himself". Pulse 88. June 30/94. Fairly restful; slept 7 hours, last night. Restless July 1 ly, walking the floor, most of the time. Still wants to kill himself". Pulse, this morning, 88. — July 1/94. Was restless, the greater part of the night; slept only 4 hours or so. AM. Pulse 88. Tried to " 2 cut his throat on a wire fence today; making some slight scratches. July 2/94. Restless 5 hours and slept but 3 hours, last night. AM. Pulse 94. Very restless today. Appetite only medium. Wt 123 pd (has " 3 lost 4 pounds in weight since admission). July 3/94. Less restless last night; slept 6 hours. AM P 96. " 4 Very restless, again, today. Appetite improving. July 4/94. Slept 7 hours, during the night. AM Pgr. Restless, walking aimlessly about the hall, today. Appetite good. Still shows delusions (as above)

Summary. Has been, ever since admission, very restless by day, walking about nearly all the time. Is much depressed, at times. "Wants to kill himself". (Expresses this desire quite frequently). Still manifests

Personal and Medical History of John Simenson

1894

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

June 20

" 21

" 22

" 23

" 24

" 25

" 26

" 27

" 28

" 29

" 30

July 1

" 2

" 3

" 4

Summary. Has been, ever since admission, very restless by day, walking about nearly all the time, & much depressed, at times. "Wants to kill himself". (Expresses this desire quite frequently). Still manifests

Personal and Medical History of John Simenson

1894

July 14 (cont'd) delusions. Says "some one is going to put him in jail". Delusions seem to be both "of fear" and "of persecution". Physical condition seems fairly good for a man of his age. Habits, as a rule, cleanly.

" 15 July 11/94. Complains of headache; given medicine. July 15/94. For the past 3 days, patient has been complaining of feeling badly; appetite has been poor. Has been in bed, today; movement of bowels causes severe pain in him. Was transferred to C2 (the "Sick-Ward") at 2 PM; was put to bed there.

" 16/17 ate a fair supper. July 16/94. Still in bed. July 17/94. Complained of stomach troubling him, during the night. Was out of bed, a number of times, during the day. Appetite is good. Takes medicine regularly.

" 18/23 July 18/94. Still complains of pains in stomach. Was given medicine for bowels. July 23/94. Bowels have been badly constipated; they moved today. Appetite continues good. July 23/94. Was quite restless, nearly all night & out of bed frequently; Complains of distress in stomach; bowels are again constipated. —

" 31 July 31/94. Sleeps, on an average, 5 hours nightly. Is steadily confined to his bed. Lies there most quietly, of late; manifests delusions; "seems to think his family is going to be killed; gets out of bed, continually, and asks about them" — Bowels are constipated badly, at times. Appetite keeps good.

Aug 1/4 Aug 1/94. Wt 113½ lbs. (in bed). Aug 4/94. Still confined to his bed. Is quite restless, at times.

" 8 Will get up, run out in hall and "ask when he is going to be killed?". Aug 8/94. Is out of bed

" 10 almost all the time. Appears well enough to be up. Aug 10/94. Is up, Dressed & out in the hall.

" 11/15 Aug 11/94. Goes out in the grounds, today. Aug 15/94. Patient still holds delusions. Seems to think he is going to be harmed in some way. — Is always asking "What is going to be done to him?"

" 20/31 Aug 20/94. Up daily. Sees in B2 in daytime. Aug 31/94. Sleeps from 6 to 7 hours, nightly. Remains up & about daily; still holds to his delusions, as mentioned above. Appetite good; bowels regular.

Sep 1/4 Sep 1/94. Wt 126½ lbs. — Has made a small gain in flesh. Sep 4/94. Appetite good; bowels regular; he goes out walking, almost every day. Has delusions still. Is always "thinking" some one is going to hurt him". Sep 11/94. Sleeps fairly well, during night. Talks freely. At times, is bothered with a pain in stomach. Sep 19/94. Transferred to B1, today. Sep 23/94. Has been complaining of head-ache the past 3 days. Is taking iron & quinine, every 2 hours. Sep 30/94. Appetite improving; bowels regular. Behaves well, though he still shows delusions. "Fears being killed & injured" —

" 15

" 19/23

" 30

Oct 1/5 Oct 1/94. Wt 124 lbs. Pulse 66. Oct 5/94. Again complains of headache. Given medicine for same.

" 19 Oct 19/94. Was thrown down by a fellow-patient (B. Anderson) and a small lump raised on his forehead.

" 31 Oct 31/94. Behaves well; reads some. Still manifests delusions. Now "thinks his wife has been killed" — Talks freely — Physical condition has much improved. Is less complaining, of late.

Nov 2 Nov 2/94. Wt 124 lbs. Pulse 82. — Dec 1/94. Wt 127 lbs. Pulse 80. Dec 31/94. Is, at times, very restless & walks the floor a good deal. Jan 2/95. Wt 124 lbs. P 82. Jan 31/95. Still

Dec 1/31 (1894)

Jan 1/31 walks the hall a good deal. Holds to his delusions; "thinks his wife and girl are going to be killed". He makes no complaints. Does not go out walking. Habits are cleanly. —

Feb 1/15 Feb 1/95. Wt 126 lbs. Pulse 80. Feb 8/95. Walks in hall. Gradually growing more feeble. Shows delusions.

" 28 "Think his wife has been murdered". Feb 28/95. Restless; walks the hall, a good deal. Still deluded. Does not read or participate in any recreation. Is clean but rather untidy in dress.

March 1/5 March 2/95. Wt 125 lbs. Pulse 84. Mar 3/95. Small sore on leg. Look as if an abscess.

" 5/31 Dressed. Mar 8/95. Leg dressed. Mar 31/95. Still holds to his delusions. "Thinks his folks are going to be killed, & that he will be put in Jail". Seems growing much weaker. Apl 1/95. Wt 127½ lbs. P 88. Apl 30/95. No change.

Apl 1/30

— carried to 275 —

Personal and Medical History of Frank L. Schott

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3756.
Residence, Warren, Winona County, Minn
Date Admission, 25th June 1894
Admitted by, D. C. B. Ely Hour, 4 30 PM.
How Sent, H. L. Buck, Jct P. O., Winona County.
Sex, Male
Age, 33 years
Civil Condition, single
Children, —
Age Youngest Child, —
Occupation, Farmer
Degree Education, Probably Fair
Profession Religion, not a church member
Habits, Good
Nativity, Warren, Winona County, Minn
Physicians Committing, D. A. Stewart & H. J. English
Correspondents, A. H. Schott, Stockton P. O. Winona Co. Minn

No. for Year, 326.
Insane Relatives, No history of heredity.
Cause Exciting, not known
Cause Predisposing, not given.
Form,
Accompanying Bodily Disorder, Suppressed Eruptions
Suicidal or Not, He threatens suicide —
Date of this Attack, June 16/94
Duration, about 9 days. —
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 33 years
Time of Leaving, 14th June 1895
Time in Hospital, 11 mos & 20 days
Result, Discht Nov 6/95 — Unimproved

Ex'd by Dr. Ely June 26/94.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, Sluggish
MEMORY:
Past Events, probably good
Recent Events, Fair
Special Subjects,
PERCEPTIVITY: Dull
Alert or Dull, —
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State, Impaired
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
When percussing chest, he complained of pain when percussing left side: nothing further was brought out. The location of the pain varied so that I think the pain was not real. —

EMOTIONAL STATE:
Normal, Calm,
Indifferent, Yes
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, not of persecution
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent.
Voluble or Reticent, reticent.

Personal and Medical History of Frank L. Schott

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9½ WEIGHT, 140½ lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES, See "S. R." next page.
TONGUE, Tremors, Marked tremors Coatings, Heavy white coat - tongue large & toothmarked - Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Finger to nose, eyes shut, no incoordination
Legs. Standing, eyes shut, Stands steady. -
TREMORS, Hands, Yes, slight — Tongue, Marked
Facial Muscles, none General, none
REFLEXES, Patellar, Equal — about 8 —
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Blank -
SENSIBILITY, normal
HEART, Sounds — good
LUNGS, Sound — 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,") no hereditary history could be gotten from patient, at time of examination
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,

Personal and Medical History of Frank L. Schott.

1894 GIBLIN, FIDLAR & STAUBERS, DAVENPORT, IOWA.

This patient was brought here by Sheriff Gay, with the following history of case. There is no history of insanity in family. Cause of this attack is not known; form of attack is acute. He has suppressed Eruptions. First symptoms of disease were manifested June 18/94 by talking incoherently; thinking people were trying to do him harm; suspicious. This is 1st attack. Insanity is now manifested as above stated. Patient has shown no disposition to injure others: but he threatens suicide. Has no filthy or destructive habits: he has been kept in restraint, at home, about one week. Was under medical treatment, for a few days, but no effects from it.

June 25 **On admission**, was put on B^2 (J. R. Complexion dark; hair, dark brown; eyes blue; condition of skin good; has one mole on left hip; also some scars on left leg: bodily condition clean. There are some scratches on right cheek. behavior is good). June 26/94. Was restless for 7 hours + slept only 1 hour, last night. Ate refused — Appetite is poor: bowels constipated but refuses medicine. Manifests delusions; is afraid of being killed: Today, imagined some one was going to shoot him; tried to take off his clothes + became violent; was
" 26 transferred to C^4. June 27/94. Patient was noisy + restless, all night + very violent, but quieted down
" 27 before breakfast. Appetite is fair, but bowels are still constipated. AM. Pulse 88. R 24. Ate refused. No cough.
" 28 Still has delusions + fears of being shot. June 28/94. Rested quite well + slept 7 hours, last night. — AM. Pulse 70 (slightly intermittent); R 26. Ate 90%. He has now quieted down considerably and seems to realize his position. Talks rationally; appetite still poor; bowels moved this morning;
" 29 no cough has been observed, but he complains of his left breast paining him. June 29/94. Slept nine hours last night: Complains of soreness, all over his body. Appetite still poor. Pulse 69. R 28. Was quiet + was out walking both forenoon + afternoon, but about 2.30 PM. he became excited + had to be placed in seclusion.
" 30 Still imagines he is going to be shot or hanged. June 30/94. Was somewhat restless but slept 5 hours, last night. AM. Pulse 92. (Strong + regular). R 22. Appetite poor; refused breakfast: says "it is poisoned" — bowels constipated. Is quiet + docile; working in the ward this morning; still shows "delusions of fear". —
July 1 July 1/94. Rested quite well, sleeping about 7 hours, last night. AM. Pulse 72. R 18. Appetite improving, and bowels move more freely. Is quiet but very nervous + "afraid of being killed". Talks incoherently.
" 2 July 2/94. Very restless + slept only 4 hours, last night. AM. Pulse 76. R 19. Appetite poor; still imagines his food is poisoned; bowels fairly free. Quiet but very nervous. Talks incoherently. Still
" 9 Complains of pain in left breast. July 9/94. During this, the second week of his stay, patient has been more quiet and restful at night, sleeping from 5 to 7 hours, in each. Pulse + respiration have now become about normal. By day, he has been better behaved, less restless; is somewhat more rational, though talk is still incoherent and he still shows delusions. Helps some with ward-work.

Summary. This patient has improved a good deal, both physically + mentally, since admission. He was, at first, restless + excited + in a violent state; refused food, under the delusion that it was poisoned. Imagined he was going to be shot, hanged or injured by some one + these "fears of injury" were quite prominent. Latterly, however, he has become much quieter; the delusions seem to be less vivid + his talk more rational, somewhat, though still incoherent. He now eats well, sleeps well, his bowels are regular, + he is stronger in every way. Works a little in ward, and this seems beneficial to him as it serves to occupy his mind + time + keeps him from
" 31 brooding over his malady. Habits have been cleanly. July 31/94. Appetite is poor: does not much eat. Says "there is poison in everything offered him" (This is one of his delusions) —

Personal and Medical History of Frank L. Schott

1894

July 31 Also "talks of somebody shooting at him". Is very restless of late, + uneasy in ward. Seems still to have these "fears of injury &c" — Also when at meals is restless. Is very anxious to go home —
Aug 1/14 Aug 1/94. Wt 132 pds. Pulse) 76. (Has lost some in weight, since admission). Aug 14/94. Was
" 17/31 visited by his father today. Aug 17/94. Visited by father, again, today. Aug 31/94. Quiet + well-behaved still shows delusions; imagines some one is going to poison him. Is more fearful of this at night, than in the day time. Is very melancholy + talks but little. Works a little in ward. Habits clean.
Sep 1/5/6 Sept 1/94. Wt 133 pds. Pulse 72. Sep 3/94. Visited by sister. Sep 5/94. Visited by father + mother.
" 10 Sep 10/94. As these lower wards are about to undergo repairs + alterations, Patient, with some others,
" 30 was, today, transferred to B^3. Sep 30/94. No change to note, since his coming in this ward (B^3).
Oct 1/31 Oct 1/94. Wt 141½ pds (has gained 8½ pds in flesh, the past month). Pulse 69. Oct 31/94. No change noticable. Reticent; talks but little. Melancholy + depressed. Habits are cleanly.
Nov 1/15 Nov 1/94. Wt 149 pds; Pulse 76. Nov 15/94. Received a black eye, in some manner, unknown
Dec 1 Dec 1/94. Wt 150 " " 83. Jan 2/95. Wt 157 pounds. Pulse 92. Patient has been
1895 Jan 1/31 steadily gaining in flesh, the past 5 months. Jan 31/95. Only occasionally restless + noisy at night. Appetite good; bowels regular; behavior is cranky + stubborn; has hallucinations. Habits clean.
Feb 1/ Feb 1/95. Wt 153 pds. (Still gaining in flesh). Pulse 84. Feb 28/95. No special change. Does no work.
Mar 1/ Mar 1/95. Wt 154 " Pulse 84. Mar 20/95. Body is all covered with small red spots: (Diagnosed as German
" 31 Measles); patient ordered to be isolated at 11 Am. Mar 31/95. At present, isolated, on account of measles. Is getting along nicely. (Isolated 93 hours) — No change + note in mental condition
Apl 1/ Apl 1/95. Wt 154 pds. Pulse 120. Apl 30/95. Appetite good; bowels regular. Behaving at present very
30 good. Talks fairly rationally, better than for some time. But still appears a little silly. Habits clean. Works some
May 1/ May 1/95. Wt 155 pds. Pulse 90. — Visited by friends today. May 31/95. No noticeable change. —
June 1/ June 1/95. Wt 154 " " 90 June 2/95. Made his escape, during the night, having unhooked
12 a screen on his window — Frank Fitzpatrick (another patient) got away at the same time. —
" 13 Due search was made but without avail. June 13/95. Was found out in the country and
" 14 brought back, today. June 14/95. Went home with his father, on trial. —

Discharged

Personal and Medical History of P. R. Linck

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3758.

Residence, St Paul. Minn

Date Admission, 26th June 1894.

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

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

Sex, Male.

Age, 25 Years

Civil Condition, Single

Children, —

Age Youngest Child, —

Occupation, no present occupation

Degree Education, probably fair

Profession Religion, Is a church member

Habits, Good, as far as known

Nativity, Evansville, Indiana.

Physicians Committing, Geo. J. Hanley & J. G. Mackaman

Correspondents, None given in papers

No. for Year, 328.

Insane Relatives, Maternal grandmother insane

Cause Exciting, religious excitation

Cause Predisposing, heredity

Form,

Accompanying Bodily Disorder, Slight elev. of Pulse & Temp

Suicidal or Not, not

Date of this Attack, about 2 months ago

Duration, about 2 months.

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

No. of Admissions, 1st

Age First Attack, 25 Years.

Time of Leaving, Nov. 13th '94

Time in Hospital, 4 mo. 17 ds.

Result, Recovered

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exam by Dr. Eby, June 27/94

MENTAL ACTIVITY:

Clear or Confused, ✓

Quick or Sluggish,

MEMORY:

Past Events,

Recent Events, ✓

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects,

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Cannot thoroughly Examine mental characteristics, as he will not talk to any great extent, at time of examination. Patient appears dull and stupid; does as told, but will not answer questions. —

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, } none brought out.

Special Subjects, }

Transitory or Not, }

HALLUCINATIONS: " "

ILLUSIONS: " "

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Reticent —

Personal and Medical History of P. R. Linck

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in WEIGHT, 143 lbs NUTRITION, Good.

WOUNDS OR ABNORMALITIES, See "S. R." on next page.

TONGUE, Tremors, Slight Coatings, Heavy Coating Promptness Movement, Prompt

PUPILS, Equality, Equal Size, Slightly dilated

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Quiger to rise, Eyes shut, Correct.

Legs, Staggering, Eyes shut, Slight Swaying. —

TREMORS, Hands, Tongue, Slight.

Facial Muscles, General,

REFLEXES, Patellar, Equal — about ng. —

Other Reflexes,

ARTICULATION, Hesitating, Good 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, 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 P. R. Linck

1894

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by deputy Sheriff P. C. Haas, with the following history. Habits are good, as far as known. There is some history of heredity, maternal grandmother having been insane: none others known; supposed cause of this attack is religious excitation; form of attack, at times exalted, and again depressed. There is no accompanying bodily disorder, other than slight elevation of pulse & temperature. First symptoms of the disease were manifested about 2 months ago, by applying for admission into a Catholic religious community, then suddenly leaving & since then being, at times, religiously enthusiastic; again depressed. This is 1st attack, so far as known. Is now, at times, religiously exalted to a high degree, and, again, morose & depressed. Is not disposed to injure others, so far as known; nor is he suicidal: not filthy or destructive, so far as known. There is no history of any previous peculiarities, nor of any bodily disease &/or injury to head. Has been only under temporary confinement to await this examination. If under any medical treatment, is not stated. —

June 26 On admission, was put on C3 (S.R. Complexion light; hair brown; eyes gray; condition of skin good; slight bruises on shoulder & arm; wrists also bruised from effects of hand-cuffs; bodily condition clean; behavior good).

" 27 June 27/94. Was noisy & restless for 6 hours. Sleeping but 2 hours, last night. AM. Pulse 98: R 21. Ta 99.2 Appetite very good; bowels seem constipated: no cough observed; behavior today very good; seems drowsy, part of the time: answers questions only; hesitates before answering. He had a sort of "spell", today, lasting about 5 minutes. During it, there was rapid breathing, rapid fluttering pulsation, eyes closed, tongue protruding. PM. Pulse 100. R 20. June 28/94. Slept but 2 hours, was noisy & restless 6 hours, last night. AM. Pulse 106. R 20. Ta 99. PM. Pulse 98. Appetite good. Bowels still constipated.

" 29 Is quietly behaved. Talks only when questioned; hesitates; whispers to himself. June 29/94. Again, was noisy & restless 6 hours, & slept only 3 hours, last night. AM. Pulse 78. R 19. Ta 98⅘. Otherwise,

" 30 is about as yesterday. June 30/94. Was out of bed all night & slept none; "heard voices outside." — AM. Pulse 80. Continues quietly behaved. Appetite good, but bowels badly constipated; Talks and whispers to himself. Has also "hallucinations of hearing". —

July 1 July 1/94. Rested well, and slept all last night. AM. Pulse 104. Soiled his room &c during the night. Appetite good: bowels have moved. Is quietly behaved. Does not answer, when spoken to, but talks to himself. Still manifests hallucinations, as above. July 2/94. Was out of bed & noisy for 6 hours, and slept only about 3 hours, last night. AM. Pulse 80. Appetite continues good, but bowels are constipated. Patient is not noisy, by day, nor ugly. Talks a good deal to himself; is slow to understand when

" 3 spoken to. He made 2 attempts to run away, today. July 3/94. Out of bed & noisy for 5 hours, and slept only about 2½ hours, last night. AM. Pulse 96. Appetite poor; bowels badly constipated. Is not well behaved today: assaulted a fellow-patient, & made two attempts to escape. — —

" 4 July 4/94. Restless & noisy 6 hours; slept only 2 hours, last night. AM. Pulse 106. Is again ugly & pugnacious, today. Was in seclusion for 10½ hours. Appetite poor; takes milk, after much urging.

" 5 Bowels still badly constipated. July 5/94. Restless 3 hours, but slept 6 hours, during the night. AM. Pulse 88. Appetite poor; takes a good deal of milk. Constipation persists. Is badly behaved,

" 6 and was kept in seclusion 14 hours, today. Is very reticent. July 6/94. Slept well, all night. AM. Pulse 88. Appetite fair, today; bowels have moved. Has been troublesome part of the day & was

" 7 put in seclusion for 6½ hours. July 7/94. Again rested & slept well, last night. AM. Pulse 88. Is quietly behaved, today. Appetite fair; bowels have moved. Talks very little. Still has hallucinations.

Personal and Medical History of P. R. Linck

1894

July 8 July 8/94. Again passed a quiet & restful night. AM. Pulse 86. Appetite now good; bowels move spoken.

" 9 Still very reticent. Has a swollen finger-tip. July 9/94. Slept well, all of the night. Quietly behaved.

" 10 Talks very little; seems stupid & melancholy. Finger has been dressed. July 10/94. Again, slept well, last night. (Room, however, was found dirty, this morning). AM. Pulse 78. Continues to be quietly behaved. Appetite is good; bowels fairly regular. Still talks very little, but prays and whispers to himself, a good deal. Summary. - Behavior, for the first few days, was quiet; he then became restless, contrary & ugly, making seclusion necessary, for 3 days: again became quiet & remains so. When questioned, does not always answer; prays & whispers to himself; manifests hallucinations "of hearing". - Physical condition is apparently good. Is now Eats and sleeps well, but no improvement is noticeable in his mental condition. —

" 13/14 July 13/94. Finger is still much swollen & there is considerable suppuration. July 14/94. Tried to run away.

" 18 July 18/94. For the past 7 nights, patient has been very restless at night; sometimes so, all night & has slept very poorly: His behavior, also, has been very contrary. He seems in a dazed state,

" 20 and still manifests delusions. July 20/94. Slept none last night. Is still in a dazed condition. During day, sits with his head down: very dull & stupid: Eats well, but will not take medicine. Occasionally gets into trouble with other patients: was struck by one of them yesterday & left eye slightly discolored. Habits clean.

" 22 July 22/94. Attempted to run away, today. Is very obstinate, when out walking. Still holds delusions. -

" 27 July 27/94. Behavior has improved, the past few days. Patient also rests & sleeps better, at night. -

" 31 July 31/94. Continues to sleep better, at night. Behavior, by day, is more quiet than earlier in the month. He eats well & bowels are regular. He has "spells" when he seems dazed or stupid. Talks very little, is quite rational, at times, though he still shows delusions. Reads the papers some. Improvement is slow.

Aug 1/9 Aug 1/94. Wt 151½ pds. (a gain of 8½ pds, since admission). Pulse 100. Aug 9/94. Sleeps well. Behavior quiet, since 1st inst. Does not talk much. Has been doing a little work, in the ward.

" 23 Aug 23/94. Has continued about as last described. Hesitates when answering questions: Speaks only when spoken to.

" 25/26 Aug 25/94. Ate no breakfast; will not talk; seems to be in a sort of "spell". Ate no dinner. Aug 26/94. Seems now to be better. Quiet. Talks only when spoken to: then hesitates, and does not always answer.

" 31 Aug 31/94. Appetite good; bowels regular. Physical condition very good. Behavior quiet. He seems dazed or stupid a good part of the time. Habits neat. Does not seem to improve much, mentally.

Sept 1/5 Sept 1/94. Wt 158 pds (a further gain of 6½ pds. in past month). Pulse 64. Sept 5/94. Still very reticent; hesitates before answering questions; does not always answer; generally seems to know what is said to him. Does not seem to take notice of what is going on around him.

" 26/29 Sept 26/94. No particular change to note. Sept 29/94. Again appears to be in a "spell": Ate nothing.

" 30 Sept 30/94. Seems more dull, than usual. Eats nothing; says "he don't feel well". Pulse normal. Appetite was good up to 29th inst, when he refused food. Behavior is quiet. Talks none. Physical condition good. Habits neat. No improvement to note, mentally. —

Oct 1 Oct 1/94. Wt 151½ pds (a loss of 6½ pds. in past month). Pulse 78. Says "he can live without

" 3 eating; had to be urged & commenced to eat, today. Oct 3/94. Refuses to eat or to go to the dining-room; has to be taken to meals, by force: eats a fair quantity of food, after much persuasion, though he is still persistent in his belief that he can live without eating. Talks a little - says "he is tired of life". Bowels regular. Sleeps well. Habits neat & tidy.

(Carried to page 372)

Personal and Medical History of Sumner Stinson

EBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3761.
Residence, Pleasant Hill, Winona Co. Minn
Date Admission, 27th June 1894.
Admitted by, D. Kilbourne Hour, 430 Pm
How Sent, N. L. Buck, Jof P. Winona County
Sex, Male
Age, 46
Civil Condition, married
Children, Yes; six -
Age Youngest Child, —
Occupation, Farmer
Degree Education, probably fair
Profession Religion, not a Church Member
Habits, Good -
Nativity, Maine. —
Physicians Committing, D. A. Stewart & J B McGaughey
Correspondents, A. J. Sinclair Ridgway Winona Co. Minn

No. for Year, 331.
Insane Relatives, none; no history of heredity
Cause Exciting, poor health & functional affection of liver
Cause Predisposing, not stated.
Form,
Accompanying Bodily Disorder, affection of liver
Suicidal or Not, thought of self 3 days ago; propensity active
Date of this Attack, about 8 months ago.
Duration, about 8 months.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 45.
Time of Leaving, Aug. 11th '94
Time in Hospital, 1 mo, 14 ds.
Result, Improved.

Ed'ly D. Ely June 29/94.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Yes
DELUSIONS:
Systematized or Not, not, of persecution
Special Subjects,
Transitory or Not,
HALLUCINATIONS: "of hearing"
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent.
Voluble or Reticent, Reticent patient; answers questions; otherwise, does not say much. He has had some stomach trouble for some time.

Personal and Medical History of Sumner Stinson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9½ WEIGHT, 157¼ pds. NUTRITION, Good
WOUNDS OR ABNORMALITIES, (See S. R. on next page)
TONGUE, Tremors, Slight Coatings, Some Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Good; Finger to nose, Eyes shut, normal coordination.
Legs, Good; Standing, Eyes Shut, Stands Steady. —
TREMORS, Hands, none Tongue, Slight
Facial Muscles, none General, None
REFLEXES, Patellar, Equal; about +.
Other Reflexes,
ARTICULATION, Hesitating, Good. Slurred,
FACIAL EXPRESSION, — Normal —
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, Fair Restless 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 hereditary tendencies

Personal and Medical History of Sumner Stinson

SELKIRT, PIDLAR & CHAMBERS, DAVENPORT, IOWA

1894

This patient was brought hereby Sheriff Gay and brothers in law, with the following history. By occupation, a farmer; habits & morals good: no history of anything of insanity. Cause of this attack is poor health; he also has functional affection of the liver. Form of this attack is depressed. He has been melancholic all winter; a week ago, began to think mobs were after him. This is the 1st attack of insanity now manifested by his thinking he is pursued by mobs. He has shown no disposition to injure others. Is suicidal, however; hung himself three days ago; propensity now active. Has no filthy or destructive habits. He has not been restrained or confined but has been constantly watched. Has been under medical treatment for affection of liver, but not for insanity; affection of liver improved. Patient was overheated, six days ago; has been worse since.

June 27 — June 27/94. On admission, was put on C² (S.R. complexion light; hair black; eyes blue; skin covered with scaly patches; some scars on second toe of left foot; bodily condition clean; has part of third toe of left foot cut off. Behavior is good). When taken up to ward, Pulse 96. R. 20. T. 99. 8. Ate no supper.

" 28 — June 28/94. Was very restless during the night & slept only 2 hours or so. Appetite poor; bowels constipated. AM. Pulse 88. R. 22. T. 99.4. Is quiet & well-behaved. Complains of pain in stomach at times; skin is broken out with some skin disease. PM. Pulse to. Is kept in bed since coming.

" 29 — June 29/94. He slept only 3 hours, last night; was very restless. AM. Pulse 88. R. 20. T. 99.2. Lies in bed, quietly, appears somewhat depressed. PM. Pulse 88. R. 22. T. 99.

" 30 — June 30/94. Again restless & slept only about 3 hours, last night. AM. Pulse 96. PM. Pulse 82. Bowels have moved. Is on medicine. (Patient was visited by his brother in law on 29th inst). Still lies steadily in bed. Is quiet there.

July 1 — July 1/94. Was very restless, last night; slept only 3 hours or so. AM. Pulse 88. PM. Pulse 82. Takes medicine regularly; bowels move fairly freely.

" 2 — July 2/94. Rested fairly well, during the night.

" 3 — AM. Pulse 80. PM. Pulse 70. Is still on medicine. Wt 144 lbs.

July 3/94. Slept 8 hours, last night.

" 4 — AM. " 70 PM " 70. Says "he would like to get up & dress."

July 4/94. Restful, sleeping 7 hours, last night. AM. Pulse 70. Bowels have been moving fairly regularly. Is still on medicine.

" 5 — July 5/94. Again slept 7 hours last night. 6.30 Am. Given medicine. 8.30 Am. Up: transferred to B² —

" 11 — July 11/94. Since coming into this (B²) ward, patient has been quiet & restful, at night, sleeping about 8 hours on each. Pulse has been about normal. Behavior has been good. He talks freely; makes no complaints; reads some; seems depressed: feet rather weak, is commencing to go out walking, but has improved in this respect. Helps some with the ward-work. Summary. Patient seems to be growing stronger & physical condition seems to be improving, quite rapidly. Mentally, he is still rather depressed. Talks freely, and no delusions have been noted.

" 15 — July 15/94. Is quietly behaved.

" 29 — Talks, now, but little. Is very anxious to go home.

July 29/94. Last night, was caught in the act of trying to escape by the window of his room, having unlocked the screen: was moved to the dormitory.

" 31 — July 31/94. Not much, if any change. Talk, continually, about wanting to go home. Walk out daily.

Aug 2 — Aug 2/94. Wt 154½ lbs. Pulse 82.

Aug 4/94. Restless a couple of hours, but slept 7 hours, last night.

" 6 — Aug 6/94. A key, made of wire, was found on his person today. No doubt, would have again used

" 10 — this means of trying to escape.

Aug 10/94. Appetite, & sleep, at night, are both good. He talks freely and sensibly. Reads some; plays games &c. Continues quiet & well-behaved. Habits cleanly.

" 11 — Aug 11/94. Was, today, visited by wife & a relative, who desired to take him home on trial. He was permitted to leave with them, today.

Discharged Feb 6th '95

Personal and Medical History of John Scanlon Jr (or No 3)

From 4.

1894 and 5

Dec 16 — but takes about 3 quarts, at intervals, during the day. Ear dressed daily; seems improving; bowels fairly regular.

" 17 — Dec 17/94. Was up, in an invalid-chair for an hour, to-day. Restless & noisy all the night and slept none.

" 18 — Dec 18/94. Again up, in invalid-chair 3½ hours, today. Was very restless & noisy, singing and wrestling &c.

" 19 — Dec 19/94. 8.30 am. Was taken out of restraint. 3.30 Pm. Again put in restraint. Up, in chair, 3 hours to-day. Appetite good; bowels regular. Liquid diet discontinued at dinner-time, today. Ear dressed daily, as usual, & is improving.

" 20 — Dec 20/94. Out of restraint & up in chair, 4 hours, today. 1 Pm. Put to bed & in restraint. Noisy & restless, all day.

" 21/22 — Dec 21/94. Up & out 4 hours; Ear Dressed; behavior as usual. Dec 22/94. Sleeps only about 3 hours, nightly; is restless & noisy, rest of the time. Has been noisy & dirty, all day; ear dressed and now looks quite well.

" 23 — Dec 23/94. In chair & out of restraint 3 hours, today. Is still restless & noisy, each night, sleeps very poorly.

" 25/26 — Dec 25/94. In restraint, all day, today. Dec 26/94. Restless & noisy all day. Slept some both, last night.

" 27 — Dec 27/94. Out of restraint & up in chair, 6 hours, today. 5 Pm. Again put in restraint. Noisy nearly all night.

" 28 — Dec 28/94. 8 Am. Was taken out of restraint & put in chair. Appetite good; bowels regular. 4.30 Pm. Moved to B³.

" 29 — Dec 29/94. Restless & noisy 8 hours, slept none, last night: kept most of the patients awake by his noise.

" 31 — Tore bandage off his Ear. Has been fairly quiet, today: was up, in wheel-chair.

Dec 31/94. Has not improved any & was, today, transferred to C³.

1895 Jan 1/31 — Has been quiet, during the day. Habits are dirty.

Jany 1/95. Wt 136 lbs. Pulse 93. Has lost quite markedly in flesh.

Jan 31/95. Sleeps only, on the average 3 or 4 hours, nightly; Is very restless & noisy, every night. Is noisy, mischievous & annoying, by day; at times, also nights. Talks incoherently. Has delusions & illusions. Habits clean. Physical condition is good, but no improvement noted, mentally.

Feb 1 — Feb 1/95. Wt 143 lbs. (has gained some in flesh);

" 28 — Pulse 98. Feb 28/95. During this month, patient has been, nightly, restless & noisy the greater part of each night, sleeping only from 2 to 4 or 5 hours, (on an average): has also been noisy & troublesome, every day, & occasionally got in quarrels with other patients. In other respects, about same, as in some months past.

Mar 1/31 — March 1/95. Wt 151 lbs. (a further gain of 8 pounds). Pulse 108. March 31/95. Hurt his leg some, by bumping. Is a little lame. March 31/95. Still restless & noisy at night, tho' of late, appears to be sleeping a little better. Conduct & behavior, by day, do not change any. Talks incoherently; shows delusions & hallucinations. Habits clean. As to the whole, no improvement can be noticed in the patient's condition, except that his physical health seems very good. Habits are clean.

Apl 1 — Apl 1/95. Wt 149 lbs. Pulse 96.

" 3/6 — Apl 3/95. Sleeping very poorly: has been extremely noisy & irritated for last 3 days. Apl 6/95: Was struck in face by patient, a Kroeger, today, causing discoloration of nose.

" 25 — Apl 25/95. Extremely noisy & troublesome, during days, of late. Some nights, does not sleep any. Is noisy all of the night.

" 30 — Apl 30/95. No noticeable changes in any way. Lately has had an inflamed ear, which is being treated.

May 1/2 — May 1/95. Wt 157 lbs. P 110. May 2/95. Bowels have been constipated: were moved by Cathartics &c.

" 5/7 — May 6/95. No special change, in any respect. May 7/95. In bed, today. Pulse 130. Tem 100.5 — appetite good. Given enema & Cathartic. Bowels afterward moved freely. Has been very noisy, during the day. Moved to "Infirmary Ward" at 8.30 Pm. Was put to bed. Complains of left ear being very painful.

" 9 — May 9/95. Appetite good: on regular diet & extra. Bowels are regular. —

" 10 — May 10/95. Left side of head & cheek are red & swollen, considerable. Visited by wife at 12.30 Pm. Bowels are badly constipated, at times. Given medicine, enemata &c. Has refused some meals.

" 11 — May 11/95. Patient lies very quietly in bed; talks quite rational. Sleeping most of the day: Is given frequent sponge baths. May 12/95. Visited, today, by wife & child. Is on medicines. —

(carried to page 56)

Personal and Medical History of Henry Miller #2

Whole No. 3762.
Residence, 779 Indiana Ave, Winona, Minn
Date Admission, 28th June 1894 —
Admitted by Dr C B Eby Hour, 4.30 Pm.
How Sent, H. L. Bucks, Jof P. Winona County
Sex, Male
Age, 36.
Civil Condition, married
Children, Three
Age Youngest Child, —
Occupation, Laborer
Degree Education, not stated
Profession Religion, Lutheran
Habits, Good —
Nativity, Germany
Physicians Committing, L. A. Kelly & L. J. Willerton
Correspondents, Mrs Matilda Miller
Winona, Minnesota

No. for Year, 332
Insane Relatives, none; no hereditary history
Cause Exciting, not given; no previous history —
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, none
Suicidal or Not, attempted it 6 mos ago. propensity active
Date of this Attack, 6 months ago
Duration, 6 months or so
No. of Attack, 2nd
No. of Admissions, 1st
Age First Attack, about 35
Time of Leaving, Nov. 8th 94
Time in Hospital, 4 mos. 10 ds.
Result, Improved

Early Dr. Eby June 29/94.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm, Normal & Calm
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not,
Special Subjects, has had, of persecution.
Transitory or Not,
HALLUCINATIONS: None
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, voluble

Personal and Medical History of Henry Miller #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9in WEIGHT, 137 pds NUTRITION, Good
WOUNDS OR ABNORMALITIES, (see S. A onset page)
TONGUE, Tremors, slight Coatings, heavy Promptness Movement, prompt
PUPILS, Equality, Equal Size, Normal
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, } no incoordination, to usual tests
Legs, }
TREMORS, Hands, Yes, slight Tongue, slight
Facial Muscles, none General, none
REFLEXES, Patellar, Equal; abnt ny.
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Normal
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, Sleeps 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,~~ "weakly & took lots of medicine about 20 years ago but is now healthy.
~~Father or Pat. Relations,~~ Died (tuberculosis).
Brothers or Sisters, 1 full sister, 1 half sista & 1 half brother. 1 half brother & sista are subject to fits - full sister is somewhat of a neurotic disposition - Mother to the insane.

Personal and Medical History of Henry Miller #2

1894

This patient was brought here by Sheriff Gay, with the following history. There is no history of any heredity. Cause of attack not given, as there is no previous history; form of attack is paranoysmal. There is no accompanying bodily disorder. First symptoms of the disease were manifested 6 months ago; cut his wrist, thinking others were intending to do him bodily harm. First attack was months ago; this is the second. Insanity is now manifested by his being suspicious of others, and threatening suicide. Patient has shown no disposition to injure others, but he has attempted suicide, six months ago and propensity now active. Has no filthy or destructive habits. There is no history of any bodily disease &c or injury to the head. He has not been restrained or confined. Has been under medical treatment; seemed better, but has been moody since. Was always quiet.

June 28 On admission, was put on B^{r} (S.R. Complexion dark; hair dark; eyes blue; condition of skin good; vaccination marks on left arm; scars on right wrist: bodily condition clean; varicose veins on left leg; behavior is good). When taken on ward Pulse 60 R. 18. Tem. 99.8. June 29/94. Somewhat restless, but slept 5 hours last night. A.M. Pulse 56. R. 16. — Tem. 98.8. Appetite fairly good; bowels free. Is well behaved. Goes out walking. Talks freely; says his head bothers him. — P.M. Pulse 62. R. 18. Tem. 99. June 30/94. Rested better & slept 7 hours, last night. A.M. Pulse 60. R. 18. Tem. 98.8. P.M. Pulse 62. R. 19. Tem. 99. Complains some of headache; talks but little. Works some on the ward.

July 1 July 1/94. Restless 4 hours, sleeping but 4 hours, last night. A.M. Pulse 58. Appetite is fairly good. — " 2 Is quiet. Talks when addressed. Goes out walking with the rest. July 2/94. Slept 6 hours; was restless for 2 hours or so, last night. Appetite fairly good. Makes no complaints. Pulse 62. Works some on the ward.

" 3 Wt. today, 139½ lbs. July 3/94. Slept 8 hours, last night. Behaves well & is quiet. Works some. Pulse 60

" 4 July 4/94. Rested well, sleeping 7 hours, last night. A.M. Pulse 62. Is about as usual; helps with work.

" 5 July 5/94. Restless 4 hours, sleeping only 4 hours, last night; A.M. Pulse 62. Appetite good. He is quiet; talks freely when addressed. Otherwise about the same. July 12/94. During this, the 2nd

" 12 week of his stay, patient has continued restless at night from 4 to 6 hours & has been sleeping very poorly. Pulse has been slightly below normal. Behavior has been good. Talks but little, and only when addressed. No delusions noticed. He is restless, at times and rather depressed. His physical condition is about the same as on admission. Works some on ward. Visited by brother on 11th inst.

" 15/16 July 15/94. Restless 4 hours, sleeping only 4 hours, last night. July 16/94. Restless 9 hours & slept none at all, last night: was crying this morning. Is very anxious about going home & worrying on this account.

" 17 July 17/94. Restless 8 hours & slept only 1 hour last night. Wrote a letter to God & wanted attendant to deliver it.

" 18/31 July 18/94. Again tried to escape today. July 31/94. Still very restless & disturbed & sleeps poorly, at night. Worries are wanting to go home. Prays to God that he may go home. Behavior is good. Talk none, except when addressed. Walks out daily. Helps some with work on the ward. —

Aug 1/8 Aug 1/94. Wt. 136 lbs. Pulse 62. Aug 6/94. Slept only 4 hours, last night; was restless 4 hours or so. —

" 9/10 Aug 9/94. Visited by wife & family, today. Aug 10/94. Complaining of soreness in lungs & slight headache; was put to bed. Pulse 92. R. 38. Tem. 104 4/10. Transferred to Ct, this afternoon. 5 P.M. Complains of pain in chest. (Ord. jacket had been put on at 1.30 P.M.) 4.30 P.M. Drank a pint of

" 11 Eggnog & also took some stimulant. Aug 11/94. Quite restless, during the night. 8 A.M. Is Coughing a good deal & raising phlegm, streaked with blood. 8 P.M. Bowels have moved freely;

" 12 patient has taken freely of eggnogs; also stimulants. Aug 12/94. Patient rested more quietly,

Personal and Medical History of Henry Miller #2

1894 cont'd

Aug 12 Last night — 6 A.M. Drank freely of eggnogs; stimulants continued. He slept some during the day;

" 13 coughed but little. Still complains of pain in chest. Aug 13/94. Rested quietly last night. Bowels moved. Takes solid food, today. Says "he feels fairly well, today." Aug 15/94. Visited by wife.

" 15/17 Aug 16/94. Appears improving daily. Was up, in roller-chair, about 1½ hours, today. Aug 17/94. Sleeps

" 18 a great deal during the day. Aug 18/94. Red jacket taken off this morning. Was up, in a

" 21 roller-chair, about 2 hours, today. Aug 21/94. Has about recovered from his attack of pneumonia

" 22 and is up, today, dressed & on the hall. Aug 22/94. Was out on the ground, for a while, today.

" 26 Aug 26/94. Sleeps from 6 to 7 hours, nightly. Appetite good; bowels regular. Works some on ward.

" 31 Aug 31/94. Patient improving daily — Appetite very good. Bowels move regularly. Is out on grounds, daily.

Sep 1/5 Sep 1/94. Wt 149 lbs. Sep 5/94. Patient up & out on the ward. Appetite very good; bowels regular.

" 10 Talks rationally & converses quite freely. Sept 10/94. Works some on the ward; also goes out on the

" 15 grounds, quite often. Sep 15/94. Up & around daily; does not now seem to care to go home. Seems to realize his condition. "Does not think himself as yet strong enough to go home. Appears to improve.

" 30 Sep 30/94. Rests well, sleeping 7 to 8 hours nightly. Appetite good; bowels regular. Continues to improve.

Oct 1/4 Oct 1/94. Wt 149 lbs. Oct 4/94. Patient is, physically, fairly well. He sleeps very well.

" 10 Appetite good; bowels regular. Works on ward considerably. Oct 10/94. Doing fairly well.

" 23 Oct 23/94. Is doing well. Is a very quiet & contented patient. Does not talk much. Works on the ward; goes out walking, nearly every day. Appetite keeps good & bowels regular.

" 31 Pulse, when taken morning & evening, is about normal. Oct 31/94. Continues about as usual.

Nov 1 Nov 1/94. Wt 149 lbs. He works regularly on the ward & takes considerable interest in what is progressing about him. Goes out walking every day. Is anxious to get home.

" 7 Nov 7/94. Is in fairly good physical health, & seems to be fairly rational in speech and action. Is a quiet sort of patient. Works on ward & goes out walking, regularly.

" 8 Nov 8/94. Was allowed to go home on trial, with mother & sister, this evening (7 P.M.).

Discharged Feb. 6th '95.

Personal and Medical History of Wm. H. McCann

EBERT, PECAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3766

Residence, Wisconsin

Date Admission, 2nd July 1894.

Admitted by, Dr. Eby — Hour, 7 PM.

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

Sex, Male

Age, 41

Civil Condition, single

Children,

Age Youngest Child, —

Occupation, Switchman

Degree Education, probably fair

Profession Religion, Roman Catholic

Habits, Moderate Drinker

Nativity, New York

Physicians Committing, Geo. J. Hanley & R. L. Bole

Correspondents, Brother (George) McCann 272 East 7th St. St Paul

7/3/94 gives Mother Address as Duluth, Minn.

No. for Year, 336

Insane Relatives, None, no heredity.

Cause Exciting, Syphilis (he says has had it)

Cause Predisposing, not stated

Form,

Accompanying Bodily Disorder, Bronchitis

Suicidal or Not, not

Date of this Attack, 3 weeks ago, in Hot Springs.

Duration, about 3 weeks

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, 41

Time of Leaving, Oct. 22nd 94

Time in Hospital, 3 mos. 20 ds.

Result, Unimproved

EXAMINATION ON ADMISSION.

Exd by Dr. Eby July 3/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Clear

Quick or Sluggish, Quick

MEMORY:

Past Events, Fair

Recent Events, Impaired

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive, somewhat illusive

REASONING POWER:

Ordinary Subjects, Poor

Own Mental State, Defective

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Says he has had syphilis for the last 15 years, but was cured while at Hot Springs.

EMOTIONAL STATE:

Normal, Calm,

Indifferent,

Exalted, Yes

Depressed,

DELUSIONS:

Systematized or Not, not

Special Subjects,

Transitory or Not,

HALLUCINATIONS: none noted

ILLUSIONS:

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, Voluble

Personal and Medical History of Wm. H. McCann

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 1/4 WEIGHT, 130 lbs. NUTRITION, Fair.

WOUNDS OR ABNORMALITIES, (See S. R. next page) —

TONGUE, Tremors, none Coatings, white coating Promptness Movement, prompt

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Yes

SIGHT, good

HEARING, Good

COORDINATION, Arms, Finger to nose, eyes shut, Correct

Legs, Standing, Eyes shut, no great swaying.

TREMORS, Hands, Yes Tongue, none

Facial Muscles, slight General, —

REFLEXES, Patellar, Equal, about 3.

Other Reflexes,

ARTICULATION, Hesitating, Good Slurred,

FACIAL EXPRESSION,

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, 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,~~ Healthy

Father or ~~Pat. Relations.~~ Dead

Brothers or Sisters, 3 brothers; all healthy; no obtainable history as to hereditary cause of insanity

Personal and Medical History of Wm. H. McCann

1894

EARLEY, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy Sheriff Chapel, with the following history. He is a moderate drinker. Declares that he had Syphilis about 15 years ago. Form of attack is acute; accompanying bodily disorder, bronchitis. First symptoms of disease were manifested about 3 weeks ago, in Hotsprings, on the subject of baths. This is the 1st attack. Insanity is now manifested by his wanting to take baths & still believes he is at the "Springs". Patient has shown no disposition to injure others; nor is he suicidal, filthy or destructive. No peculiarities of note previously known. He has been confined for one week in Jail & in charge of his brother. Was under treatment at Hot Springs. —

July 2 — July 2/94. On admission, was put on B2 (S. R. Complexion dark; hair dark brown; eyes gray; condition of skin clean; has a birth-mark on left leg; no scars or bruises noticed; bodily condition clean: first finger, left hand, off.
" 3 — Behavior is good, though somewhat nervous & restless. July 3/94. Rested quite well, sleeping 7 hours, last night. AM. Pulse 108 R 20. T(e) 100. Appetite good; bowels free; no cough observed; is nervous and excited, today; says his mother is dying & he wants to get away"; PM Pulse 106 R 20. T(e) 100.2 —
" 4 — July 4/94. Probably slept fairly well, last night. AM. Pulse 102 R 22. T(e) 99.2. Appetite continues good. Restless, again, today; praying. Makes no complaints, however. PM. Pulse 104. R 20. T(e) 99.8. —
" 5 — July 5/94. Slept only 5 hours, last night. AM. Pulse 100. R 20. T(e) 99.8. Appetite increases.
" 6 — Very restless today & wanting to get out. PM. Pulse 98. R 22. T(e) 99.6. July 6/94. Slept about 7 hours, last night. AM. Pulse 104. Has delusions. Imagines he has immense riches & influence.
" 7 — July 7/94. Again rested well, sleeping 7 hours, last night. AM. Pulse 98. Talks some; also reads. Memory seems poor & mind weak. July 8/94. Slept 6 hours last night; restless for 2 hours or so. AM. Pulse 102. Appetite continues good. Patient is restless & nervous today; he
" 9 — also tried to run away. July 9/94. Slept fairly well, 7 hours, last night. AM. Pulse 98. Is
" 10 — again restless, today. July 10/94. Was restless for 5 hours, sleeping but 2 hours last night.
" 11 — AM. Pulse — Appetite good. Makes no complaints. Works some in the ward. July 11/94. Was restless for 7 hours, sleeping only 1 hour, last night. AM. Pulse 96. Appetite good. He complains
" 12 — of headache. Works in ward some. July 12/94. Slept only 2 hours; was restless 7 hours, last night.
" 13 — AM. Pulse 98. Appetite continues good; helps with ward-work. July 13/94. Slept 7 hours,
" 14 — during the night. AM. Pulse 90. Is restless today. Talks quite freely. July 14/94. Restless 5 hours, sleeping but 2 hours, last night. AM. Pulse 88. Is about the same, by day. —
" 15/16 — July 15/94. Slept 7 hours, last night. AM. Pulse 88. July 16/94. Rested & slept well, 8 hours, last night. AM. Pulse 88. Appetite continues good. Memory seems poor, & he does not appear to realize his position. Is restless, by day & at times excited. Helps regularly with the ward work.
" 19/30 — July 19/94. Talks freely & sensibly, today. July 20/94. Visited, today, by mother, brother & aunt. —
" 31 — July 31/94. Is making some improvement. Behaves well; talks freely & sensibly; walks out daily. —
Aug 2/5 — Aug 2/94. Wt 138½ pds (a gain of 8½ pds, since admission). Pulse 88. Aug 5/94. Behaves well;
" 9 — talks freely & sensibly. Appetite good; bowels regular. Aug 9/94. Transferred to B1, today. —
" 10 — Lives on this (B1) ward, complaining of a severe headache. Aug 10/94. Behavior is very good: he
" 31 — is industrious; talks quite rationally. Aug 31/94. Keeps about the same: no delusions noted. Complains some of rheumatism: helps some with the work around. Habits are clean.
Sep 3/17 — Sep 3/94. Wt 142 pds (a further gain in flesh). Pulse 130. Sep 17/94. Visited by brother, today.
" 19 — Sep 19/94. Specially Examined today, the following noted by D.S. — "Great incoordination of arms & legs;

Personal and Medical History of Wm. H. McCann

1894 (cont'd)

Sep 19 — pupils somewhat small; denies Syphilis, but probably had it. Patellar Reflex exaggerated. Speech thick & sluggish; facial tremor; tremor all over; mental state sluggish & paretic." —
" 21 — Sep 21/94. Transferred to B2 (for massage treatment). Continues quiet & well-behaved. No delusions
" 22 — noted. Sep 22/94. Sleeps well, at night. Is given massage treatment daily. Pulse 100. Takes medicine
" 24/25 — Sep 24/94. Pulse 101. Sept 25/94. Massage treatment continued. Pulse 76. Sleeps well. Takes medicine
" 30 — Sep 30/94. Patient has been in bed, since 21st inst, and has been given massage treatment, almost daily. Pulse more nearly normal, the past few days. Appetite medium; bowels regular. He rests and sleeps well, at night; yet he seems to be failing both physically & mentally, of late —
Oct 1 — Oct 1/94. Wt 135 pds (in underclothes). Pulse 96. — Given another massage treatment, today.
" 2/3 — Oct 2/94. Visited, today, by brother & sister-in-law. Oct 3/94. Another massage given today;
" 9 — AM. Pulse 70. Appetite fair; bowels regular. Is on medicine — Oct 9/94. Above treatments are given patient, almost every day. He has been very noisy, restless, part of the day. Said = there was something in his blankets". He has eaten but little. At times, there were noticed jerking & twitching of the muscles — Seems very dull & stuporous, at times. —
" 10 — Oct 10/94. Was very restless & noisy, during the night. Had to be transferred to B3 at 330. Am. Was very noisy after being put on this (B3) ward — keeping the other patients awake; he would not stay in bed, but kept walking about in his room, throwing the bed clothing about &c — was put in restraint sheet at 8 am. Bowels constipated. Was given enema — bowels afterward moved slightly — Slept only ½ hour during the night — very noisy & restless, the
" 11 — balance of the time — Oct 11/94. Slept 6 hours, during the night. (Had been given a sleeping dose of Hyoscin & bromide at 9 PM). Patient is resting easier, this morning; Eats well.
" 12 — PM. Has been quite noisy this afternoon & evening. Oct 12/94. Slept 7 hours, during the night. Appears to be improving some. Eats fairly well. PM. Has been fairly quiet all day, & was taken out of restraint at 6 o'clock, this evening. Was given enema this evening, and, afterwards, bowels moved slightly. Sep 13/94. Slept only 1 hour during the night, but was
" 13 — quiet, while awake. 8 AM. T 100.2. (Note by D.S. H. "Patient has passed through an almost typical "congestive" attack in general paresis. The incoordination was extreme. The face flushed & pulse not accelerated, but high & bounding. The twitching of the muscles was almost convulsive. The mind was very much clouded, and he was noisy, and actively delirious"). Oct 14/94. Had one convulsion, this morning & acted very
" 14 — stupidly afterwards; head inclined to be turned to the left side & it seemed as if he could not turn it over toward the right side, unless helped. Does not realize when spoken to and appears entirely helpless. Patient was transferred to C2, the "Sick-Ward" 10 30 AM. Was put to bed. 5 PM. Visited by brother. He has been in a stupor, all day; ate nothing. Oct 15/94. Cold applications were applied to head & this treatment
" 15 — kept up all night. Appears much better, this morning and also talks quite freely.
" 16 — Oct 16/94. Bowels constipated; enema given; bowels then moved freely; was restless and noisy all night — 430 AM. Feel out of bed. Patient has been very restless and
" 17 — noisy the greater part of the day. Oct 17/94. Restless all night. 3.15 AM. Fell out of bed. Complains, today, of slight pain in head. Appetite fair. Is on extra diet-

(carried to page 196)

Personal and Medical History of A. P. Erickson #2

ROBERT, FISLAR & SHAMBERG, DAVENPORT, IOWA

Whole No. 3771.
Residence, 1028 Jessa St. Paul, Minn
Date Admission, 6th July 1894
Admitted by, D. C. B. Eby Hour, 7 PM
How Sent, John B. Oliver Jo P. Ramsey County
Sex, Male
Age, 57
Civil Condition, Widower
Children, Three
Age Youngest Child, —
Occupation, Laborer
Degree Education, not given
Profession Religion, Lutheran
Habits, Good
Nativity, Sweden
Physicians Committing, Geo. J. Stanley M.D. J. M. A. Gravel
Correspondents, Mrs Aug. Lindquist
cor Arcade & Sims St Paul

No. for Year, 341.
Insane Relatives, none
Cause Exciting, General debility, religious &c
Cause Predisposing, "chronic"
Form,
Accompanying Bodily Disorder, paralysis (general) (?)
Suicidal or Not, not.
Date of this Attack, six years ago
Duration, six years. —
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 48
Time of Leaving, June 1. 1897
Time in Hospital, 2 yr. 10 mos. 26 da.
Result, Died Exhaustion in General Paresis.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

Exd. by Dr. Eby

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, medium
MEMORY:
Past Events, good
Recent Events, good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, good
Own Mental State, good
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Attendants state that patient has a mania for collecting all sorts of things into his room.

EMOTIONAL STATE:
Normal, Calm, yes
Indifferent,
Exalted,
Depressed, slightly
DELUSIONS:
Systematized or Not,
Special Subjects, none
Transitory or Not,
HALLUCINATIONS: none
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, free

Personal and Medical History of A. P. Erickson #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 5½ WEIGHT, 147 lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES, See S. P. memo page E.
TONGUE, Tremors, slight Coatings, some coating Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Finger to nose, eyes shut, quite good
Legs, Standing, Eyes shut, slight swaying.
TREMORS, Hands, slight Tongue, yes
Facial Muscles, none General, none
REFLEXES, Patellar, Equal; about 6.
Other Reflexes,
ARTICULATION, Hesitating, good Slurred, —
FACIAL EXPRESSION, normal
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,

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,
no history of insanity

Personal and Medical History of A. S. Erickson #2

EBBERT, FISCHER & THOMBERS, DAVENPORT, IOWA.

1894

Was brought here by Deputy-Sheriff Kinney, with the following history. There is no history of hereditary. Supposed cause of this attack is general debility, religion &c; form of attack is chronic & depressed. The first symptoms of disease were manifested when patient was attacked by general paralysis, 6 years ago; he has never been well since. This is the 1st attack. Insanity is now shown by general debility, slow hallucination & religious mania &c. Patient has shown no disposition to injure others, nor is he suicidal, nor filthy nor destructive. Before symptoms of insanity appeared, he showed religious impressions; he now thinks that God is talking to him & sometimes does not sleep at night, on this account. He has not been restrained or confined. Has been under treatment for general paralysis; recovery as good as could be expected.

July 6 On admission, was put on B3 (S. R. complexion dark; hair dark brown; eyes blue; condition of skin good. Has a scar on left side. Bodily condition clean. Behavior good. July 7/94. Quiet and slept 7 hours last night. Hm. Pulse 76. R 20. Te 99.4. Appetite good; bowels have moved; behavior is good; he makes
" 8 no complaints. July 8/94. Probably slept well, last night. Hm. Pulse 76. Te 99. Appetite good; bowels seem
" 9 regular. Behaves well; talks rationally, and no delusions or hallucinations have been noted. July 9/94. Seems to rest & sleep well, last night. Quietly behaved. Hm. Pulse 74. Te 98.8. Likes to read a good deal & especially the Bible. Says "he does not know why he was sent here". Works some in dining-room—
" 10 July 10/94. Appetite continues good; bowels regular. Is uniformly quietly-behaved. Habits cleanly.
" 13 July 13/94. Appetite good the past 2 days; bowels act regular. P & Te normal. Habits clean & neat.
" 20 July 20/94. No special change to note, during last week. Quiet, well-behaved & rather reticent. —

Summary. Sleeps well at night. He talks rationally, but does not talk so much as when first brought in, as he spends most of his time reading the Bible, or newspapers. Picks up papers & rubbish &c & fills his pockets with them. Talks about his past life quite freely; has been teasing to go home, as he cannot see any reason for having been sent here. Habits neat & clean. Does not keep with work, mostly.
" 31 July 31/94. Continues about as last described, though he now seems more contented. Habits are cleanly —
Aug 1/31 Aug 1/94. Wt 160 pds. Pulse 98. Aug 31/94. Now talks quite sensibly. Works in dining-room; habits clean
Sep 3/10 Sep 3/94. Wt 157½ " " 110. Sep 10/94. No special change. Was, today, transferred to B2 —
" 30 Sep 30/94. Apparently posts & sleeps well. Appetite good; bowels regular. Quiet & well-behaved. Read the Bible considerably. Still has the habit of picking up everything he finds, rubbish &c & carrying it up & all in his pockets.
Oct 1/31 Oct 1/94. Wt 165 pds (has gained in flesh, the past month). Pulse 102. Oct 31/94. Behaves well, and is quiet. Still keeps picking up rubbish &c. Goes out walking. Indolent of late & does not work much.
Nov 2/30 Nov/94. Wt 167 pds. Pulse 100. Nov/94. Picks up old stuff & fills his pockets with it. Nov 30/94. Reads his Bible,
Dec 1 most of the time; talks but little, unless addressed; works none. Appetite is good. Dec 1/94. Wt 170 pds. Pulse 116.
" 8 31 Dec 8/94. Fell on stairs & sprained right wrist. Dec 31/94. No special change to note, at this date. —
1895 Jany 1/31 Jany 1/95. Wt 169½ pds. Pulse 92. Jany 31/95. Still has habit of filling pockets with rubbish &c. Talks but little. Sits and reads prayer book & bible nearly all day. Appetite good; bowels seem regular. Makes no complaint. Is untidy.
Feb 1/28 Feb/95. Wt 166 pds. P. 80. Feb 28/95. No special change. Sits about, reading prayer book, all the time. Fills his
Mar 2 pockets with old rags & trash. Talks but little. Untidy. Works none. March 2/95. Wt 160½ pds. Pulse 105.
" 31 March 31/95. About the same, from month to month. Talks but seldom. Does not walk out or work.
April 1/30 April 1/95. Wt 154½ pds. (Is loosing in flesh without known cause). P 92. April 30/95. No change. Walk quite unsteady.
May 1/31 May 1/95. Wt 149 " P 88. May 31/95. Reads book, all the time, (or pretends to); hides & hides things away. Walks somewhat unsteadily. Behavior quite — Appetite is fairly good. —

Personal and Medical History of A. S. Erickson #2

1895

June 1/30 June 1/95. Wt 147 pds. Pulse 96. June 14/95. Transferred to B3. June 30/95. Appetite fairly good: bowels
July 1 regular. Quietly-behaved: talks but very little; read a good deal. picks up everything he can find.
" 2 Habits, at times Dirty; (4 days dirty, while in this ward). July 1/95. Wt 145 pds. (patient has been loosing in flesh since June 2d last. Has lost 2½ pds. since then; no known cause). Pulse 84. July 2/95. Examination made today; the following noted: right pupil contracted; left about normal size: response to accommodation sluggish; no response to light: Articulation hesitating & slurred: very considerable incoordination of arms & legs; facial expression stolid & mask-like; right patellar reflex 7 on 8: left patellar reflex
" 31 3 or 4 (H.H.H.). July 31/95. No change from last month. (Number of days Dirty, 2) —
Aug 1 Aug 1/95. Wt 149 pds. Sep 2/95. Wt 159 pds. Pulse 96. Oct 1/95. Wt 168 pds. Pulse 88. (Has been
Sep 2 gaining quite markedly in flesh, the past 2 months). Oct 14/95. (Very considerable) incoordination. Dr. H.
Oct 1/31 Oct 31/95. Quiet: reads, most of the time: picks up rubbish & trash & stuffs his pockets: is rather unsteady in his walk: does no work: habits, at times, dirty. Health seems good.
Nov 1 Nov 1/95. Wt 166½ pds. Pulse 92. Dec 2/95. Wt 167 pds. Pulse 108. Dec 6/95. Struck by J. Rhodes, when
Dec 2/31 coming from dining room & eye bruised & cut some. Dec 31/95. Appetite good: bowels regular: behavior quiet. Still has habit of picking up rubbish &c & filling his pockets: reading (or seeming to) continually.
1896 Jan 1/31 no delusions or hallucinations noticed. Jan 1/96. Wt 165 pds. Pulse 90. Jany 21/96. Was today
" 31 transferred to B1, (on account of general change of wards). Jan 31/96. Is becoming very feeble & walks with difficulty: occasionally falls down: gets exhausted very quickly: In other
Feb 1/29 respect, patient's condition remains about the same — Feb 1/96. Wt 162 pds. P 86. Feb 24/96. Quiet:
" 25 reading most of the time: Has a faltering way in his speech. picks up everything he sees & puts it in pocket, or conceals it about his person. Habits clean. Does no work. Feb 25/96. Transferred to Ward A4.
Mar 3/31 March 3/96. Wt 156 pds. P 90. Mar 9/96. Seems to be failing of late: is very filthy: soils his clothes frequently,
Apl 1/30 during the day. Apl/96. Wt 153 pds. P 88. — Apl 30/96. Habits very filthy: slouchy & dirty in dress: soils clothes: very feeble. Otherwise notes above still hold good, as to his way of acting &c. picking up things &c.
May/96 to June 1/97 Summary Nurses Notes by Dr. Phelps. Patient a general paretic: Nov. 96 wt. 160 lbs. During latter part of '96 failed somewhat in general paretic way. became demented, dull, dirty & troublesome. In Jan. 97 became grossly so. Continued to fail until finally he was placed on sick ward for better care, where he lay quietly in bed with an occasional rise of temperature.

Died June 1st 1897 at 140 P. M.

Personal and Medical History of Julius Kynsberg

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3774
Residence, Amherst, Minn
Date Admission, 7th July 1894.
Admitted by, W. C. B. Eby Hour, 3 P.M.
How Sent, E. V. Farrington, Jof P, Fillmore Co
Sex, Male
Age, 47 Years
Civil Condition, married
Children, - 5 -
Age Youngest Child,
Occupation, Farmer
Degree Education, not given
Profession Religion, Yes; Lutheran
Habits, not good. - Intemperate -
Nativity, Norway
Physicians Committing, J. A. Phillips & G. A. Love
Correspondents, Emilia Kynsberg, (wife) Soland, Fillmore Co. Minnesota

No. for Year, 3444.
Insane Relatives, none; no history of heredity.
Cause Exciting, Excessive indulgence in intoxicating liquors.
Cause Predisposing, not given
Form,
Accompanying Bodily Disorder, none.
Suicidal or Not, has threatened to hang himself
Date of this Attack, about 2 years ago
Duration, about 2 years
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 40.
Time of Leaving, Aug. 13th 94
Time in Hospital, 1 mo, 6 d.
Result, Improved

EXAMINATION ON ADMISSION.

Eby Dr. Eby July 8/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, clear
Quick or Sluggish, quick
MEMORY:
Past Events, Good
Recent Events, good.
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Good
Own Mental State, Good.
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Patient has been drinking pretty hard, lately. Attack seems like Mania - a - potu.

EMOTIONAL STATE:
Normal, Calm, Yes
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, none now.
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, free

Personal and Medical History of Julius Kynsberg

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7 3/4 WEIGHT, 157 1/2 lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES, (see S. L. - on next page) -
TONGUE, Tremors, very tremulous Coatings, slight Coating Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Fingi to nose, eyes shut, Correct
Legs, Standing, eyes shut, Stands steadily. -
TREMORS, Hands, Slight Tongue, marked
Facial Muscles, Slight General, —
REFLEXES, Patellar, Equal, abnt 5 -
Other Reflexes,
ARTICULATION, ~~Hesitating~~, Good ~~Slurred~~, fingi accent
FACIAL EXPRESSION, normal
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, Recent 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 hereditary tendencies.
Mother or Mat. Relations, parents dead; father found
Father or Pat. Relations, lung disease; mother, sudden
Brothers or Sisters, cold (probably pneumonia)

Personal and Medical History of Julius Kynsberg

ROBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA.

1894

Was brought here by Deputy-Sheriff Henry Nupson, with the following history. Habits not good; he is intemperate. There is no history of heredity. Cause of this attack is excessive indulgence in intoxicating liquors; form of attack furious mad. There is no accompanying bodily disorder. First symptoms of the disease were manifested about 2 years ago; had violent fits of anger, coming on suddenly without any cause, would run to the woods in his anger, come back to house, run off to woods again & so on, for some time. This is the 1st attack he has been acting this way for last 2 years. Insanity now shown by his being unsettled; will not attend to his business; lies around in the hot sun and in the dirt. Has threatened to kill his wife & children & also to take his own life: has also threatened to hang himself. Is desperate to injure others from sudden passion. Is not of filthy or dissipated habits. There is no history of any bodily disease, fits or no serious head injury. He has not been restricted or confined, nor under medical treatment.

July 7 — On admission, was put on B[d] (G.R. Complexion, dark; hair dark; eyes blue; condition of skin good; some marks on left shoulder; bodily condition clean: no bodily peculiarities noticed; behavior is good). -

" 8 — Pulse 86. R 19. T (R) 99 4/5. July 8/94. Quiet & slept 7 hours, last night. AM. Pulse 82. R 17. T 98 4/5. Appetite good; Quiet & well-behaved; works some on the ward: talks when questioned; no delusions are noted.

" 9 — makes no complaints. PM. Pulse 86. R 18. T 98 2/5. July 9/94. Rested quite well, sleeping 7 hours, last night. AM. Pulse 82. T 98.8. Appetite good; is well-behaved; talks freely & sensibly. Works on ward.

" 10 — PM. Pulse 80. T 99. July 10/94. Slept 8 hours, last night. AM. Pulse 80. R 18. T 99. Continues

" 15 — about the same from day to day: PM. Pulse 78. R 17. T 99 2/5. July 15/94. Since last noted patient has continued to rest quietly at night, sleeping about 8 hours at each. Is uniformly quiet & well-behaved, by day. Appetite has continued good. He talks freely & sensibly; no delusions have been noticed. Pulse has been about normal. Helps willingly with the work. July 16/94. Transferred to A[1], today. Also received a visit from friends, this afternoon. July 21/94. Patient seems to make improvement. He sleeps well. Appetite good; bowels regular. Behaves well; makes no complaints; Talks freely & sensibly; no delusions or hallucinations have yet been noticed. Is walking under shall.

" 31 — July 31/94. Is about as last described. Talks quite freely & sensibly. Willingly assists with the work.

Aug 2/13 — Aug 2/94. Wt 160 pds. Pulse 64. Aug 13/94. Patient has been, during the past week or more, fairly well, though he has a somewhat gloomy & doubtful appearance. Sits about in a somewhat sluggish manner; says nothing of any delusive ideas, however, and talks quite freely.

" 13 — Went home, today, with a friend -

Discharged Feb 6th 95-

Personal and Medical History of Sam Olson

From 260.

1894 Jan 14 — been very restless; out of bed nearly all night, walking about in hall; had to be locked up- Slept very poorly - Has been very dull & stupid, all day. Was put to bed in forenoon: lies there in a stupid dull state. Has not

" 15 — Eat any food today: Jany 15/95. Passed a very poor night. Appears somewhat brighter today; Feeds it

" 16 — Difficult to stand up - Staggers about the room - Jany 16/95. Still remains in bed: had to be fed, today. -

" 19/30 — Jan 19/95. Same, as ward, today - Jan 30/95. Very restless, at night. Eats poorly; at times, refuses food altogether - Very stupid & dull & does not seem to realize anything - Habits, occasionally dirty - Transferred to A[4].

" 31 — Jan 31/95. 15 Convulsions, by night, and 4, by day, have been reported for the month - Appetite only fair; Is on extra diet & has to be assisted in feeding himself - Still continues in a stupid condition & does not seem to realize his surroundings - (Bromides were discontinued, on transferring to A[4] & Maltine, with cod liver oil given; Condition has improved slightly - but he is still considerably demented and stupid - D.H).

Feb 1/4 — Feb 1/95. Wt 147 pds. Pulse 83. Is fed extra diet. Feb 14/95. Did well, up to date, Eating & sleeping well.

" 15 — Feb 15/95. Had 4 fits, during last 24 hours, & now does not feel himself. Very restless during the night.

" 15/17 — Feb 16/95. Restless all night. Feb 17/95: Took very little breakfast; was very boisterous & pugnacious, for several hours, during the day, & also in evening; requiring an attendant to hold him, most of the time.

" 18 — Feb 18/95. Refused to be fed, this morning: was very troublesome; quieted down, latterly. Slept very poorly.

" 19/20 — Feb 19/95. Very stupid: made several attempts to escape from Ward. Feb 20/95. Slept some, all night. 7 am. Again attempted to escape & broke a pane of glass with his forehead, which was cut slightly. He made a second attempt at 8[30] am, and was transferred to D[3]. (Had 24 convulsions up to date).

" 28 — Feb 28/95. Appetite fairly good: bowels regular. Behavior stupid. (1 Day Dirty). 6 Convulsions since Feb 20th.

Mar 1/5 — March 1/95. Wt 160 pds. Pulse. Mar 5/95. Did not sleep any, all night. Mar 6/95. Very stupid this morning.

" 7/13 — Has to be fed. March 7/95. Feeds himself. Mar 11/95. Restless, all night. March 13/95. Very, very stupid in

" 14/30 — the past few days. March 14/95. Had 2 convulsions: restless all night. March 30/95. Has been very restless, all day: could not keep him seated, but rolled all about floor, all the time, unless held by force. Has a Complete Dementia. Was placed in restraint-Sheet at 9[th] this evening, to prevent injuring himself -

" 31 — March 31/95. Appetite rather poor; has to be fed: at present in restraint. (Number of hours restraint 33; number of days dirty 4.) 24 Convulsions noted, During month - Apl 1/95. Wt 130 pds. (Has lost very markedly in weight). Pulse 66. Was taken out of restraint this morning - Apl 2/95. Fell out of bed, in Convulsion, Striking face against floor, cutting his lip & disfiguring his nose some.

Apl 1

" 2

" 16 — Apl 16/95. Walking around, during night, knocking his head against the radiator - Struck Shrift.

" 30 — Wolf accidentally & discolored his eye - Apl 30/95. Apparently growing worse, right along, and, at present, is not able to look after himself - occasionally has to be fed. (Number of Days Dirty 2.) 48 Convulsions

May 1/8 — noted, during the month. May 1/95. Wt 136 pds. Pulse 66. May 13/95. Fits still continue: he has had, this month, 14 nocturnal Convulsions, (sometimes 3 a night), and 1 during the Day. Has also been struck by patients, at times & bruised some. Has been acting very stupid for some time & apparently Growing worse right along; very dull & stupid, at present: has to be dressed & undressed & occasionally fed. Has been in bed, part of the day; would not remain quiet: also rolling about on the floor & soiling his bedstead &c. Was taken up. Given an enema of soapsuds this am. May 15/95. Very stupid; walking about in hall; not knowing where he goes; running against everybody & everything; Is apparently unconscious of his surroundings. May 23/95. Gradually on the decline; has to be fed every meal; also dressed & undressed.

" 15

" 23

" 28/31 — Visited by parents. May 28/95. Again visited by parents. May 31/95. Since 13th inst, 23 nocturnal Con-

(Carried to Casebook A 176)

Personal and Medical History of Ole. H. Bye

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3776.
Residence, Red Wing, Minn.
Date Admission, 11th July 1894.
Admitted by, D. Kilbourne Hour, 7 PM.
How Sent, A.D. Anderson, Jo. Co., Goodhue County.
Sex, Male.
Age, 49
Civil Condition, married
Children, 2
Age Youngest Child, —
Occupation, Store-keeper
Degree Education, probably fair
Profession Religion, Ex Church member
Habits, Good
Nativity, Norway
Physicians Committing, C. Jaehring & J. V. Anderson
Correspondents, Hans Johnson or Ada Bye Red Wing, Minn

No. for Year, 346.
Insane Relatives, Father, for a short time; also sister insane
Cause Exciting, not given
Cause Predisposing, heredity.
Form,
Accompanying Bodily Disorder, none
Suicidal or Not, has suggested some one had better shoot him
Date of this Attack, May 1894; in first part of month
Duration, about 2 months
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 49.
Time of Leaving, Aug. 29. 1900
Time in Hospital,
Result, Transferred to Hastings

EXAMINATION ON ADMISSION.

Early Dr. Ely July 17/94

MENTAL CHARACTERISTICS.

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

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

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

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

GENERAL DESCRIPTIVE REMARKS:

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

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

HALLUCINATIONS: none

ILLUSIONS: none

CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, slightly reticent

Personal and Medical History of Ole. H. Bye

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3 3/4 WEIGHT, 145 1/2 lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES, (See P.R. on next page)
TONGUE, Tremors, Slight tremor Coatings, heavy at base Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, apparently good
HEARING, Good
COORDINATION, Arms, Finger to nose, eyes shut, Slight uncoordination of left hand; none of right.
Legs, Stands better on left foot. Standing, eyes shut, Stands steadily.
TREMORS, Hands, Slight Tongue, Slight
Facial Muscles, none General, none
REFLEXES, Patellar, Equal, about 5
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, normal
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, 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 dead; Consumption.
Father or Pat. Relations, Father living; thinks insane.
~~Brothers~~ or Sisters, 2; well, as far as known; does not know where one sister is.

Personal and Medical History of Ole. H. Bye

1894

ROBERT, FISHER & COMBERG, DAVENPORT, IOWA

This patient was brought here by Chief of Police Battan, with the following history. There is history of heredity; his father was insane for a short time; sister also insane. Supposed cause of this attack is not given; the form is acute, depressed. There is no accompanying bodily disorder. First symptoms were manifested in May 1894, at the first part of the month. This is the 1st attack. Insanity is now manifested in that he is afraid that some one will injure him. Patient has shown no disposition to injure others. Has not attempted, but he has suggested that some one had better shoot him. He is not filthy or destructive. There is no history of any bodily disease or no of any injury to head. He has not been pertainis or confined; has taken some medicine, but no improvement has been noticed. ——

July 11 On admission, was put on B³ (S.R. Complexion dark; hair dark; eyes brown; condition of skin good; mark "O.H.B" on left hand; no scars noted; bodily condition clean, no bodily peculiarities noted; Behavior good). P 70. R 18. T 99⁴.

" 12 July 12/94. Restful, sleeping about 4 hours, last night. AM. Pulse 62. R 18. T 99⁴. Appetite good; bowels generally free. Has been restless today & tried to run away. Answers questions, but hesitatingly; PM. Pulse 64. R 20. T 99.8. Makes no complaints. Works some onward. July 13/94. Restless 4 hours, sleeping but 4 hours, last night. AM. Pulse 68. R 19. T 99. Appetite good. Is restless & nervous, today. PM. Pulse 64. R 19. T 98.8.

" 14 Works some. July 14/94. Slept only 4 hours, was restless 5 hours, last night. AM. Pulse 68. Appetite continues good. Talks some. July 15/94. Restless for 3 hours, but slept 5 hours, last night. AM. Pulse 64. Talks but little; makes no complaints. July 16/94. Again, passed a poor night, restless 3 hours, sleeping only 5 hours.

" 17 Is restless & rejected today. AM. Pulse 68. Helps some with the work. July 17/94. Again restless last night. Slept only about 5 hours. AM. Pulse 66. Appetite fairly good. Talks but little — Does some work. There is

" 18 no special improvement noted. July 18/94. Slept poorly, only 5 hours, last night. AM. Pulse 68. Is very restless; works some. July 20/94. During the first few nights of this, the 2nd week, patient was restless and

" 25 disturbed and slept poorly; but during the past 4 nights he has been more restful, sleeping 5 to 7 hours, each. Pulse. R & T as have been about normal. Appetite has been fairly good; bowels regular. Patient seems stupid & melancholy; talks but little, chiefly in answer to questions; no delusions have been noted. Habits are clean.

" 31 and he has been well-behaved, as a rule. (Was visited by his wife on 29th inst.) — July 31/94. No special change. Continues quiet & well-behaved. Appetite good; bowels regular. Works out daily & works some on ward.

Aug 2/10 Aug 2/94. Wt 138 pds. (Has lost some in flesh since admission). Pulse 68. Aug 10/94. During past week,

" 16 he has been restless at night for a few hours. Aug 15/94. Has a "spell" today. Was abusive & obstinate.

" 31 Aug 31/94. Has recovered from his "spell" & is now quiet & well-behaved. Works some on the ward.

Sep 1/30 Sep 1/94. Wt 133 pds. (Is still losing in weight). Pulse 64. Sep 30/94. Still somewhat restless, at night. Continues quiet & well-behaved, by day. Still shows delusions. Assists with work on the hall. —

Oct 1/31 Oct 1/94. Wt 134½ pds. Pulse 80. Oct 31/94. No special change. Talks but little; shows delusions. Does walking. Works

Nov 1/30 Nov 1/94. Wt 138½ " " 98. Nov 15/94. Deluded; says "he was in Sweden, last night". Works on ward.

" 30 Nov 30/94. Visited by wife. Physical & mental condition do not seem to change in any respect.

Dec 1/31 Dec 1/94. Wt 140 pds. Pulse 72. — Dec 31/94. No special change to note. Would not accept his Xmas

1895 presents; said "that he did not have any wife". He has a swear upon his lip. Habits are cleanly. —

Jan 2/31 Jany 2/95. Wt 138 pds. Pulse 72. Jan 31/95. Is stubborn & cranky. Talks but little; makes no complaints.

Feb 1/28 Works none. Physical condition good. Feb 1/95. Wt 137 pds. P 64. Feby 28/95: No change to note. Works on ward some. Talks but very little. Makes no complaints. Is clean in habits & fairly tidy.

Mar 2/31 March 2/95. Wt 136 pds. Pulse 100. March 31/95: No change noticeable in patients condition.

Personal and Medical History of Ole. H. Bye

1895

Apl 1/30 Apl 1/95. Wt 136 pds. Pulse 64. Apl 30/95. Still no change noted. Works some. Talks only when addressed. Not communicative. Reads some. Goes out walking. Clean & tidy. Physical condition is good. —

May 1/31 May 1/95. Wt 137½. Pulse 78. May 31/95. Remains the same, all the time. Quiet: talks but little; Does no work. Goes out walking. June 1/95. Wt 145 pds. P 88. June 30/95. Talks but little: makes no complaints: Clean & tidy; works on ward some. (Has been gaining in flesh, of late).

July 1/31 July 1/95. Wt 145 pds. P 72. July 31/95: Behaves well & is quiet: reticent: Works on ward some; "wants to get out". Is in good physical condition. Augs 1/95. Wt 149 pds. Pulse 100. Works some.

Augs 1/31 Sept 1/95. Wt 149 pds. Pulse 64. Sep 17/95. Transferred to C². Sep 30/95. No change, Mentally.

Oct 1/31 Oct 1/95. Wt 149 " " 78. Oct 31/95. Was among the number of those who were quite

" 28 suddenly taken sick during the night, by vomiting & purging; remains in bed Oct 28/95. Got

" 31 up today & is feeling much better. Oct 31/95. Generally quiet & well-behaves. Does not talk much: what he does say is nonsense. Works some on ward. Condition about same from month to month.

Nov 1 Nov 1/95. Wt 150 pds. Pulse 90. Dec 1/95. Wt 152 pds. Pulse 132. Jan 1/96. Wt 155 pds. Pulse 100.

Dec 1 Jan 21/96. Transferred to C³ East (on account of a general change of wards). Jan 31/96. No improve-

Jan 1/96 ment especially noticeable in patients condition. Very cranky: always refusing & take about a 6 yard walking. Seems foolish: has delusions. Appetite fair: bowels regular. Does not do any work.

Feb 1/29 Feb 1/96. Wt 155 pds. Pulse 92. Feb 16. Visited by wife: talked quite rational, but was cranky and angry.

" 29 Feb 29/96. No improvement noted mentally. Is physically very well. Has delusions & seems rather feeble-minded & appears to be slowly getting more feeble-minded. Noisy, at times, talking very loud & angry.

Mar 1/31 Mar 1/96. Wt 155 pds. P 76. Mar 13/96. Patient was sitting at table; when told to get off answered by reaching out & scratching att: & trying to strike. When a scuffle ensued. Patient put in B³ for the day.

Apl 1/30 Has been very ugly & cranky, of late & also very obstinate. Apl 1/96. Wt 150 pds. P 76. Apl 13/96. While not walking,

" 14 patient refused to go with crowd: force was used to compel him to come. Apl 27/96. Tried to walk away,

" 28 while outside: was brought back, by force. Is very noisy & ugly, of late. Apl 27/96. Transferred to B³.

May 1/96 to Aug 1/97 Summary Nurses Notes by Dr. Phelps. Patient a case of chronic mania: Fairly able to answer questions also not to carry on a continued conversation: Health uniformly good. No bodily illness noted: Wt. 158 to 166 lbs. Continued by Dr. Herzog. Aug 5 Wt 169. Is in good flesh & good health: Does no work: Incoherent in speech: demented: at times talks loudly as if preaching: Habits clean. Sept 7 Had asthmatic attack: Very short of breath on coming in from work. After resting for a short time seemed to recover. Nov 4 164½ Does no work. Can not be induced to do any. Talks to himself a good deal & at times loudly & excitedly.

Apr. 14 Eloped while goes walking. 18 Returned. No change in condition Sept 1. 172½. Mental condition same. Sept 10 Refused to go walking, also refused to go to another ward - Taken to B³. by Nurse Page was abusive & threatening, vulgar, obstinate profane. Left on B³ while ward were out. Nov 1 171½. Still talks incoherently to himself. Rather more easily disturbed. Will become violent if at all provoked. Dec 16 172½. No change. Feb 1 July 31/99 (Diamond) Remains

quiet: somewhat obstinate: neat & clean: Physical health good. Does some work on ward Mch 11 Wt. 170. Mch 13. Has eruption on face similar to erysipelas. July 1. Works in Tailor shop. July 14 Refused to work.

Aug 1 Jan 31 1900 (A. Chapple) Wt. 174½. Oct 10 Visited by friends: Has been in fair physical health. Complains at times of asthma. Has done very little work. Talks to himself but is quite rational. Has complained at times of pain in lungs.

& 179

Personal and Medical History of Hans Stowaser
alias John Hawson

EGBERT, FIDLAR & STAMBAUGH, DAVENPORT, IOWA

Whole No. 3777.
Residence, He is a "tagrant"—
Date Admission, 12th July 1894.
Admitted by, D. C. B. Ely Hour, 7 P.M.
How Sent, John. B. Olivier, Jof C, Ramsey County
Sex, Male
Age, 45 years
Civil Condition, Single
Children, None
Age Youngest Child, —
Occupation, Laborer
Degree Education, not stated
Profession Religion, Catholic
Habits, Not known—
Nativity, Austria
Physicians Committing, C. C. Miller & Jas C. Markoe
Correspondents, None given in papers—

No. for Year, 347.
Insane Relatives, None
Cause Exciting, Excessive Masturbation
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, none
Suicidal or Not, not.
Date of this Attack, about July 1/94
Duration, about 10 days.—
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 45 years.
Time of Leaving, 7th April 1896.
Time in Hospital, 1 year, 8 mos & 26 Days
Result, Died: Exhaustion in G.P.

EXAMINATION ON ADMISSION.

Exd by D. Ely - July 13/94 -

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Slightly Confused
Quick or Sluggish, Quick
MEMORY:
Past Events, Seems good
Recent Events, Impaired
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects,
Own Mental State, } Impaired—
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Yes
DELUSIONS:
Systematized or Not, not
Special Subjects,
Transitory or Not, Yes
HALLUCINATIONS: none
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Incoherent
Voluble or Reticent, and voluble.

Personal and Medical History of Hans Stowaser

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8 WEIGHT, 122 lbs. NUTRITION, Fair
WOUNDS OR ABNORMALITIES, (see S. P. account page 8) —
TONGUE, Tremors, quite a Coarse tremor Coatings, White Coating Promptness Movement, prompt
PUPILS, Equality, Equal. Size, slightly dilated
Response Light, No Accommodation, —
SIGHT, Impaired; says "Can see best with right eye"—
HEARING, good—
COORDINATION, Arms, Finger Nose, eyes shut, Correct
Legs, Standing, Eyes Shut, Stands firmly—
TREMORS, Hands, Yes Tongue, Yes
Facial Muscles, Yes General, Slight
REFLEXES, Patellar, left absent, cant get right—
Other Reflexes,
ARTICULATION, Hesitating, Yes Slurred, foreign accent
FACIAL EXPRESSION, blank
SENSIBILITY, normal
HEART, Sounds good; palpitating
LUNGS, Sounds good—
EXAM. URINE.

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, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations,
Brothers or Sisters,
} Cant get any family history

1894

EBBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy Sheriff Kenney, with the following history. He is a "vagrant". As to his habits, regarding temperance & morality, not known. No history of heredity. Supposed cause of attack is excessive masturbation; form of attack is acute, depressed. There is no accompanying bodily disorder. First symptoms of the disease were manifested about July 1st 1894, by loss of memory: he will not wear his clothes. This is the 1st attack. Insanity now manifested in that he will not wear his clothes; by filthy habits; cannot give any account of himself: Patient is neither dispposed to injure others, nor suicidal; but is of filthy & destructive habits. If he has been restrained or confined is unknown; He has not been under medical treatment, so far as known.

July 12 **On admission**, inspection B.H. (S.R. Complexion light; hair brown; Eyes blue; Condition of skin good; there are 3 small birth marks on right shoulder blade: no scars noted; bodily Condition dirty: no bodily peculiarities noticed; behavior is good). — July 13/94. Slept none; was restless and noisy, all night; Am. Pulse 99 R 39 Tem 98°. Appetite good; bowels free; no cough observed; is restless, nervous & excited today; there is incoherence and hesitancy in speech; he also manifests delusions. No complaints or injuries to report. July 14/94. Slept only 2 hours; was restless remainder of the night. Appetite only moderate; bowels irregular. Is again restless & excited today; talk still incoherent, with delusions. Attempted to run away today & received a slight cut on the chin. " 13 " 14 Pulse (this Am) 102. R 23. Tem 98 3/10 ths. July 15/94. Restless & disturbed, sleeping only 4 hours, last night. Am P 85. R 22 Tem 98 4/10 ths. Appetite fair; bowels more regular; makes no complaints. Is still nervous but not so excited and restless as yesterday. Talks very little in a hesitating and timid manner; is incoherent. " 15

July 16/94. Again passed a poor night, sleeping only about 3 hours. AM. Pulse 92 R 24 Tem — Appetite fair, today. Bowels seem regular. Behavior is much quieter & not so excited. Talks very little & incoherently. — " 16 Makes no complaints. July 17/94. Slept 4 hours last night; was restless. AM. Pulse 86. R 20. In other " 17 respects, about as yesterday. July 18/94. Slept somewhat better, 6 hours, last night. Am. P. 88. R 23. " 18 Is quietly behaved. Talks scarcely any & in a hesitating manner. Appetite fair; bowels regular. —

July 19/94. Fairly restful, sleeping 6 hours, last night. AM. Pulse 92. R 21. Behaves quietly: sits in the " 19 same place, most of the day, while in hall: can scarcely be got to talk; never speaks voluntarily. Appetite fair. " 20 July 20/94. Slept only 5 hours, last night. AM. Pulse 80. R 23. Does not change much from day to day, except " 21 that he is now more quiet & less restless. Talks none. July 21/94. Slept well, 8 hours, last night. — Am. Pulse 80. R 22. Is quiet & harmless. Appetite fair; bowels regular. Talks none at all; will not " 22 even answer questions; bowels regular; makes no complaints. July 22/94. Awake 1 hour, but slept 8 hours, " 23 last night. AM. Pulse 81. R 19. Is about the same, the past few days. July 23/94. Restless & awake for 6 hours & slept only 3 hours, last night. AM. Pulse 76. R 15. Appetite fair; bowels regular. Quietly-behaved; " 24 talks none. July 24/94. Slept 8 hours, last night; awake an hour or so. AM. Pulse 96. R 22. Appears a little brighter, this morning; Continues quietly-behaved. Appetite fair; bowels regular: talks a little, when " 25 questioned closely. July 25/94. Restless & awake for 4 hours & slept only 2 hours, last night. AM. P 88. R 24. Quietly-behaved; sits in one place nearly all the time: is rather nervous. Talks scarcely any. No complaints. " 26 July 26/94. Restless 5 hours, sleeping only about 2 hours, last night. AM. Pulse 100. R 18. Is quiet and peaceable; scarcely speaks except when questioned. Appetite is now quite good; bowels regular.

Summary. Patient, when admitted, was very nervous & excited. Talked rapidly in every incoherent subject; had delusions & was very incoherent in speech & was in the habit of thumping his arms and thighs "to develope his muscle" as he said. He, however, daily became quieter; his excited

1894

Summary cont. actions gradually ceased, his talk became less and less, until now he sits mostly in one place, all day, talks to no one & has become morose and moody. He does not appear to know when he is called or spoken to & is evidently much impaired, mentally. Physical health is Good; he now eats well, and sleeps well; bowels regular. No cough observed, and he has made no complaints. —

July 31 July 31/94. Is about as last described. Talks to no one & will only answer questions by nodding his head. Collects the saliva in his mouth & spits it out or dribbles it down his chin. Does not soil his clothes or bed clothes, though he was dirty one day, this month. He does not appear to be very strong.

Aug 1/31 Aug 1/94. Wt 122 pds. Pulse 84. (D.P.I. note. Last stage of General Paresis). Aug 31/94 Apparently rests & sleeps well, at night. Appetite good; bowels regular & free: no cough noticed; appears in fairly good bodily health. Hair is staid & dry but not flaky. Behavior is, for the most part, quiet, with occasional outbursts of temper. No complaints or injuries to report. Talks very little, but answers questions with fair intelligence. Has the practice of slapping himself, with his hands. (Was 6 days dirty during month).

Sep 1/30 Sep 1/94. Wt 129 pds. Pulse 84. Sep 30/94. Patient appears to be slightly improving both in health and intelligence. In other respects, no special change to note. (Was dirty 5 days during period 10th to 30th Sept).

Oct 1/31 Oct 1/94. Wt 132 pds (Is steadily gaining in flesh). Pulse 86. Oct 31/94. Is still gaining in strength, but no change is observable in his mental Condition. Habits have become more deadly, of late.

Nov 1/30 Nov 1/94. Wt 134 pds. Pulse 90 — Nov 30/94. Appetite Good. Patient appears the in fairly good health; has a staggering gait and is easily knocked down. He is noisy & quarrelsome, at times. —

Dec 1/17 Dec 1/94. Wt 141 pds (a gain in flesh). Pulse 92. Dec 27/94. Patient Carl Asp struck Stowaser with the Cover of a Cuspidore, on the nose, this morning. Dec 29/94. Transferred to B3, last " 24

1895 Jan 2/31 Jan 2/95. Wt 148 pds (a further gain in weight). Pulse 74. Jan 31/95. No Change noted. —

Feb 1/28 Feb 1/95. Wt 151 pds. P 75. Feb 28/95. Appetite good. Bowels regular. Behavior very noisy at times & he is easily provoked; makes himself rather offensive toward his fellow-patients. Habits, clean, but is slovenly in dress. Does not work.

Mar 1/31 March 1/95. Wt 153 pds. P 90. Mar 31/95. No change noticeable. —

Apl 1/30 Apl 1/95. Wt 174 pds (has made a very marked gain in flesh, the first month). Pulse 100. —

" 11 Apl 11/95. Limbs are swollen up considerable, & also his arms: appetite fair; did not eat any supper; " 13 was put to bed as he acted badly when arrived. Apl 13/95. Slept only 5 hours last night. Restless. " 14/11 Apl 14/95. Did not sleep any, all night. was quite noisy. Could not be kept in bed. Apl 15/95. Restless & " 25 noisy 4 hours. Apl 25/95. appears to be failing: Can scarcely stand. Appetite fair. Bowels very loose, " 30 and more very often. Apl 30/95. Grows weaker: not so well, to day. appetite failing. Transferred to F W.

May 1 May 1/95. Was put to bed, there. May 3/95. Restless 4 hours, sleeping only 4 hours, last night. Bowels moved twice; " 3 is on liquid diet. May 3/95. Wt 131 pds. (a great loss in flesh). Is given baths. Is much worse since. " 8 May 8/95. Patient lies steadily in bed. Still on liquid diet. Bowels regular. Habits filthy. Soils bed " 23/31 frequently. Baths continued, daily. May 23/95. Steadily lies in bed. May 31/95. Still confined to bed. Never speak above a whisper. Sleept poorly, at night, for a time. Sleeps most all night, now. Habits still very filthy. Is still on liquid diet. (see attached nurse's record).

June 10 June 10/95. Lies steadily in bed. Sleeps poorly. Quite noisy, at times: frequently cries out at the " 22 top of his voice. Habits filthy; soils bed frequently. June 22/95. Lies in bed, steadily. Is, at times, quite active; running his arms about & crying out, in a loud voice: appears to be afraid of something; " 30 June 30/95. No change noticeable. Patient lies steadily in bed. Habits are very filthy —

To Jacuzzi Book A Folio 165 —

Personal and Medical History of John Scanlon Jr (or No 2)

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3778.
Residence, 661 DeSoto St St Paul
Date Admission, 16th July 1894.
Admitted by, D Kilbourne Hour, 7 P.M.
How Sent, John B. Oliver Jr of B. Ramsey County
Sex, Male
Age, 35
Civil Condition, Married
Children, Yes.
Age Youngest Child, —
Occupation, Engineer
Degree Education, Probably Quite Good
Profession Religion, Is a church Member
Habits, Good
Nativity, St Paul Minnesota
Physicians Committing, Perry H. Millard & A.W. Davis
Correspondents, none given in papers — write — 667 DeSoto St St Paul

No. for Year, 348.
Insane Relatives, Father in this hospital, now.
Cause Exciting, "The General R.R. Strike"
Cause Predisposing, Excessive.
Form,
Accompanying Bodily Disorder, none
Suicidal or Not, has threatened suicide, also others.
Date of this Attack, two weeks ago
Duration, Two weeks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, — 35
Time of Leaving, 2nd —
Time in Hospital, 10 mo.
Result, Discharged Nov 6/94 = Improved

HE WAS NOT A "SCAB."

But a Brave and Faithful Employe Who Stood by His Post.

In yesterday morning's paper, in an exclusive account of how Engineer Scanlan had been driven insane by the therats of strikers, the engineer was referred to as a "scab." The expression, however, was quoted and was meant to imply that Scanlan was called a "scab" by the strikers. Scanlan was not a "scab." He was a member of the brotherhood in good standing and highly respected by brotherhood men. He was an honest, brave and faithful employe, whose ideas of duty were too high for the strikers to understand, and if they designate such men as "scabs" then the term is one of honor and not of reproach.

EXAMINATION ON ADMISSION.

Exd. by Dr. Phelps July 25/94.

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Slightly
Depressed,
DELUSIONS:
Systematized or Not, not systematized, with regard to
Special Subjects, his own acts & the "Strike" &c
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Slightly incoherent; rambles
Voluble or Reticent, from one topic to another, with
Jaded Ideas of a half reasonable character.

Personal and Medical History of John Scanlon Jr (or No 2)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft ½ in WEIGHT, 150 pds. NUTRITION, loss of weight 175 pds to 150 pds in 14 mos; but apparently good.
WOUNDS OR ABNORMALITIES, none — (See "D.R." on next page) -
TONGUE, Tremors, Slight Coatings, Slight coating Promptness Movement, prompt
PUPILS, Equality, Equal Size, Normal
Response Light, Good Accommodation, Good
SIGHT, Good
HEARING, —do—
COORDINATION, Arms, Impaired; fingers tremor, eyes shut slight impairment
Legs, —do—; Standing on foot, slight trouble -
TREMORS, Hands, Tongue, Slight
Facial Muscles, General,
REFLEXES, Patellar, Equal to scale.
Other Reflexes,
ARTICULATION, Hesitating, prompt Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Strong & palpitating
LUNGS, — Good —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Kept Careless,
BOWELS, Normal, Normal Constipated, Irregular,
APPETITE, Good, yes Medium, Poor,
SLEEP, Good, Poor, at times Irregular,
PULSE, 108 RESP., TEMP., Normal
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, Probably 6 months ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations, Father —
Brothers or Sisters,

Personal and Medical History of John Scanlon Jr (or No 2)

HERBERT, PUDLAN & CHAMBERS, DAVENPORT, IOWA

Whole No. 3778.
Residence, 661 DeSoto St. St Paul
Date Admission, 16th July 1894.
Admitted by, Kilbourne Hour, 7 PM
How Sent, John. D. Oliver Jail. Ramsey County
Sex, Male
Age, 35.
Civil Condition, Married
Children, Yes.
Age Youngest Child, —
Occupation, Engineer
Degree Education, probably fair, good
Profession Religion, In church Member
Habits, Good —
Nativity, St Paul, Minnesota
Physicians Committing, Perry & Meland & H.W. Davis
Correspondents, none given in papers —
wife - 867 DeSoto St St Paul

No. for Year, 348.
Insane Relatives, Father in the hospital, now.
Cause Exciting, "The General R.R. Strike"
Cause Predisposing, Heredity.
Form,
Accompanying Bodily Disorder,
Suicidal or Not, has thro
Date of this Attack, two wee
Duration, Two weeks
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, — 35 —
Time of Leaving, 2nd June 1894 —
Time in Hospital, 10 mos + 17 days
Result, Discharged Nov 6/94 = Improved

as to Insane Alien. The peoples were estimated at 4,000 head, of which about 2,000 head were credited to Texas. This week creates this corresponding week last year, 72,239 head for the corresponding week last year against 6,418 head for last week amount to 25,000 head. The Hog market was Weak early and Lower, but it blazed up a little further along by the middle of the forenoon, and was firm at yesterday's closing prices. There was a good demand from local packers, nearly all the houses being literally cluttered up. From 4 o'clock to 5 o'clock was consolidated for hogs on sale were very odd thousands of hogs left over. The Investment shippers also buying more freely, the market opened lower, but it blazed up a little further along by the middle of the forenoon, and was firm at yesterday's closing prices. There was a good demand from local packers, nearly all the houses being literally cluttered up. From 4 o'clock to 5.10 was consolidated for hogs on sale were very odd thousands of hogs left over. The Investment shippers also buying more freely, the market opened lower, but it blazed up a little further along by the middle of the forenoon, and was firm at yesterday's closing prices. There was a good demand from local packers, nearly all the houses being literally cluttered up. From 4 o'clock to 5.10 was

EXAMINATION ON ADMISSION.

Exd by Dr. Phelps. July 1894.

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted, Slightly
Depressed,
DELUSIONS:
Systematized or Not, not systematized, with regard to
Special Subjects, his own acts & the "Strike" re
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Slightly incoherent; rambles
Voluble or Reticent, from one topic to another, with
Jolted Ideas of a half reasonable character.

Personal and Medical History of John Scanlon Jr (or No 2)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft ½ in WEIGHT, 150 lbs. NUTRITION, loss of weight 176 lbs to 150 lbs in 4 mos; but apparently good.
WOUNDS OR ABNORMALITIES, none — (See "S.R." on next page) -
TONGUE, Tremors, Slight Coatings, Slight coating Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Good Accommodation, Good
SIGHT, Good
HEARING, — do —
COORDINATION, Arms, Impaired; finger to nose, eyes shut Slight impairment.
Legs, — do —; Staggering in foot, Slight trouble -
TREMORS, Hands, Tongue, Slight
Facial Muscles, General,
REFLEXES, Patellar, Equal to + scale -
Other Reflexes,
ARTICULATION, Hesitating, prompt Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Strong & palpitating
LUNGS, — Good —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Kept Careless,
BOWELS, Normal, normal Constipated, Irregular,
APPETITE, Good, yes Medium, Poor,
SLEEP, Good, Poor, at times Irregular,
PULSE, 108 RESP., TEMP., normal
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, probably 6 months ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,")
Mother or Mat. Relations,
Father or Pat. Relations, Father —
Brothers or Sisters,

Personal and Medical History of John Scanlon Jr (or No. 2).

1894 SHARRATT, PUGLAR & CHAMBERS, DAVENPORT, IOWA.

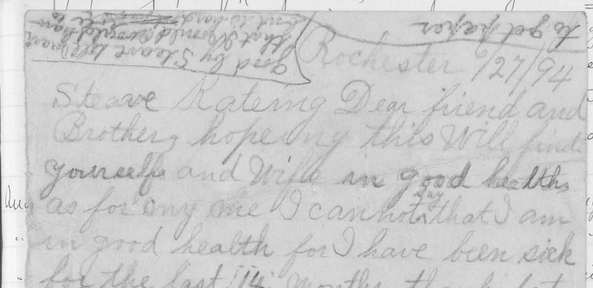
This patient was brought here by Deputy Sheriffs P.G. Haas & H.W. Chapek, with the following history of case. Is an Engineer by profession; habits, regarding temperance & morality, good; there is history of heredity, his father being at the present time, an inmate of this hospital. The supposed cause of this attack is the "General R. R. Strike". Form of this attack is acute. There is no accompanying bodily disorder. First symptoms of the disease were manifested two weeks ago; had fear of injury from strikers. This is the 1st attack. Insanity now manifestly delirium. Is disposed to injure others; & has made threats in regard to himself & others. Has no filthy & destructive habits. No peculiarities of disposition &c had been previously observed. There is no history of any bodily disease &c or of any injury to head: He has not been restrained or confined: has received medical treatment so far as is known. The case seems to have been one caused by this "Strike". —

July 16 On admission, was put on B^3 (S.R.). Complexion light; hair dark; eyes gray; condition of skin good; has two marks on forehead; some ulcers on ankle; bodily condition clean; no bodily peculiarities noted; On arrival here, is in a very excited condition). July 17/94. Restless for 6 hours. Sleeping but 3 hours, last night. Am. Pulse 110. R 21. T(e) 99.6. Appetite meagre: bowels seem regular: No cough observed. Is restless and
" 17 excited to-day. Was transferred to C^3. Is talking continually; does not realize his position. "Imaginary
" 18 influences &c". Feet seem somewhat swollen. Pm. Pulse 104 R 20. T(e) 99⅘. July 18/94. Was restless and much disturbed, last night; slept only 3 hours. Am. R 18. T(e) 99.3 Is very restless & excited today; is talking & singing continually; Appetite only moderate; does not yet realize his condition. Transferred to B^3 today. Pm. R 20. T(e) 99.4. Examined to-day in office. Put on following treatment; —
" 19 (For heart); Rx. Tr. digitalis ʒ ii ; aq. ad. ʒ ii ; sig. Teasp. t-i-d. after meals. (For insomnia and excitement), treated only as above for the present; general measures; hot bath, with cold to head at bottom. July 19/94. Was restless for 7 hours & slept only 1 hour, last night. Am. Pulse 106. R 20. T(e) 99.4
" 20 Again, restless & excited, today; has a tendency to be contrary & mean; talks most of the time; and thinks Doctors have got up a job on him". Pm. Pulse 108. R 19. T(e) 99.6. July 20/94. Slept but 2 hours last night; was restless about 6 hours. Am. Pulse 104. Very restless & excited today, again. Appetite only moderate. Is contrary & disagreeable. (Wants to see his father, who is also a patient here).
" 21 July 21/94. Passed a poor night. Am. Pulse 104. Is of a mean disposition. Nervous, restless and
" 22 very excitable. Appetite is becoming quite good. July 22/94. Slept only 2 hours; was restless 6 hours, last night. Am. Pulse 102. Restless today; singing & talking continually; wanting to send messages to K. K. men". (For the past 5 nights, patient has been sleeping in C^2, in a single room). —
" 23 July 23/94. Slept poorly, again last night. Am. Pulse 98. R 21. T(e) 98. About same as reported today.
" 24 July 24/94. Slept only 6 hours, last night. Am. Pulse 102. Appetite good. Still very talkative
" 25 and inclined to be stubborn: "Keeps sending messages to K. K. men". July 25/94. Restless 2 hours; sleeping about 6 hours, last night. Am. Pulse 96. Conduct and behavior, by day, do not change any.
" 26 July 26/94. Slept somewhat better (7 hours), last night. Am. Pulse 102. Is very talkative; wants to have his own way; finds abusive, at times; also bothers the other patients. Appetite continues good.
" 27 July 27/94. Slept 6 hours, last night. Am. Pulse 102. Bowels free; is very restless and inclined to be
" 28 quarrelsome. July 28/94. Again slept 6 hours, last night. Am. Pulse 92. Attendant had trouble with him this morning, as he was annoying other patients; is obstinate; wants to do just as he pleases,
" 29 also quarrelsome. July 29/94. Complained of being sick & vomited some, during the night; appetite

Personal and Medical History of John Scanlon Jr (or no. 2)

1894

July 30 not very good. Slept only about 5 hours, last night. Pulse 98 (this Am). July 30/94. Was very noisy, last night; out of bed, pounding on the door; whistling, singing & pulling his bed about the room. Pl04. Slept very poorly, (only 2 hours) during the night. Summary. Patient, was since admission, has



Rochester 7/27/94

Steave Katering Dear friend and Brother, hoping this Will find yourself and Wife in good health as for my one I can not what I am in good health for I have been sick for the last 14 Months, thanks be to God not to sick to put all the A.R.U. talant, to sleep, say Steave I allways waited untill the rest of the boys got done with there and they old Millston Jack would say dont go yet I would like to ask a few griestions Just a few, say gentel men I want you to tell me the thought if you dont I will tell you when you lie they always said they would, so I went at them first griston was well Gentemen when your down to Pullman did you not take up a lost battle, answer was yes sir I would say thank you gentel men. dont lie if you do I will tell you when you do second griestions was over

" 31 Aug 1/94. Restless & noisy the greater part of last night &
Sep 1 Sep 1/94. Wt 140½ pds (has lost about 10 pounds in flesh, since admission). Pulse 84.
" 3 Sep 3/94. Pugnacious & violent, today. Struck patient, George Berg, while at walking, on hall, he struck another patient (Daniel Lynch), several times on head & in left side, causing him
" 10 much pain. Sep 10/94. Noisy, restless & excited the greater part of each night; sleeps scarcely any
" 15 on some nights, none at all. Conduct & behavior by day, do not change any. Is very restless; also talkative & hours many delusions. Sep 15/94. There has been no change in patients condition.
He does not improve any. Seems to be getting worse. Conduct & behavior, both by day & night, continue about as described above. Is very annoying to the patients & very troublesome. Last night, he was out of bed nearly all the time. Was visited by his brother & cousin, today. —
" 17 Sep 17/94. Patient was, today, moved to C^3. Is quietly behaved, on this ward. Appetite good. —
" 18 Sep 18/94. Noisy 4 hours, during night & destroyed his bedding. Has been quiet, during the day —

(Carried to page 4)

Personal and Medical History of John Scanlon Jr. (or No. 2).

1894 EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy Sheriffs P.G. Haas & H.W. Chapel with the following history of case. Is an Engineer by profession; habits, regarding temperance & morality, good. There is history of heredity, his father being at the present time, an inmate of this hospital. The supposed cause of this attack is the "General R. R. Strike". Some of this attack is acute. There is no accompanying bodily disorder. First symptoms of the disease were manifested two weeks ago; had fear of injury from strikers. This is the 1st attack. Insanity now manifestly delirium. Is disposed to injure others; [illegible] habits. No peculiarities of dis[illegible] history of any bodily disease &c or of any injury [illegible] under medical treatment, so far as is known. "Strike". —

July 16 On admission, was put on [illegible] tion of skin good; has two marked forehead [illegible] ly peculiarities noted;
" 17 On arrival here, is in a very excite[illegible] ut 3 hours, last night. Am. Pulse 110. R 21. [illegible] 99. mued. Is restless and Excited to-day. Was transferr[illegible] position. Imaginary
" 18 influenced &c". Feet seem fo[illegible] July 18/94. Was restless and much disturbed, last night [illegible] ees & excited today; is talking & singing continually [illegible] nduction. Transferred to B[illegible] today. Pm. R 20. [illegible] ing treatment; —
(To heart); Rx. Tr. digitalis 3[illegible] For insomnia and excitement), treated only as above [illegible] cold to head at bettime.
" 19 July 19/94. Was restless for [illegible] S. R 20. Pulse 99 Pm. Again, restless & excited, today [illegible] st of the time; and
" 20 thinks Doctors have put up [illegible] July 20/94. Slept but 2 hours last night; was [illegible] excited today, again. Appetite only medium. Is contr[illegible] (on a patient line).
" 21 July 21/94. Passed a poor nig[illegible] us, restless and very excitable. Appetite is he[illegible] was restless 6 hours, last night. Am. Pulse 104. [illegible] d sent messages to K. K. men". (For the past [illegible] night room). —
" 23 July 23/94. Slept poorly, again [illegible] ued as usual today.
" 24 July 24/94. Slept only 6 [illegible] Still very talkative
" 25 and inclined to be stubborn. "Keeps sending" messages to K. K. men". July 25/94. Restless 2 hours; sleeping about 6 hours, last night. Am. Pulse 96. Conduct and behavior, by day, do not change any.
" 26 July 26/94. Slept somewhat better, (7 hours), last night. Am. Pulse 102. Is very talkative; wants to have his own way; quite abusive, at times; also bothers the other patients. Appetite continues good.
" 27 July 27/94. Slept 6 hours, last night. Am. Pulse 102. Bowels free; is very restless and inclined to be
" 28 quarrelsome. July 28/94. Again slept 6 hours, last night. Am. Pulse 92. Attendant had trouble with him this morning, as he was annoying other patients; is obstinate; wants to do just as he pleases;
" 29 also quarrelsome. July 29/94. Complained of being sick & vomited some, during the night; appetite

Gentelmen dont you know that it takes a large reinforcement of soldiers to win a lost battel, and of corse they would say yes sir, third question Gentelman When your man Howard went down to Pull man and organised those people did you think that the name of A. R. U. would scare old Pullman in to a settelment | they would says; I would say thank (say as)
Gentelmen, forth question Gentelmen when your convention mett in Chicago did not think by saying that you would put a boycott on Pullman Sleepers that you intended to scare old Pullman into a settelment they would yes sir, then I said Gentelman at your convention did not Mr H.V. Debs speak two hours against the strick, and of corse they would yes sir. this is the very old Pullston jack put them on to clear every time, say Stave we had an A.R.U. Dochter on our road but he is not there now he lost his little of $5-00 2,50 a year he was crying (Sunday) I was jail but old Pullman is not crying I was in jail crying for two days, say Steve I was 2 days and 2 nights down hear it is to hard place to

Personal and Medical History of John Scanlon Jr (or no. 2)

1894

July 30 not very good. Slept only about 5 hours, last night. Pulse 96 (this Am). July 30/94. Was very noisy, last night; out of bed, pounding on the door; whistling, singing & pulling his bed about the room. Pl04. Slept very poorly, (only 2 hours) during the night. Summary. Patient, ever since admission, has been restless & much disturbed at night, sleeping poorly. By day, has been very restless & excited: of a mean & obstinate disposition, quarrelsome & annoying to the other patients: shows delusions, (seemingly of persecution); keeps writing, and sending messages to K. K. men and lawyers. He walks out daily. Appetite medium; bowels regular. Physical condition good. Patient has steadily refused to take medicine, giving as his reason "that it will do him no good." Habits are cleanly.—
Augs 1/3 Aug 1/94. Slept 8 hours; restless 8 hours last night. Aug 3/94. Restless & noisy the greater part of last night & slept only 2 hours or so. Am. Pulse 130. Aug 4/94. Restless & noisy 8 hours, slept but 1 hour, last night
" 4 has continued very restless & noisy, by day, also: at times very stubborn. Pulse, today, 118. Aug 5/94. Pulse 108.
" 5 Aug 6/94. Has continued noisy & restless at night & has been sleeping very poorly. Also, noisy & restless,
" 7 each day. Had trouble with him in the morning, & keep him in the "Alcove". Destroys bed clothes during night.
" 9 Aug 8/94. Still noisy, restless & sleeping very poorly. Today, is very bothering & annoying to the other patients,
" 11/12 getting them excited. Pulse 105. Aug 11/94. Restless 8 hours, Slept only 1 hour, last night. Aug 12/94. Noisy
" 13/14 & restless, all night; slept none. Aug 13/94. Slept none; was restless & noisy, all last night. Aug 14/94. Was
" 15 noisy 7 hours & slept but 2 hours, last night. Am. Pulse 102. Aug 15/94. Very noisy & obstreperous, today;
" 16 Am. Pulse 99. Aug 16/94. Noisy 8 hours, slept but 4 hours, last night. Am. Pulse 100. Has to keep him
" 17 in the "Alcove", all day. Did not want to keep his clothes on. Aug 17/94. Restless 2 hours, noisy 6 hours,
" 21 and slept only 1 hour, last night. Aug 21/94. Noisy, the greater part of the past 4 nights & has slept very poorly. Had a black eye & swollen cheek when he appeared in hall, in the morning. Cause not known.
" 28 Aug 28/94. Has been nightly, restless & noisy, sleeping very poorly. Is noisy restless & excited, by day, & is very annoying to the other patients, exciting them, & causing much trouble. Was, last night, moved to C3, to sleep there. Has restless & noisy for 7 hours & slept only 1 hour. Has not eaten any breakfast. During supper today; says "he will not eat, until he sees a Priest". Very noisy & troublesome.
" 29/30 Aug 29/94. Fed by nurse, today. Aug 30/94. Fed by nurse at 8:30 Am & again at 5:30 Pm.
" 31 Aug 31/94. Continues noisy restless & excited at night; also, by day. Sleeps very poorly; some night, none at all. Did not eat any breakfast or dinner, today. Drank some milk at 5:30 Pm. Very annoying to other patients, exciting them. Is a very troublesome patient. Is regularly taken to C3, to sleep there. —
Sep 1 Sep 1/94. Wt 140½ pds. (Has lost about 10 pounds in flesh, since admission). Pulse 84.
" 3 Sep 3/94. Pugnacious & violent, today. Struck patient, George Berg, while out walking, in hall, he struck another patient (Daniel Lynch), several times on head & in left side, causing him much pain. Sep 10/94. Noisy, restless & excited the greater part of each night; sleeps scarcely any
" 10 & some nights, none at all. Conduct & behavior by day, do not change any. Is very restless; also talkative & hears many delusions. Sep 16/94. There has been no change in patients condition.
" 16 He does not improve any. Seems to be getting worse. Conduct & behavior, both by day & night, continue about as described above. Is very annoying to other patients & very troublesome. Last night, he was out of bed nearly all the time. Was visited by his brother & sister, today. —
" 17 Sep 17/94. Patient was, today, moved to C3. Is quietly behaved, on this ward. Appetite good. —
" 18 Sep 18/94. Noisy 11 hours, during night & destroyed his bedding. Has been quiet, during the day —

(Continued to page 4)

Personal and Medical History of Wadsworth Raymond

EBERT, PUCAS & CHAMBERS, DAVENPORT, IOWA

Whole No. 3779
Residence, 764 Hawthorne St. St Paul
Date Admission, 16th July 1894.
Admitted by, Dr Kilbourne Hour, 7 PM.
How Sent, John B. Oliver, Jof C. Ramsey County.
Sex, Male
Age, - 22 -
Civil Condition, single
Children, None
Age Youngest Child, —
Occupation, Has none.
Degree Education, not given
Profession Religion, Not Stated
Habits, Sensitive, but given to Masturbation for years.
Nativity, St Paul, Minnesota
Physicians Committing, A W. Dunning & W. D. Kelly.
Correspondents, (Mothers address) Mrs Raymond
764 Hawthorne St

No. for Year, 349.
Insane Relatives, none
Cause Exciting, Masturbation
Cause Predisposing, not given.
Form,
Accompanying Bodily Disorder, Sad epilepsy when a boy.
Suicidal or Not, not
Date of this Attack, found 3 years ago. —
Duration, about 3 years.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, abut 19 -
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Dr by D. Phelps - July 18/94 -

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Slightly weak - minded
Quick or Sluggish,

MEMORY:
Past Events, Fairly good
Recent Events, } probably good
Special Subjects, }

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

REASONING POWER:
Ordinary Subjects, somewhat impaired
Own Mental State, —
Special Subjects, —

GENERAL DESCRIPTIVE REMARKS:
Caution as of moderate feeblemindedness —

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

DELUSIONS:
Systematized or Not, } no delusions noted
Special Subjects, }
Transitory or Not, }

HALLUCINATIONS:

ILLUSIONS:

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

Personal and Medical History of Wadsworth Raymond

3779
27/3rd 349 M Wadsworth Raymond (Patschosky).

Copy of Order for Hearing Petition of Lucy R. Patschosky - on
Monday, 13th January 1902 for appointment of
as guardian for
Wadsworth Raymond Patschosky insane; served and
service admitted Papers filed 24th Decr 1901.

(Papers filed with commitment papers.)

Hearing at Probate Court - Room, Court House, St Paul

ADMISSION.—(Continued.)

TERISTICS.

NUTRITION, Good -
next page
Raw Promptness Movement, Prompt
Size, normal
modation,

COORDINATION, Arms, fairly good; finga to nose, eyes shut, good.
Legs, — Do — Standing upfoot, fair.
TREMORS, Hands, Tongue, fairly steady
Facial Muscles, General,
REFLEXES, Patellar, equal - about ↑ -
Other Reflexes,
ARTICULATION, Hesitating, Good
FACIAL EXPRESSION, Fair
SENSIBILITY,
HEART, Normal
LUNGS, — Do -
EXAM. URINE.



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

HISTORICAL.

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

Personal and Medical History of Wadsworth S.

EUBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3779
Residence, 764 Hawthorne St. St Paul
Date Admission, 16th July 1894
Admitted by, Dr Kilbourne Hour, 7 PM.
How Sent, John B. Olivier, Jef. Co. Ramsey County
Sex, Male
Age, 22
Civil Condition, single
Children, None
Age Youngest Child, —
Occupation, Has none.
Degree Education, not given
Profession Religion, not stated
Habits, Temperate, but given to Masturbation for years.
Nativity, St Paul, Minnesota
Physicians Committing, A. W. Dunning & W. D. Kelly
Correspondents, (Mother's address) Mrs Raymond
764 Hawthorne St.

No. for Year, 3749
Insane Relatives, none
Cause Exciting, Masturbation
Cause Predisposing, not given
Form,
Accompanying Bodily Disorder, had Epilepsy
Suicidal or Not, not
Date of this Attack, found 3 years ago.—
Duration, about 3 years.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, abut 19
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Dr. D. Phelps — July 18/94 —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, slightly weak-minded
Quick or Sluggish,

MEMORY:
Past Events, Fairly good
Recent Events, } probably good
Special Subjects, }

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

REASONING POWER:
Ordinary Subjects, somewhat impaired
Own Mental State, —
Special Subjects, —

GENERAL DESCRIPTIVE REMARKS:
Coarctation of moderate feeblemindedness—

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

DELUSIONS:
Systematized or Not, } no delusions noted
Special Subjects, }
Transitory or Not, }

HALLUCINATIONS:

ILLUSIONS:

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

Personal and Medical History of Wadsworth Raymond

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10¼ WEIGHT, 144 lbs. NUTRITION, Good —
WOUNDS OR ABNORMALITIES, See "S. R." insert page
TONGUE, Tremors, fairly steady Coatings, none; fairly clean Promptness Movement, Prompt
PUPILS, Equality, equal Size, normal
Response Light, Good — Accommodation,
SIGHT, Good
HEARING, Do — Do —
COORDINATION, Arms, fairly good; finger to nose, eyes shut, good.
Legs, — Do — Standing on foot, fair.
TREMORS, Hands, Tongue, fairly steady
Facial Muscles, General,
REFLEXES, Patellar, equal — about 7 —
Other Reflexes,
ARTICULATION, Hesitating, Good
FACIAL EXPRESSION, Fair
SENSIBILITY,
HEART, Normal
LUNGS, — Do —
EXAM. URINE.



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

HISTORICAL.

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

Personal and Medical History of Wadsworth Raymond

1894 HERBERT, PUDLAN & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff B.C. Haas, with the following history of case. Habits are temperate, but he has been given to Masturbation for years. There is no hereditary history. The supposed cause of this attack is masturbation. Symptoms have developed very gradually for three years. This is the 1st attack. Insanity is now manifested by irritability of temper, indifference and depression. Is disposed to injure others from premeditation, but is not suicidal, nor filthy nor destructive. Patient had Epileptic convulsions when a boy; was also in School for Feeble-minded at Vainbauet [illegible] some months. If he has been under medical treatment, is not stated.

July 16 — On admission was put on B.2. (S.R. Complexion light; hair light; eyes gray; condition of skin good; no marks or scars noticed; bodily condition clean; no bodily peculiarities observed; is very well-behaved).

" 17 — July 17/94. Was restless, sleeping only about 5 hours, last night. AM. Pulse 100. T. 99.2. Appetite is good; bowels generally free: no cough noticed. Behavior is good: he talks freely; no delusions noted. Works some.

" 18 — P.M. Pulse 96. T. 98.8. No complaints or injuries to report. July 18/94. Again restless, sleeping only 5 hours, last night. AM. Pulse 94. T. 98.8. Behaves well. Makes no complaints; works some on ward. PM. Pulse 92. T. 98.6. Examined to day in office. Family healthy (for masturbation). Was put on following treatment. Ry. Bromide Pot. dol. ℥ viii. Aq. ℥ ii l-i.a-. July 19/94. Quiet & slept 8 hours, last night. AM. Pulse 88. T. 99.4. Appetite good. Answers questions freely; works some; does not walk[illegible].

" 20 — PM. Pulse 86. T. 99.2. July 20/94. Again, slept well (8 hours) last night. Laughs when talking,

" 21 — and appears rather silly: no delusions noted. July 21/94. Appetite good; talks quite freely. Works,

" 22 — some. AM. Pulse 90. July 22/94. AM. Pulse 92. July 23/94. Continues to rest & sleep well,

" 23 — at night. Appetite keeps good; he behaves well; makes no complaints: no delusions noted. Works

" 28 — well on the ward. July 28/94: Since last noted, has been sleeping well, each night. Pulse, taken each morning, has been somewhat accelerated. He has been quiet & well-behaved. Appetite good; bowels regular; talks freely; no delusions have been noted: reads & sews; plays games. Acts foolishly, at times, talking & laughing to himself. Works some in the hall; is on medicine. Transferred to A! today

" 30 — July 30/94. Continues quiet & well behaved — otherwise about as described in last note. Is beginning to work.

" 31 — July 31/94. Patient talks a little wildly, at times. Says his people put him in to get the share of his property. Still foolish in some of his actions & manner. Does not work any. — — —

Aug 1/31 — Aug 1/94. Wt 147½ pds. Pulse 64. Aug 31/94. Apparently sleeps & rests well. Appetite good; bowels are regular. Quiet & well-behaved. Minds what is said to him, but acts foolishly. Habits are clean.

Sept 4 — Sept 4/94. Wt 152½ pds (has made some gain in flesh). Pulse 90. Has been working in kitchen for some days.

" 29 — Sept 29/94. Keeps about the same. Quiet & well-behaved. Works daily in kitchen. Habits clean.

Oct 1/31 — Oct 1/94. Wt 152 pds. Pulse 58. Oct 31/94. Uniformly quiet & well-conducted, though some-what silly in his ways. Seems quite Happy & Contented. Worked in Kitchen 28 Days this month. Habits clean.

Nov 1/30 — Nov 1/94. Wt 159½ pds. Pulse 78. Nov 30/94. Behavior good; health good; is of clean habits. Works in the

Dec 3/31 — kitchen, all the time. Dec 3/94. Wt 160 ½ pds. Pulse 82. Dec 31/94. Behaves well; talks silly & childish;

1895 Jan 3/31 — worked in kitchen 29 Days, during this month. Jan 3/95. Wt 158 pds; pulse 84. Jan 31/95. Behavior fair. Has not been working in kitchen since 1st January. Says he does not like it there, but he does some work in the dining-room. Feb 1/95. Wt 158 pds. P80. Feb 28/95. Behavior fair. No delusions noted.

Feb 1/28 — Talks freely, but somewhat silly & childish. Plays "fool", once in a while. Works some in dining-room.

Mar 1/31 — March 1/95. Wt 158 pds. Pulse 76. March 31/95. No change, since last months report.

Personal and Medical History of Wadsworth Raymond

1895

Apl 1 — April 1/95. Wt 159 pds. Pulse 78. (Dr. Paste: Appears quite well, except rather dull visits by himself).

" 30 — April 30/95. Behaves well. Talks freely, but is somewhat incoherent or silly; laughs to self without any cause. Appetite good: bowels regular. Has not corresponded with his people, until lately. Habits are clean & tidy.

May 31 — May 1/95. Wt 156½ pds. Pulse 92. May 31/95. Talks freely, but very fully incoherently. Is very lazy and

June 30 — does not want to work, but he helps a little, in dining-room. June 1/95. Wt 156 pds. P86. June 30/95. He is very restless, when at rest, wanders away from the crowd. Still helps some in dining-room

July 31 — no change in mental condition specially noticeable. July 1/95. Wt 156 pds. P92. July 31/95. About the same, in every way, from month to month. Seems somewhat anxious to get away. Health good.

Aug 1/13 — Aug 1/95. Wt 153 pds. Pulse 94. Aug 13/95. Worked in kitchen, the past 3 days. Still anxious to go.

" 19 — Aug 19/95. Of late, has been continually talking of going home. (for some weeks); and would not stay with the crowd, unless watched closely: worked some on ward, if asked, but was very lazy and inclined to be idle. While out for a walk to day he slipped through the cornfield. Search was made for him, but without effect. Patient was not well mentally, but strong & healthy physically.

" 21 — Aug 21/95. Was found wandering about the R.R. Station, this evening & brought back by a

" 31 — hack-man. Was put on B.2. (7 30 PM). Aug 31/95. No change: acts foolishly: laughs & talks to

Sept 2/7 — himself. Works some on ward, & also in dining-room. Sep 2/95. Wt 156 pds. Pulse 96. Sept 7/95. Today,

" 30 — transferred to B.2. Sep 30/95. Note, for several months back, still held good, at this date.

Oct 1/17 — Oct 1/95. Wt 156 pds. Pulse 86. Oct 17/95. Does not seem so well as usual: rather depressed in spirits:

" 31 — has a bad cold. Oct 31/95. Seems improving in spirits: also does not talk as foolishly & laugh

Nov 1 — as [illegible] some time past. Physically, very well. Nov 1/95. Wt 155 pds. P82. Dec 1/95. Wt 159 pds.

Dec 1/31 — P88. Dec 31/95. Not much change. Simple, foolish, talks a great deal of nonsense. Has delu-

1896 Jan 1/31 — sions. Works in dining-room. Jan 2/96. Wt 157 pds. Pulse 80. Jan 31/96. Transferred to C.3 (on account of a general change of wards). Jan 31/96. Condition about same, all the time

Feb 1 — Feb 1/96. Wt 155 pds. P102. March 1/96. Wt 153 pds. P90. Apl 1/96. Wt 157 pds. P82. Apl 30/96. Condition of patient

Mar 1 — is about same, all the time. Is foolish & simple & talks foolishly: no improvement noticed. Physical condition

Apl 1/30 — Good: no delusions noted: makes no complaints.

May 1/30 — Summary Nurses Notes by Dr. Phelps. Patient very feeble-minded in his talk: Says silly things & is even

to — incoherent: Health uniformly good: Is rather more silly of late than he used to be. Wt. 150 to 158 lbs.

Aug 1/97 — Continued by Dr. Herzog. 150½ lbs. Fairly well behaved: somewhat silly & demented, laughs at nothing

8/1/97 — Neat & clean. No marked delusions but is feebleminded. Nov 1 Wt. 148 lbs. Rather more troublesome & more demented: Is destructive to plants & curtains: Restless & picking at hands Jan 1 '98 Still continues destructive: Jan 3 Destroyed two plants: Placed in bay: 6 Destroyed plants - ordered to go to bay: Jan 8 13

15 — Behavior fairly good: Works in dining room. Still silly & demented, laughing to himself. Feb 1 Somewhat restless: Goes walking: Very well behaved, but mildly demented: Apr 2 Still works in dining room: Habits clean, appetite good: Talks rather more to himself than formerly. Still laughs to himself

Apr 5 — Trans. to B.3. Aug 1 '98 Childish & simple: Makes remarks when anyone enters ward which are simple & foolish. Dec 1 '98 Wt. 149 lbs. 5 Trans. to Annex 10 Commenced to work in Laundry. No change in mental condition. Feb 1 July 31 '99. Wt. 152. Appetite good: Behavior good: Sleeps well: No mental change.

Aug 1 — Jan 31 1900 (Dr. Chaffee) Wt. 154 lbs. Very demented & silly. Conversation rambling & incoherent: Is well behaved & tidy: works in laundry.

Carried to Transfer Book "A" page 371

Personal and Medical History of John Franklin Wright

EBERT, FIELAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3780.
Residence, 1403. 25th Ave. N. Minneapolis
Date Admission, 16th July 1894.
Admitted by, Dr Kilbourne Hour, 7 PM.
How Sent, John H. Steele, Jof C. Hennepin County
Sex, Male.
Age, 31 (as 28th of last March).
Civil Condition, Married
Children, Yes; 3.
Age Youngest Child,
Occupation, Bricklayer
Degree Education, not given
Profession Religion, not a Church Member
Habits, Temperate & of good morals.
Nativity, Belaire, Ohio.
Physicians Committing, P M Hall and J F Quinby
Correspondents, John Wright (Father)
1403 – 25th Ave No

No. for Year, 350.
Insane Relatives, None
Cause Exciting, loss of work & consequent mental worry.
Cause Predisposing, Previous attack
Form,
Accompanying Bodily Disorder, None
Suicidal or Not, not.
Date of this Attack, January 1894
Duration, about 6 months – off & on –
No. of Attack, 2nd (1st attack 6 or 7 years ago)
No. of Admissions, 1st.
Age First Attack, about 27.
Time of Leaving, May 24. 1900
Time in Hospital, 5 yr 10 m. 8 d.
Result, Disc. Sept. 29. 1900
~~Recov~~ Improved

EXAMINATION ON ADMISSION.

Emily D. Phelps, July 18/94

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, slightly sluggish
MEMORY:
Past Events, Good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Fair
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Visit much afraid of him – He accused her of adultery – Talks in a religious tone & somewhat incoherently – Is paranoiac – Writes her he will leave, if he has to die for it.
Memo given me Oct 29/94 PM

EMOTIONAL STATE:
Normal, Calm, somewhat depressed
Indifferent,
Exalted,
Depressed, Somewhat
DELUSIONS:
Systematized or Not, Not noted
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent; but in conversation, did not come up to
Voluble or Reticent, distinct delusions; showed lack of judgment, and tendency to eccentric modes of thinking.

Have Thou A Wheel

Have thou a new wheel with glinting spokes
Mount the saddle and 'pon it ride,
Cleave the air; and the waters part,
Pump up the blood till the roses start,
In thy fair checks; in the harvest tide.

They build it now with a host of names,
It matters not if it's a King or Queen,
So it is well-geared and has a dress guard.
Respect the law or thou mayest get marr'd.
The fat folks ride, so do the lean.

Should you long for peace or active rest,
Take to this swift, recreative toy.
Speed thro' the park in the quiet eve,
Have a friend along who from cares relieve,
It may afford thee some joy.

Should cupid fling his fiery shaft,
And burden thy heart with sorrow's load—
Change thy habit, get out thy wheel,
Soap the chain, oil the balls of steel,
Press down the pedals, dash down the road.

All Rights Reserved, J F. WRIGHT, 4-5-99-9:30 a. m.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

WEIGHT, 144½ pds. NUTRITION, Slightly impaired.
IES, See "S. R", on next page. Bursae on right hand.
t Coatings, Fairly Clean & normal Promptness Movement, Impaired Some.
al Size, normal
Good Accommodation,

COORDINATION, Arms, Finger to nose, eyes shut, fairly good.
Legs, Fairly good.
TREMORS, Hands, Slight Tongue, Slight
Facial Muscles, General,
REFLEXES, Patellar, Equal – & 5.
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Fair but depressed.
SENSIBILITY,
HEART, Normal
LUNGS, – Do. –
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, ~~Free~~ Constipated, Yes Irregular,
APPETITE, Good, Yes Medium, Poor,
SLEEP, Good, Free Poor, Impaired of late Irregular,
PULSE, qr RESP., TEMP.,
CRANIAL MEASUREMENTS,

HISTORICAL.

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

Personal and Medical History of John Fr[illegible]

HERBERT, PICLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3780.
Residence, 1403. 25th Ave. N. Minneapolis
Date Admission, 16th July 1894.
Admitted by, D. Kilbourne Hour, 7 P.M.
How Sent, John. H. Steele, Jof C. Hennepin County
Sex, — Male —
Age, 34 (on 28th of last March).
Civil Condition, Married
Children, Yes; 3 -
Age Youngest Child, ——
Occupation, Bricklayer
Degree Education, not given
Profession Religion, not a Church Member
Habits, Temperate & of good morals.
Nativity, Belaire, Ohio.
Physicians Committing, P.M. Hall and J. H. Quimby
Correspondents, John Wright (Father)
1403 - 25th Ave No

No. for Year, 350.
Insane Relatives, None
Cause Exciting, loss of work & consequent mental worry.
Cause Predisposing, Previous attack
Form,
Accompanying Bodily Disorder, None
Suicidal or Not, not.
Date of this Attack, January 1894
Duration, about 6 months - off & on -
No. of Attack, 2nd (1st attack 6 or 7 years ago)
No. of Admissions, 1st
Age First Attack, about 27.
Time of Leaving, May 24. 1900
Time in Hospital, 5 yr 10 m. 8 d
Result, Disc. Dept. 29. 1900
Been Improved

EXAMINATION ON ADMISSION.

Emily D. Phelps, July 18 94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused,
Quick or Sluggish, slightly sluggish
MEMORY:
Past Events, Good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Fair
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State,
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Visit much afraid of him - He accused her of adultery - Talks in a religious tone & somewhat incoherently - Is a paranoiac - Writes her he will leave, if he has to die for it.
Memo given Dr Oct 29/94 Pm

EMOTIONAL STATE:
Normal, Calm, somewhat depressed
Indifferent,
Exalted,
Depressed, somewhat
DELUSIONS:
Systematized or Not, not noted
Special Subjects,
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent; but in Conversation, did not own up to distinct delusions; showed lack of judgment, and tendency to eccentric mode of thinking.

Personal and Medical History of John Franklin Wright

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 11 3/4 WEIGHT, 144½ pds NUTRITION, Slightly impaired.
WOUNDS OR ABNORMALITIES, See "S. R", on next page. Bursae on right hand.
TONGUE, Tremors, Slight Coatings, fairly Clean & normal Promptness Movement, Impaired some.
PUPILS, Equality, Equal Size, normal
Response Light, Good Accommodation, —
SIGHT, Good
HEARING, — 5" —
COORDINATION, Arms, Finger to nose, eyes shut, fairly good.
Legs, Fairly Good. -
TREMORS, Hands, Slight Tongue, Slight
Facial Muscles, General,
REFLEXES, Patellar, Equal - & 5.
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Fair but depressed.
SENSIBILITY,
HEART, Normal
LUNGS, — Do. —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, ~~Constipated~~ Constipated, yes Irregular,
APPETITE, Good, yes Medium, Poor,
SLEEP, Good, ~~Poor~~ Poor, Impaired of late Irregular,
PULSE, qv 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, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy-Sheriff John C. Gjertsen, with following history. Habits are temperate and his morals are good. There is no hereditary history. Cause of this attack is loss of work and consequent mental worry. Form of attack is Chronic, depressed. No accompanying bodily disorders. This attack seems to have occurred in January 1894, (probably the 2nd one); but mental vagaries, religious political & other fancies were first manifested 6 or 7 years ago. Insanity is now shown in regard to social, political & religious fancies. Patient is not disposed to injure others, nor suicidal, but, during the attack in January 1894, he was destructive & threw some household goods out of the window. There is no history given of any bodily disease &c, nor of any head injury. Was confined in Jail, at Alton, Illinois, for a while, (probably during one of his "spells").

July 16 On admission. Was put on B² (S.R. Complexion dark; hair dark; eyes blue; Condition of skin, good. Has some scars on right side; bodily condition clean; no bodily peculiarities noticed; behavior is good.)—
" 17 July 17/94. Slept fairly well, last night. AM. Pulse 78. R 17. Tº 98.8 Appetite good; bowels somewhat irregular. Is quiet & well-behaved: talks freely; no delusions noted; PM. Pulse 80 R 18 Tº 99.2. No complaints or injuries to report; works some in the ward. July 18/94. Quiet, sleeping 8 hours, last night. —
" 18 AM. Pulse 76. R 18. Tº 99.2. Appetite good: makes no complaints. Walks leisurely about the hall: talks freely. Examined today in office: the following noted; he shows some anaemia, but no very definite weakness; he had some insomnia, but slept well, last night. A tonic seems all that is needed; I.E. the following R. Strychnia Sulph. gr. 1. Aqua. Gtt. xx strychnia ℥ iii : aq. ad. ℥ viii. Sig. Teaspoonful after each meal. ordinary exercise advised; can perhaps get out to work soon: case is probably too chronic to be affected by
" 19 Electricity; ordinary good diet to be given. PM. Pulse 78. R 19. Tº 99.2. July 19/94. Slept well (8 hours) last night. AM. Pulse 82. R 18 Tº 98.8. Behaves well; talks quite freely; makes no complaints; PM. Pulse
" 20 R 18. Tº 99.4. July 20/94. AM. Pulse 80. Argues on the labor question. Does no work. Appetite good.
" 21 July 21/94. AM. Pulse 78. Behaves well. Reads some; talks freely. Takes medicine. Does no work.
" 22 July 22/94. AM. Pulse 76. July 23/94. AM. Pulse 112 R 24. Tº 99. Talks a good deal about
" 23 politics and R.R. Strike. July 24/94. Complains of a slight pain in his stomach, today.
" 24 July 25/94. AM. Pulse 80. Still given to talking on politics &c. Reads some: plays games. Is on medicine.
" 25 July 25/94. AM. " 90. Behaves well; talks freely; no delusions noted. July 27/94. Since last
" 26 noted, patient has been sleeping well, about 8 hours, each night. Quiet & well behaved; works
" 27 some in the ward. Takes medicine. July 28/94. About the same. Today, transferred to A' —
" 28 Pulse 84. July 29/94. Appetite good; bowels regular: he talks freely & sensibly; plays
" 29 games; helps with the work. Pulse 99. July 30/94. AM. Pulse 86. No material change —
" 30 July 31/94. Continues quiet & well-behaved. Talks quite freely; makes no complaints. Reads some and
" 31 plays games &c. Writes considerably; (see attached letters). Works some in the ward. Habits, Clean.

Aug 1/94 Aug 1/94. Wt 143½ lbs. Pulse 80. Aug 31/94. Quiet & well-behaved. Is writing or reading, almost all
" 30 the time. (Letters are about like Samples attached). Talks quite freely. Still holds delusions &c.

Sept 1/94 Sept 1/94. Wt 149½ lbs. Pulse 76. Sept 30/94. Seems more contented of late. Reads & writes a good
" 30 deal. Quiet & well-Conducted. Helps some with the ward work. Physical health is good. —

Oct 2 Oct 2/94. Wt 151½ lbs. (Has gained 10 pounds in weight since admission). Pulse 76. —
" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion of his time. Works in ward, at times. Yet he still holds to his delusions. Habits neat & clean.

Nov 1/94. Wt 152 lbs. Pulse 74. Has also had a "spell" for about 5 days; acted silly, lying down
" depressed; would sit down as a chair & go to sleep,
some, generally; does some work on the ward.
not had any "spells" during the month. Is somewhat
behaves well. Appetite good; Bowels are free —
petite good; Makes no complaints of bowels; worries
mind, but thinks he is well enough now to take care
physical condition. Feb 2/95. Wt 157½ lbs. Pulse normal.
He still has some peculiar ways & thoughts. Works some.
95. Still behaves well. Talks freely & quite sensibly.
some on ward. Writes occasional letters home.
seems to have improved considerably, the last 2
points. Talks sensibly. Worked in store-room,
mind is good. Physical condition also good.
recently at washing windows & cleaning up &c.
has no complaints, of late; has improved, but
sensibly; no delusions noted; has worked
good Physical condition. Habits clean & tidy.
ions noted: appears much improved mentally.
working in store-room, the past few days.
July 31/95: Behavior good; talks freely & sensibly.
"troubles". Does not worry about home, as before.
al health. Aug 1/95: Wt 164 lbs. Pulse 76.
still keeps up: he talks sensibly: Does good
delusions &c for some months back.
Store-room as 3d & 24th. No change especially
Oct 6/95. Commenced to work at bricklaying
in the new "Rear Centre." Oct 31/95. Very much improved: works daily at brick-laying —
Nov 2/95 Nov 2/95. Wt 163½ lbs. Pulse 80. Nov 20/95. Has been working outside, bricklaying, for Contractor.
" 21/95 Nov 21/95. Did not work today; not feeling well: complains of stomach: Nov 26/95: Resumed his work, today.
Dec 3/95 Dec 3/95. Wt 165 lbs. Pulse 84. Dec 6/95. Quit working; seems to have had some trouble with Butler
" 16/95 about the pay. Dec 16/95. Went back to work. Dec 21/95. Has left off working with Contractor
" 31 Dec 31/95. Behaves well: talks freely & has seemed quite rational, in every way, for a long time,
1895 now. Appetite good: bowels free. Has good personal habits. Sleeps well: Works on wood
Jany 1/96 Jany 1/96. Wt 162½ lbs. Pulse 82. Jany 31/96. Has remained about as described, for several
" 30 months past: Lately, has been given permission to attend Church in town, on Sundays. Eats and
Sleeps well: behavior good - Again, went to work, at his trade, with the Contractor, today. —
Febry 1/96 Febry 1/96. Wt 165 lbs. Pulse 78 - Febry 15/96. Worked at bricklaying 10 days, during month. Feb 26/95: Was,
" 26 today, advised by telegram of the death of one of his children. Was allowed to go home: Expects to return
" 29 in a few days. Febry 29/96 Returned from St Paul. (carried to Transfer Book "A" page 275)

Rochester Asylum for Insane.
Sept. 9th. 1894

Editor of Journal,

Dear Sir

I see by accounts that I believe to be reliable that you have suffered considerable loss both in subscribers and in the volume of your advertising business during the past year or so. I am very sorry if this be true and sincerely hope you will not sustain any further loss, at least regards, one any account. I am truly contrite when I think that I was the means of causing you any loss of business by what I wrote to the Penny Press. I am perfectly willing to bear the principle and cause which

C. J. (over)

1894 HERBERT, PUCKAR & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy-Sheriff John C. Gjertsen, with following history. Habits are temperate and his morals are good. There is no heredit
and consequent mental worry. Form of attack is
His attack seems to have occurred in January 1894,
political & other fancies were first manifested 6 or 7
social, political & religious fancies. Patient is not
attack in January 1894, he was destructive & threw
no history given of any bodily disease &c, nor of any
for a while, (probably during one of his "spells").

July 16 On admission, was put on B2 (S.R. Complexion
face some scars on right side; bodily condition clean;
" 17 July 17/94. Slept fairly well, last night. AM. Pulse 78.
Be quiet & well-behaved: talks freely; no delusions noted
" 18 or injuries to report; works some on the yard. July
AM. Pulse 76. R 18. T 99.2. Appetite good: make
talks freely. Examined today in office: the following
weakness; has had some insomnia, but slept well, last night
R. Strychnia Sulph. gr. 1. Aqua. Qui. ♯ strychnia 3
ordinary exercise advised; can perhaps get out to work
" 19 Electricity; ordinary good diet to be given. PM. Pulse 78. R
night. AM. Pulse 82. R 18 T(R) 98.6. Behaves well; tal
" 20 R 18. T 99.4. July 20/94. AM. Pulse 80. Argues on
" 21 July 21/94. AM. Pulse 78. Behaves well. Reads some
" 22/23 July 22/94. AM. Pulse 76. July 23/94. AM. Pulse
" 24 politics and R.R. Strike. July 24/94. Complains
" 25 July 25/94. AM. Pulse 80. Still given to talking politi
" 26/27 July 26/94. AM. " 90. Behaves well; talks freely
" 28 noted, patient has been sleeping well, about 8 hours, each night. Quiet & well behaved; works
" 29 some on the ward. Takes medicine. July 28/94. About the same. Today, transferred to A1 —
" 30 Pulse 84. July 29/94. Appetite good; bowels regular: he talks freely & sensibly; plays
" 31 games; helps with the work. Pulse 99. July 30/94. AM. Pulse 86. No material change —
July 31/94. Continues quiet & well-behaved. Talks quite freely; makes no complaints. Reads some and
plays games &c. Writes considerably; (see attached letters). Works some on the ward. Habits clean.
Aug 1/31 Aug 1/94. Wt 143½ lbs. Pulse 80. Aug 31/94. Quiet & well-behaved. Is writing or reading, almost all
the time. (Letters are about like Samples attached). Talks quite freely. Still holds delusions.
Feb 1/94 Feb 1/94. Wt 149½ lbs. Pulse 76. Feb 28/94. Seems more contented of late. Reads & writes a good
deal. Quiet & well-Conducted. Helps some with the ward work. Physical health is good —
Oct 2 Oct 2/94. Wt 154½ lbs. (has gained 10 pounds in weight since admission). Pulse 76 —
" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion
of his time. Works on ward, at times. Yet he still holds to his delusions. Habits neat & clean.

I advocated to the decision of the honest fairminded voters of our Glorious Republic. I am no anarchist and never proclaimed the doctrine of anarchy. I am an American Citizen and will maintain the Constitution of my Country even to the rendering up to its service and defence all that remains of my mortal existence, so help me Jesus Christ the only begotten Son of God; and may his peace Come to us both and may we ever be friends and good citizens I was placed here for writing on the condemnation of a frog-pond which was full of scum-ming filthyness of all kinds and I am sure I saw wheels there to. 4 of them but I believe they were wagon wheels and not the kind we populists had when we voted for "Bloody Bridles" Waite and free Silver Coinage. Yes, I was the first man to cast a vote for Gov. Waite of Colorado in 1892. I have seen the man and am satisfied that he is a good man an no anarchist or Anti Christ. He is conscientiously opposed to capital punishment and how then could he be an Anarchist who would stab his fellows through the heart. as Santo did Pres. Carnot of France. I dont believe any true American Citizens want anarchy in this Country and I hope the times will improve without the need of any more bitter strife, hard feelings or blood shed. I trust that those who have capital will now

G.1. (over)

Nov 1/94. Wt 152 lbs. Pulse 74. Normal blood a "spell" for about 5 days; acted silly, lying down t depressed; would sit down as a chair & go to sleep, some. Generally; does some work on the ward. not had any "spells" during the month. Is somewhat behaves well. Appetite good; Bowels are free — petite good; Makes no complaints of bowels; worries mind, but thinks he is well enough now to take care physical condition. Feb 2/95. Wt 157½ lbs. Pulse normal. He still has some peculiar ways & thoughts. Works some. 95. Still behaves well. Talks freely & quite sensibly. some on ward. Writes occasional letters home. seems to have improved considerably, the last 2 points. Talks sensibly. Works in store-room, work is good. Physical condition also good. recently at washing windows & cleaning up &c. takes no complaints of late; has improved, but sensibly; no delusions noted; has worked good Physical condition. Habits clean & tidy. seems noted: appears much improved mentally. working in store-room, the past few days. 95. July 31/95: Behavior good; talks freely & sensibly "troubles". Does not worry about home, as before. physical health. Aug 1/95. Wt 164 lbs. Pulse 76. Still keeps up: he talks sensibly: Appetite delusions &c for some months back. in Store-room as 3d & 24th. No change especially 95. Oct 8/95. Commenced to work at bricklaying in the new "Kean Centre." Oct 31/95: Very much improved: works daily at brick-laying. —
Nov 2 Nov 2/95. Wt 163½ lbs. Pulse 80. Nov 20/95: Has been working outside, bricklaying, for Contractor.
" 21/28 Nov 21/95. Did not work today; not feeling well: complains of stomach: Nov 28/95: Resumed his work, today.
Dec 3/14 Dec 3/95. Wt 165 lbs Pulse 84. Dec 6/95. Quit working; seems to have had some trouble with Butler
" 14/31 about the pay. Dec 16/95. Went back to work. Dec 21/95. Has left off working with Contractor
" 31 Dec 31/95. Behaves well; talks freely & has seemed quite rational, in every way, for a long time,
now. Appetite good; bowels free. Lost good personal habits. Sleeps well. Works on ward
1895 Jany 1/30 Jany 1/96. Wt 162½ lbs. Pulse 82. Jany 31/96. Has remained about as described, for several
months past. Lately, has been given permission to attend Church in town, on Sundays. Eats and
Sleeps well: behavior good — Again, went to work, at his trade, with the Contractor, today. —
Febry 1/15 Febry 1/96. Wt 165 lbs. P 72 — Febry 15/96. Worked at bricklaying 10 days, during month. Feb 26/96: Was,
" 26 today, advised by telegram of the death of one of his children. Was allowed to go home: Expects to return
" 29 in a few days. Febry 29/96 Returned from St Paul. (carried to Transfer Book "A" page 275)

Personal and Medical History of John Franklin Wright

GILBERT, FULTON & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy-Sheriff John C. Gjertsen, with [illegible] history. Habits are temperate and his morals are good. There is no hereditary history. Cause [illegible] is loss of work and consequent mental worry; form of attack is chronic, depres[illegible] bodily disorders. This attack seems to have occurred in January 1894, (probably the [illegible]ues, religious political & other fancies were first manifested 6 or 7 years [illegible] to social, political & religious fancies. Patient is not disfor[illegible] attack in January 1894, he was destructive & threw som[illegible] no history given of any bodily disease &c, nor of any [illegible] for a while, (probably during one of his "spells").—

July 16 On admission. was put on B½ (S.R. Co[illegible] has some scars on right side; bodily condit[illegible]

" 17 July 17/94. Slept fairly well, last night. [illegible] Is quiet & well-behaved: talks freely [illegible]

" 18 or injuries to report; works some [illegible] Am. Pulse 76. R 18. July 19/94 [illegible] talks freely. Examined for [illegible] weakness; has had some [illegible] R. Strychnia Sulph. [illegible] ordinary exercise advised;

" 19 Electricity; ordinary good diet [illegible] night. Am. Pulse 82. R 18. July [illegible]

" 20 R. 18. Temp 99⁴. July 20/94. Am. [illegible]

" 21 July 21/94. Am. Pulse 78. Behaves w[illegible]

" 22/23 July 22/94. Am. Pulse 76. July 23/94. [illegible] Apothics and R. R. Strike. July 24/94. Co[illegible]

" 24 [illegible] in his stomach, today.

" 25 July 25/94. Am. Pulse 80. Still given to talking [illegible] done: plays games. Is on medicine.

" 26/27 July 25/94. Am. " 90. Behaves well; talks [illegible] wants noted. July 27/94. Since last noted, patient has been sleeping well, about 8 hours, [illegible] night. Quiet & well behaved; works some on the ward. Takes medicine. July 28/94. About the same. Today, transferred to A[illegible]

" 28 Pulse 84. July 29/94. Appetite good; bowels regular: he talks freely & sensibly; plays

" 29 games; helps with the work. Pulse 99. July 30/94. Am. Pulse 86. No material Change—

" 30 July 31/94. Continues quiet & well-behaved. Talks quite freely; makes no complaints. Reads some and plays games &c. Writes considerably; (see attached letters). Works some on the ward. Habits clean.

" 31 Aug 1/94. Wt 143½ lbs. Pulse 80. Aug 31/94. Quiet & well-behaved. Is writing or reading, almost all the time. (Letters are about like Samples attached). Talks quite freely. Still holds delusions.

Aug 31/ Feb 1/94. Wt 149½ lbs. Pulse 76. Feb 30/94. Seems more contented of late. Reads & writes a good deal. Quiet & well-Conducted. Helps some with the ward work. Physical health is good.—

Feb 30 Oct 2 Oct 2/94. Wt 154½ lbs. (has gained 10 pounds in weight since admission). Pulse 76.—

" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion of his time. Works on ward, at times. Yet he still holds to his delusions. Habits neat & clean.

Personal and Medical History of John Franklin Wright

Nov 1/94. Wt 152 lbs. Pulse 74. Nov 9/94. Had a "Spell" for about 5 days; acted silly, lying down on his stomach, touching his face to the floor. Felt depressed; would sit down as a chair & go to sleep, several times, a day. Nov 30/94 Keeps about the same, Generally; does some work on the ward.

Dec 3/ Dec 3/94. Wt 154 lbs. Pulse 84. Dec 31/94. Has not had any "spells" during the month. Is somewhat worried, at times. Is anxious to go home. Behaves well. Appetite good; Bowels are free—

1895 Jan 3/ Jan 3/95. Wt 157 lbs. Pulse 78. Jan 31/95. Appetite good; Makes no complaints of bowels; worries about staying here. Admits that he has been out of his mind, but thinks he is well enough now to take care of himself. Writes a few letter home. In good physical condition. Feb 2/95. Wt 157½ lbs. Pulse normal. [illegible] Still has some peculiar ways & thoughts. Works some.

[illegible] 31/95. Still behaves well. Talks freely & quite sensibly. [illegible] works some on ward. Writes occasional letters home.

[illegible] 95: Seems to have improved considerably, the last [illegible] some points. Talks sensibly. Works in Store-room, [illegible] haven't is good. Physical condition also good.

[illegible] worked recently at washing windows & cleaning up &c. [illegible] makes no complaints of late; has improved, but [illegible] freely & sensibly; no delusions noted; has worked [illegible] in good Physical condition. Habits clean & tidy. [illegible] delusions noted: appears much improved mentally. [illegible] been working in Store-room, the past few days.

[illegible] May-July 31/95: Behavior good; talks freely & sensibly [illegible] the "trouble". Does not worry about home, as before. [illegible] physical health. Aug 1/95: Wt 164 lbs. Pulse 76. [illegible] Still keeps up: he talks sensibly; Does not [illegible] any delusions &c for some months back. [illegible] in Store-room as 3d + 24th. No change especially [illegible] 88. Oct 8/95. Commenced to work at bricklaying [illegible] improved: works daily at brick-laying—

[illegible] Has been working outside, bricklaying, for Contractor. [illegible] plains of stomach: Nov 26/95: Examined his work, today [illegible] waking; seems to have had some trouble with Kidneys. Dec 21/95. Has left off working with Contractor [illegible] and quite rational, in every way, for a long time. [illegible] personal habits. Sleeps well. Works on ward

[illegible] Has remained about as described, for several [illegible] months past: Lately, has been given permission to attend Church in town, on Sundays. Eats and sleeps well: behavior good—Again went to work, at his trade, with the Contractor, today.—

Feby/ Feb 1/96. Wt 165 lbs. Pulse 78 — Feby 1/96. Worked at bricklaying 10 days, during month. Feb 26/96: Was, today, advised by telegram of the death of one of his children. Was allowed to go home; expects to return in a few days. Feb 29/96 Returned from St Paul.

(carried to Transfer Book "A" page 275)

Mrs Mary B. G. E. Right.
Authoress of "Health. Key to Scriptures.
The effects of medicine on the human system are in the highest degree uncertain; except, indeed, that it has already destroyed more lives than war, pestilence, and famine, all combined."
Dr. Mason Good, a learned professor of London.
Quotations from Science and Health with Key to the Scriptures.

JESUS the CHRIST.
Glad light & the HOLY
The BRIGHTNESS of GOD
The FATHER in HEAVEN

At Setting of sun good-
he votes that we are lonely
Bless name Thee for Life that by
blessings and favors resting upon
you and yours, I am as ever,
Your Obedient Patient
John Franklin Wright.
A.1.

must it in Lawful enter
so that the poor the needy and
stamin & want & obtain work
for that & ask & men
so that & ask & men
and & wish & plenty come
to all, both rich and poor
and love; many love
I & [illegible] & [illegible] come to be the
[illegible] & [illegible] instance & all
[illegible] & [illegible] through the merits
[illegible] & [illegible] Saviour, Amen
John F. Wright
1405, 25th Ave North.
Minneapolis
Minn.

GIBERT, FULLAR & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy-Sheriff John C. Gjertsen, with [illegible] history. Habits are temperate and his morals are good. There is no hereditary history. Cause [illegible] and consequent mental worry; form of attack is Chronic, depres[illegible]. This attack seems to have occurred in January 1894, (probably th[illegible] political & other fancies were first manifested 6 or 7 years [illegible] Social, Political & religious fancies. Patient is not disp[illegible] Attack in January 1894, he was destructive & threw [illegible] no history given of any bodily disease &c, nor of any [illegible] for a while, probably during one of his "spells").

July 16 On admission, was put on B[illegible] (S.R. C[illegible] Lac some & sore on right side; bodily cond[illegible]

" 17 July 17/94. Slept fairly well, last night. Is quiet & well behaved: talks freely

" 18 of injuries to report; works some[illegible] Am. Pulse 76 R 18. Ja[illegible] talks freely. Examined [illegible] weakness; has had some [illegible] R. Strychnia Sulph [illegible] ordinary exercise advised.

" 19 Electricity; ordinary good de[illegible] night. AM. Pulse 82. R 18 [illegible]

" 20 R. 18. Ja[illegible] July 20/94. AM [illegible]

" 21 July 21/94. AM. Pulse 78. Behaves [illegible]

" 22 July 22/94. AM. Pulse 76. July 23/9[illegible]

" 23 Pilules and R.R. Strike. July 24/94. [illegible]

" 24 July 25/94. AM. Pulse 80. Still given to talking [illegible]

" 25 July 26/94. AM. " 90. Behaves well; talks [illegible]

" 26 noted, Patient has been sleeping well, about 8 hours, [illegible] night. Quiet & well behaved; works

" 27 some on the ward. Takes medicine. July 28/94. About the same. Today, transferred to A! —

" 28 Pulse 84. July 29/94. Appetite good; bowels regular: he talks freely & sensibly; plays

" 29 games; helps with the work. Pulse 99. July 30/94. AM. Pulse 86. No material Change —

" 30 July 31/94. Continues quiet & well-behaved. Talks quite freely; makes no complaints. Reads some and

" 31 plays games &c. Writes considerably; (see attached letters). Works some on the ward. Habits, Clean.

Augt 30 Aug 1/94. Wt 143½ lbs. Pulse 80. Aug 31/94. Quiet & well-behaved. Is writing or reading, almost all the time. (Letter are about like Sample attached). Talks quite freely. Still holds delusions.

Sept 30 Sept 1/94. Wt 149½ lbs. Pulse 76. Sept 30/94. Seems more contented of late. Reads & writes a good deal. Quiet & well-Conducted. Helps some with the ward work. Physical health is good —

Oct 2 Oct 1/94. Wt 154½ lbs. (has gained 10 pounds in weight since admission). Pulse 76 —

" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion of his time. Works on ward, at times. Yet he still holds to his delusions. Habits neat & clean.

Nov 1/94. Wt 152 lbs. Pulse 74. Nov 9/94. Had a "Spell" for about 5 days; acted silly, lying down on his Stomach, touching his face to the floor. Felt depressed; would sit down on a chair & go to sleep; several times, a day. Nov 30/94 Keeps about the same, Generally; does some work on the ward.

Dec 3/94. Wt 154 lbs. Pulse 84. Dec 31/94. Has not had any "spells" during the month. Is somewhat worried, at times. Is anxious to go home. Behaves well. Appetite good; Bowels are free —

1895 Jany 3/95. Wt 157 lbs. Pulse 78 — Jan 31/95. Appetite good; Makes no complaints of bowels; worries about staying here. Admits that he has been out of his mind, but thinks he is well enough now to take care of himself. Writes a few letters home. Is in good physical condition. Feb 2/95. Wt 157½ lbs. Pulse normal. [illegible] Behaves [illegible] ted, but he still has some Peculiar ways & thoughts. Works some.

[illegible] 31/95. Still behaves well. Talks freely & quite sensibly. Works some on ward. Writes occasional letters home.

[illegible] 1/95. Seems to have improved considerably, the last [illegible] some points. Talks sensibly. Worked in Store-room, [illegible] chance is good. Physical condition also good.

[illegible] enjoyed recently at washing windows & cleaning up &c. [illegible] makes no complaints, of late; has improved, talks freely & sensibly; no delusions noted; has wanted [illegible] on good physical condition. Habits clean & tidy. [illegible] delusions noted: appears much improved mentally. [illegible] been working in Store-room, the past few days.

[illegible] ably. July 31/95. Behaves good; talks freely & sensibly. [illegible] called "troubles". Does not worry about home, as to phy[illegible] sical health. Aug 1/95. Wt 164 lbs. Pulse 76. [illegible] ted, Still keeps up. He talks sensibly. Does not [illegible] any delusions &c for some months back. [illegible] ted in Store-room M 3d & 24th. No change especially [illegible] P.M. Pulse 88. Oct 8/95. Commenced to work at bricklaying [illegible] has improved: works daily at brick-laying &c — [illegible] Has been working outside, bricklaying, for Contractor. [illegible] complaints of stomach: Nov 26/95. Resumed his work, today. [illegible] not working, seems to have had some trouble with Kidneys.

[illegible] Dec 21/95. Has left off working with Contractor. [illegible] seemed quite rational, in every way, for a long time. [illegible] personal habits. Sleeps well. Works on ward [illegible] 30 months past: Lately has been given permission to attend Church in town, on Sundays. Eats and sleeps well: behaves good — Again, went to work, at his trade, with the Contractor, today. —

Febry 15 Feb 1/96. Wt 165 lbs. P 78 — Febry 15/96. Worked at bricklaying 10 days, during month. Feb 26/96. Was,

" 26 today, advised by telegram of the death of one of his children. Was allowed to go home; expects to return

" 29 in a few days. Febry 29/96 Returned from St Paul. (carried to Transfer Book "A" page 275)

Hospital No 2. for Insane.
Rochester Minn. Aug. 31. 94.

Doctor Kilbone,

Dear Sir & Doctor.

I am preparing to leave this place on or before September 6th of the present year of our Lord and Savior JESUS CHRIST. I take this occasion to inform you of my intentions so that there can be no mistake or misunderstanding about it. Thanking you for your many kindnesses exercised toward me and hoping that we shall ever be friends and brothers, by His grace, also with His blessings and favors resting upon you and yours, I am as ever,

Your Obedient Patient
John Franklin Wright
No. 1. (over)

GIBERT, FULLAM & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy Sheriff John C. Pfertsen, with following history. Habits are temperate and his morals are good. There is no hereditary history. Cause of this attack is loss of work and consequent mental worry. Form of attack is Chronic, depressed. No accompanying bodily disease. This attack seems to have occurred in January 1894, (probably the 2nd one); but mental vagaries, religious political & other fancies were first manifested 6 or 7 years ago. Insanity is now thought in regard to Social, Political & religious fancies. Patient is not disposed to injure others, nor suicidal, but during the attack in January 1894, he was destructive & threw some household goods out of the window. There is no history given of any bodily disease &c, nor of any

July 16 On admission, was put on B3 (S.R. Complexion fair, some scars on right side; bodily condition clean

" 17 July 17/94. Slept fairly well, last night. AM. Pulse 8[illegible] Is quiet & well-behaved: talks freely; no delusions [illegible] or injuries to report; works some on the ward. Se

" 18 AM. Pulse 76. R 18. T. 99.2. Appetite good: ma talks freely. Examined today in office: the follo weakness; has had some insomnia, but slept well, last. R. Strychnia sulph. gr. 1. Hom. Gui. & strychnia ordinary exercise advised; can perhaps get out to w

" 19 Electricity; ordinary good diet to be given. PM. Pulse 76 night. AM. Pulse 82. R 18 T. (x) 98.6. Behaves well

" 20 R 18. T. 99.4. July 20/94. AM. Pulse 80. Argue

" 21 July 21/94. AM. Pulse 78. Behaves well. Reads

" 22/23 July 22/94. AM. Pulse 76. July 23/94. AM. [illegible] politics and R.R. Strike. July 24/94. Complex

" 24 July 25/94. AM. Pulse 80. Still given to talking a

" 25/26 July 26/94. AM. " 90. Behaves well; talks noted, patient has been sleeping well, about 8 h

" 27 done on the ward. Takes medicine. July 28/94.

" 28 Pulse 84. July 29/94. Appetite good; be

" 29 games; helps with the work. Pulse 99. July 3

" 30 July 31/94. Continues quiet & well-behaved. Talks fai

" 31 plays games &c. Writes considerably; (see attached

Aug 1/31 Aug 1/94. Wt 143½ lbs. Pulse 80. Aug 31/94. Quiet & well-behaved. Is working & reading, almost all the time. (Letters are about like Samples attached). Talks quite freely. Still holds delusions.

Sept 1/30 Sept 1/94. Wt 149½ lbs. Pulse 76. Sept 30/94. Seems more contented of late. Reads & writes a good deal. Quiet & well-Conducted. Helps some with the ward work. Physical health is good.

Oct 2 Oct 2/94. Wt 154½ lbs. (has gained 10 pounds in weight since admission). Pulse 76.

" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion of his time. Works on ward, at times. Yet he still holds to his delusions. Habits neat & clean.

P.S. My Little Bio.

I was born on Gravel Hill in Bellaire Ohio on the 20th day of March. 1860. My Father, on earth, was born in Hardie County West Virginia and is now over seventy one years. He learned the trades that I follow. He enlisted at the outbreak of the Rebellion in a regiment of Ohio Volunteers; served four years and three months in the Northern Army. He was wounded at Gettysberg and I believe carries now the bullet in his left breast. He rose to the ranks of Capt., of volunteers, Col., Infantry, 116th. Regiment. He was honorably discharged and has worked mostly at his trade since. He studied law and was admitted to the bar at New Albany Indiana. He moved to this State in 1870 and has resided in the state nearly ever since. My mother was born in Pennsylvania and is now over seventy years of age. She ~~had~~ received very little early education and failed even to learn to write her own name but she remained steadfastly by her faith in Jesus which is more than I can say, but I hope to be forgiven and to make up for my sins and short comings by a fearless and faithful statement of what I firmly believe to be the truth, even to the extent of rendering up on the altar of His love every last vestage of my mortality. Friends, home, wife children and all, even my daughter, sweet little innocent, child of my heart's purest and best; All will I cheerfully surrender, for to be eternally with Christ, the Anointed, God-crowned, Son of the Most High and Holy and All-Wise Infinite, Creator, of The Heavens and all the fullness thereof. Glory & Praise and Honor to His Name for everlasting and all eternity. So let it Be. Amen.

1894

Nov 1/94. Wt 152 lbs. Pulse 74. Nov 9/94. Had a "Spell" for about 5 days; acted silly, lying down on his stomach, touching his face to the floor. Felt depressed; would sit down as a chair & go to sleep; several times, a day. Nov 30/94 Keeps about the same, Generally; does some work on the ward.

Dec 3/31 Dec 3/94. Wt 154 lbs. Pulse 84. Dec 31/94. Has not had any "spells" during the month. Is somewhat worried, at times. Is anxious to go home. Behaves well. Appetite good; Bowels are free.

1895

Jan 3/31 Jany 3/95. Wt 157 lbs. Pulse 78. Jan 31/95. Appetite good; Makes no complaints of bowels; worries about staying here. Admits that he has been out of his mind, but thinks he is well enough now to take care

John [illegible]

good physical condition. Feb 1/95. Wt 157½ lbs. Pulse normal.

[illegible] Still has some peculiar ways & thoughts. Works some.

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1896

Jany 30 Jany 1/96. Wt 162½ lbs. Pulse 82. Jany 30/96. Has remained about as described, for several months past. Lately has been given permission to attend Church in town, a Sundays. Eats and sleeps well: behavior good. Again went to work, at his trade, with the Contractor, today.

Feby 25 Feby 1/96. Wt 165 lbs. P 78. Feby 15/96. Worked at bricklaying 10 days, during month. Feb 26/96: Was,

" 26 today, advised by telegram of the death of one of his children. Was allowed to go home; Expects to return

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EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy-Sheriff John C. Gjertsen. Habits are temperate and his morals are good. There is no hereditary history. and consequent mental worry; form of attack is Chronic. This attack seems to have occurred in January 1894, (prob political & other fancies were first manifested 6 or 7 social, political & religious fancies. Patient is not Attack in January 1894, he was destructive & thr no history given of any bodily disease &c, nor for a while, (probably during one of his

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ordinary exercise advised;
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night. Am. Pulse 82. R 18. July 20/94. Am. Pulse 78. Behaves well; talks freely; makes no complaints; Pm. Pulse 80
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" 25 July 25/94. Am. Pulse 80. Still given to talking
" 26/27 July 26/94. Am. " 90. Behaves well; talks
noted. Patient has been sleeping well, about 8 hours, each night. Quiet & well behaved; works some on the ward. Takes medicine. July 28/94. About the same. Today, transferred to A1 —
" 28 Pulse 84. July 29/94. Appetite good; bowels regular: he talks freely & sensibly; plays
" 29 games: helps with the work. Pulse 99. July 30/94. Am. Pulse 86. No material Change —
" 30 July 31/94. Continues quiet & well-behaved. Talks quite freely; makes no complaints. Reads some and
" 31 plays games &c. Writes considerably; (see attached letters). Works some on the ward. Habits clean.
Aug 1/30 Aug 1/94. Wt 143½ lbs. Pulse 82. Aug 31/94. Quiet & well-behaved. Inviting or reading, almost all
the time. (Letters are about like Samples attached). Talks quite freely. Still holds delusions.
Sept 1/30 Sept 1/94. Wt 149½ lbs. Pulse 76. Sept 30/94. Seems more contented of late. Reads & writes a good
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Oct 2 Oct 1/94. Wt 154½ lbs. (has gained 10 pounds in weight since admission). Pulse 76 —
" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion
of his time. Works on ward, at times. Yet he still holds to his delusions. Habits neat & clean.

I have one brother now beyond the Rocky Divide or Continental Range in Colorado. He has a farm there and also property in Denver and Missouri. He often tells me how he laid to Missouri a good house, living nearly upon, with plenty of water and etc. that I can be grown there. Thermometer, I can make my home with him. is he is not rich and not likely to become so. I have one sister, married, with several children. I have a wife and three small children, but them boys. and our several small debts. I am very poor in worldly treasure. Could I collect what is due me, I could easily raise. I was sent here for writing Lincoln Special Delivery Letters, Lincoln Tax and Lincoln Territorial of neglecting family & although I was endeavor to find work which I failed to find. I am a drunkard, last winter, I broke myself down

Doctor Kilbourne. I demand upon my release from this place. I can endure confinement here long enough I will not put up with it much longer so help me God. I dream business this time and no mistake I am not sick nor insane and upon these it will be enough. I fought my way in like and I can fight my way out; your guns or bullets don't scare me a might. I am not bulldozed & cowardly stuff. I order you to a man or woman in any life but I will the do it if necessary to gain my freedom. Sir, Will the dog parel; my own fly. dom; the on the so rather than before Co. T. Please! Please! Please. no officers.

J. F. Wright

Nov 1/94. Wt 152 lbs. Pulse 74. Nov 9/94. Had a "Spell" for about 5 days; acted silly, lying down on his stomach, touching his face to the floor. Felt depressed; would sit down as a chair & go to sleep, several times, a day. Nov 30/94. Keeps about the same, Generally; does some work on the ward.
Dec 3/94. Wt 154 lbs. Pulse 84. Dec 31/94. Has not had any "spells" during the month. Is somewhat worried, at times. Is anxious to go home. Behaves well. Appetite Good; Bowels are free —
Jany 3/95. Wt 157 lbs. Pulse 78. Jan 31/95. Appetite good; Makes no Complaints of bowels; worries about staying here. Admits that he has lost his mind, but thinks he is well enough now to take care
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Thinks still has some peculiar ways & thoughts. Works some.
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Nov 1/94. Wt 152 lbs. Pulse 74. Nov 9/94. Had a "Spell" for about 5 days; acted silly, lying down on his stomach, touching his face to the floor. Felt depressed; would sit down on a chair & go to sleep; several times, a day. Nov 30/94 Keeps about the same, Generally; does some work on the ward.
Dec 3/94. Wt 154 lbs. Pulse 84. Dec 31/94. Has not had any "spells" during the month. Is somewhat worried, at times. Is anxious to go home. Behaves well. Appetite good; Bowels are free —
Jany 3/95. Wt 157 lbs. Pulse 78. Jan 31/95. Appetite good; Makes no complaints of bowels; worries about Staying here. Admits that he [illegible] his mind, but thinks he is well enough now to take care
[illegible] good physical condition. Feb 1/95. Wt 157½ lbs. Pulse normal. [illegible] talks still has some peculiar ways & thoughts. Works some.
[illegible]/95. Still behaves well. Talks freely & quite sensibly. [illegible] some on ward. Writes occasional letters home.
[illegible]/95. Seems to have improved considerably. Has last [illegible] points. Talks sensibly. Worked in store-room, [illegible] hand is good. Physical condition also good.
[illegible] recently at washing windows & cleaning up &c. [illegible] makes no complaints, of late; has improved, but [illegible] sensibly; no delusions noted; has worked [illegible] good Physical condition. Habits clean & tidy. [illegible] delusions noted: appears much improved mentally. [illegible] been working in store-room, the past few days.
[illegible]. July 31/95: Behavior good; talks freely & sensibly [illegible] "troubles". Does not worry about home, as before. [illegible] physical health. Aug 1/95: Wt 164 lbs. Pulse 76.
[illegible], Still keeps up: he talks sensibly; Loses pound [illegible] delusions &c for some months back.
[illegible] in Store-room as 3[d] + 24[th]. No change of [illegible] 98. Oct 8/95. Commenced to work at bricklaying
[illegible] improved: works daily at brick-laying —
[illegible] Has been working outside, bricklaying, for Contractor [illegible] complains of stomach: Nov 26/95: Resumed his work, today.
[illegible] working; seems to have had some trouble with Butter
[illegible] Dec 21/95. Has left off working with Contractor
[illegible] seemed quite rational, in every way, for a long time,
now. Appetite good: bowels free. Is of good personal habits. Sleeps well. Works on ward
1896 Jany 1/96. Wt 162½ lbs. Pulse 82. Jany 31/96. Has remained about as described for several months past: Lately, has been given permission to attend Church in town, a Sundays. Eats and Sleeps well: behaves good - Again went to work, at his trade, with the Contractor, today. —
Febry 10 Feb 1/96. Wt 165 lbs. P 78 - Febry 29/96. Worked at bricklaying 10 days, during month. Feb 26/96: Was,
" 26 today, advised by telegram of the death of one of his children. Was allowed to go home; expects to return
" 29 in a few days. Febry 29/96 Returned from St Paul. (carried to Transfer Book "A" page 275)

I have no
Private Diri
Colorado
also prof
He often
a good
Lenky
Don't
there
hom
wind
Sh
Ch
Yron
Rep
Dear Sir
Will
you please allow me the
opportunity to laundry
my own wearing apparel;
my reason is this; my un-
der garments are nearly
torn to pieces by having
them run through the
machinery, that I am
told is in use in the
laundry here. I am so
poor that I would rather
wash them myself than
have them worn out before
their time.
Yours Respectfully,
J. F. Wright
P. S. Please! Please! Please!
No offence.
Hospital Dept. of Minn.
Aug. 10, 1894.
Doctor Kilburn,
Dear Sir,
Will
you please allow me the
opportunity to laundry
my own wearing apparel;
my reason is this; my un-
der garments are nearly
torn to pieces by having
them run through the
machinery, that I am
told is in use in the
laundry here. I am so
poor that I would rather
wash them myself than
have them worn out before
their time.
Yours Respectfully,
J. F. Wright
P. S. Please! Please! Please!
No offence.

1894 GIBERT, TIDLAN & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy-Sheriff John C. Gjertsen, with following history. Habits are temperate and his morals are good. There is no hereditary history. Cause of this attack is loss of work and consequent mental worry. Form of attack is Chronic, depressed. No accompanying bodily disease. This attack seems to have occurred in January 1894, (probably the 2nd one); but mental vagaries, religious political & other fancies were first manifested 6 or 7 years ago. Insanity is now shown in regard to Social, Political & religious fancies. Taken it is not disposed to injure others, nor suicidal, but, during the attack in January 1894, he was destructive & threw [illegible] Household goods out of the window. There is no history given of any bodily disease &c, nor of any [illegible] for a while, (probably during one of his "spells").

July 16 On admission, was put on B2 (S.K. Complexion [illegible] face some scars on right side; bodily condition clean
" 17 July 17/94. Slept fairly well, last night. AM. Pulse [illegible] Is quiet & well-behaved: talks freely; no delusions re
" 18 or injuries to report; works some in the yard. Is AM. Pulse 76. R 18. Ta/99.2. Appetite good: ma talks freely. Examined today in office: the follo weakness; has had some insomnia, but slept well, last R. Strychnia Sulph. gr. 1. 4m. Qui. et strychnia ordinary exercise advised; can perhaps get out to w
" 19 Electricity; ordinary good diet to be given. PM. Pulse 7 night. AM. Pulse 82. R 18. Ta) 98.6. Behaves well
" 20 R. 18. Ta) 99.4. July 20/94. AM. Pulse 80. Argue
" 21 July 21/94. AM. Pulse 78. Behaves well. Reads
" 22/23 July 22/94. AM. Pulse 76. July 23/94. AM. Solutics and R.K. Strike. July 24/94. Compl
" 24 July 25/94. AM. Pulse 80. Still given to talking
" 25/26/27 July 25/94. AM. " 90. Behaves well; talks noted, Patient has been sleeping well, about 8
" 28 some in the yard. Takes medicine. July 28/94
" 29 Pulse 84. July 29/94. Appetite good; b
" 30 games; helps with the work. Pulse 99. July
" 31 July 31/94. Continues quiet & well-behaved. Talks fu plays games &c. Writes considerably; (see attached

Aug 31 Aug 1/94. Wt 143½ lbs. Pulse 82. Aug 31/94. Quiet & well-behaved. Is writing or reading, almost all the time. (Letters are about like Sample attached). Talks quite freely. Still holds delusions.

Feb 1/30 Feb 1/94. Wt 149½ lbs. Pulse 76. Feb 30/94. Seems more contented of late. Reads & writes a good deal. Quiet & well-Conducted. Helps some with the ward work. Physical health is good.

Oct 2 Oct 2/94. Wt 154½ lbs. (has gained 10 pounds in weight since admission). Pulse 76.

" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion of his time. Works in ward, at times. Yet he still holds to his delusions. Habits neat & clean.

1894
A. Nov 1/94. Wt 152 lbs. Pulse 74. Nov 9/94. Had a "Spell" for about 5 days; acted silly, lying down on his Stomach, touching his face to the floor. Felt depressed; would sit down as a chair & go to sleep,
" 30 several times, a day. Nov 30/94. Keeps about the house, Generally; does some work on the ward.
Dec 3/31 Dec 3/94. Wt 154 lbs. Pulse 84. Dec 31/94. Has not had any "spells" during the month. Is somewhat worried, at times. Is anxious to go home. Behaves well. Appetite good. Bowels are free.
1895
Jany 3/30 Jany 3/95. Wt 157 lbs. Pulse 78. Jan 31/95. Appetite good; Makes no complaints of bowels; worries about Starting his mind, but thinks he is well enough now to take care
" good physical condition. Feb 1/95. Wt 157½ lbs. Pulse normal.
" he is still has some peculiar ways & thoughts. Works some.
" 31/95. Still behaves well. Talks freely & quite sensibly.
" Works some on ward. Writes occasional letters home.
" 1/95. Seems to have improved considerably, the last
" some points. Talks sensibly. Worked in store-room,
" chamber is good. Physical condition also good.
" employed recently at washing windows & cleaning up &c.
" makes no complaints, of late; has improved, but
" freely & sensibly; no delusions noted; has worked
" in good Physical condition. Habits clean & tidy.
" delusions noted: appears much improved mentally.
" been working in Store-room, the past few days.
" July. July 31/95. Behavior good; talks freely & sensibly.
" called "Trouble". Does not worry about home, as before.
" physical health. Aug 1/95. Wt 164 lbs. Pulse 76.
" old, Still keeps up: he talks sensibly: Answers good
" any delusions &c for some months back.
" in Store-room as 3d + 24th. No change especially
" 28. Oct 8/95. Commenced to work at bricklaying
" improved: looks daily at brick-laying —
" Has been working outside, bricklaying, for Contractor
" cleaning stomach. Nov 26/95. Resumed his work, today
" working; seems to have had some trouble with Butler
" Dec 21/95. Has left off working with Contractor.
" Dec 31/95. Behaves well: talks freely & has seemed quite rational, in every way, for a long time,
now. Appetite good: bowels free. Has good personal habits. Sleeps well: Works on ward

1896
Jany 1/30 Jany 1/96. Wt 162½ lbs. Pulse 82. Jany 31/96. Has remained about as described for several months past: Lately, has been given permission to attend Church in town, on Sundays. Eats and sleeps well: behaves good. Again, went to work, at his trade, with the Contractor, today.

Febry 1/25 Feb 1/96. Wt 165 lbs. P 78. Febry 1/96. Worked at bricklaying 10 days, during month. Feb 26/96: Was,
" 26 today, advised by Telegram of the death of one of his children. Was allowed to go home: Expects to return
" 29 in a few days. Febry 29/96 Returned from St Paul. (carried to Transfer Book "A" page 275)

Personal and Medical History of John Franklin Wright

HERBERT, FOLAN & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy-Sheriff John C. Gjertsen, with following history. Habits are temperate and his morals are good. There is no hereditary history. Cause of this attack is loss of work and consequent mental worry; form of attack is Chronic, depressed. No accompanying bodily disorders. This attack seems to have occurred in January 1894, (probably the 2nd one); but mental vagaries, religious political & other fancies were first manifested 6 or 7 years ago. Insanity is now found in regard to social, political & religious fancies. Patient is not disposed to injure others, nor suicidal, but, during the attack in January 1894, he was destructive & threw some household goods out of the window. There is no history given of any bodily disease &c, nor of any head injury. Was confined in jail, at Alton, Illinois, for a while, (probably during one of his "spells").

July 16 On admission, was put on 13² (S.R. Complexion dark; hair dark; eyes blue; Condition of skin, good. has some scars on right side; bodily condition cle
" 17 July 17/94. Slept fairly well, last night. Abm. Pul
Is quiet & well-behaved: talks freely; no delusions
" 18 or injuries to report; works some at the ward.
Abm. Pulse 76 R 18. Ta/99.2. Appetite good: "
talks freely. Examined today in office: the fol
weakness; has had some insomnia, but slept well, la
R. Strychnia Sulph. gr. 1/30 Abm. Gui. & strychnia
ordinary exercise advised; can perhaps get out to
" 19 Electricity; ordinary good diet to be given. Abm. Pulse
night. Abm. Pulse 82. R 18 Ta/98.8. Behaves wel
" 20 R 18. Ta/99⁴. July 20/94. Abm. Pulse 80. Arg
" 21 July 21/94. Abm. Pulse 78. Behaves well. Read
" 22/23 July 22/94. Abm. Pulse 76. July 23/94. Abm.
" 24 potatoes and R.R. Strike. July 24/94. Comp
" 25 July 25/94. Abm. Pulse 80. Still given to talking
" 26/27 July 26/94. Abm. " 90. Behaves well; fai
noted. Patient has been sleeping well, about
" 28 down on the ward. Takes medicine. July 28/
" 29 Pulse 84. July 29/94. Appetite good;
" 30 games; helps with the work. Pulse 99. July
" 31 July 31/94. Continues quiet & well-behaved. Talks
plays games &c. Writes considerably; (see attac
Aug 31 Aug 1/94. Wt 143½ lbs. Pulse 80. Aug 31/94. Quiet
two times. (Letters are about like Samples atta
Feb 14/30 Feb 14/94. Wt 149½ lbs. Pulse 76. Feb 30/94.
deal. Quiet & well-Conducted - Helps some with the ward work. Physical health is good. —
Oct 2 Oct 2/94. Wt 154½ lbs. (has gained 10 pounds in weight since admission). Pulse 76. —
" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion of his time. Works in ward, at times. Yet he still holds to his delusions. Habits neat & clean.

And I saw an angel come down from heaven, having the key of the bottomless pit and a great chain in his hand.
And he laid hold on the dragon, that old serpent, which is the Devil, and Satan, and bound him a thousand years.
And cast him into the bottomless pit, and shut him up, and set a seal upon him.
And I saw the souls of them that were beheaded for the witness of Jesus, and for the word of God, and which had not worshipped the beast, neither his image, neither had received his mark upon their foreheads, or in their hands; and they lived and reign with Christ a thousand years.

Personal and Medical History of John Franklin Wright

[illegible] 9/94. Had a "Spell" for about 5 days; acted silly, lying down
floor - Felt depressed; would sit down on a chair & go to sleep;
[illegible] the same, Generally; does some work on the ward.
Has not had any "Spells" during the month. Is somewhat
Behaves well. Appetite good; Bowels are free —
tite good; Makes no complaints of bowels; worries
, but thinks he is well enough now to take care
ial condition - Feb 7/95. Wt 157½ lbs. Pulse normal.
some peculiar ways & thoughts. Works some.
behaves well. Talks freely & quite sensibly;
. Writes occasional letters home.
proved considerably, the last 2
ably. Worked in store-room,
& condition also good.
doors & cleaning up &c.
is improved, but
has worked
clean & tidy.
ved mentally.
past few days
; talks freely & sensibly
my about home, as before.
95. Wt 164 lbs. Pulse 76.
to talk sensibly: Goes home
for some months back.
on as 3rd & 24th - No change of Specially
8/95. Commenced to work at bricklaying
proved: works daily at brick-laying —
Has been working outside, bricklaying, for Contractor
Resumed his work, today.
Dec 31/95. Wt 165 lbs Pulse 84. Dec 6/95. Quit working; seems to have had some trouble with Boss
about the pay. Dec 16/95. Went back to work. Dec 21/95. Has left off working with Contractor
Dec 31/95. Behaves well; talks freely & has seemed quite rational, in every way, for a long time,
now. Appetite good; bowels free. Dress good personal habits. Sleeps well; Works in ward
1895 January 1/96. Wt 162½ lbs. Pulse 82. Jany 30/96. Has remained about as described, for several
months past: Lately has been given permission to attend Church in town, a Sundays. Eats and
Sleeps well: behaves good - Again, went to work, at his trade, with the Contractor, today. —
Feby 16 Feb 1/96. Wt 165 lbs. Pulse 78 - Feby 1/96. Worked at bricklaying 10 days, during month. Feb 26/95. Was,
" 26 today, advised by telegram of the death of one of his children. Was allowed to go home; effects to return
" 29 in a few days. Feb 29/96 Returned from St Paul. (carried to Transfer Book "A" page 275)

EGBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy-Sheriff John C. Gjertsen, with following history. Habits are temperate and his morals are good. There is no hereditary history. Cause of this attack is loss of work and consequent mental worry; form of attack is Chronic, depressed. No accompanying bodily disorders. This attack seems to have occurred in January 1894, (probably the 2nd one); but mental vagaries, religious, political & other fancies were first manifested 6 or 7 years ago. Insanity is now found in regard to Social, Political & religious fancies. Patient is not disposed to injure others, nor suicidal, but during the attack in January 1894, he was destructive & threw some household goods out of the window. There is no history given of any bodily disease or, nor of any head injury. Was confined in Jail, at Alton, Illinois, for a while, (probably during one of his "spells").

July 16 On admission. Was put on 1/3 (S.R. Compleno
has some scars on right side; bodily condition clean
" 17 July 17/94. Slept fairly well, last night. AM. Pulse
is quiet & well-behaved: talks freely; no delusions
" 18 or injuries to report; works some on the ward. Is
AM. Pulse 76 R 18. Ix/99.2. Appetite good: ma
talks freely. Examined today in office: the follo
weakness; has had some insomnia, but slept well, last
℞ Strychnia Sulph. gr. 1. Ayr. qui. ♦ strychnia
ordinary exercise advised; can perhaps get out to wo
" 19 Electricity; ordinary good diet to be given. PM. Pulse 76
night. AM. Pulse 82. R 18 Ix/ 98.8. Behaves well
" 20 R 18. Ix/99.4. July 20/94. AM. Pulse 80. Tongue
" 21 July 21/94. AM. Pulse 78. Behaves well. Reads
" 22/23 July 22/94. AM. Pulse 76. July 23/94. AM.
" 24 Articles and R.R. Strike. July 24/94. Complai
" 25 July 25/94. AM. Pulse 80. Still given to talking
" 26/27 July 26/94. AM. " 90. Behaves well; talks
noted, patient has been sleeping well, about 8h
" 28 some on the ward. Takes medicine. July 28/94.
" 29 Pulse 84. July 29/94. Appetite good; be
" 30 games: helps with the work. Pulse 99. July 3
" 31 July 31/94. Continues quiet & well-behaved. Talks qui
plays games &c. Writes considerably; (see attache
Aug 1/30 Aug 1/94. Wt 143½ lbs. Pulse 80. Aug 31/94. Quiet &
the time. (Letters are about like Sample attache
Feb 1/94/30 Feb 1/94. Wt 149½ lbs. Pulse 76. Feb 30/94. Seems more contented of late. Reads & writes a good
deal. Quiet & well-Conducted - Helps some with the ward work. Physical health is good. —
Oct 2 Oct 2/94. Wt 154½ lbs. (Has gained 10 pounds in weight since admission). Pulse 76. —
" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion
of his time. Works on ward, at times. Yet he still holds to his delusions. Habits neat & clean.

The Reunion.

Can it be! of stars the star,
May I press thee to my heart?
In the night of distance far,
What deep gulf, what bitter smart!
Yes, 'tis thou, indeed, at last,
Of my joys the partner dear!
Mind-ful, though, of sorrows past,
& the present needs must fear.

2.

When the still-unfashioned earth
Lay on God's eternal breast,
He ordained its hour of birth,
With creative joy possessed.
Then a heavy sigh arose,
When He spake the sentence: "Be!"
And the All, with mighty throes,
Burst into reality.

3.

And when thus was born the Light
Darkness near it feared to stay,
And the eternal with might
Fled on every side away;
Each on some far-distant trace
Each with visions wild employ'd
Numb, in boundless realms of space,
Harmony and feeling-void.

4.

Dumb was all, all still and dead,
For the first time, God alone!
Then He form'd the morning-red,
Which soon made its kindness known;
It unravell'd from the waste,
Bright and glowing harmony,
And once more with love was grac'd
What contended formerly.

5.

And with earnest, noble strife,
Each it's own peculiar sought;
Back to full, unbounded life
Light and feeling soon were brought.
Wherefor, if 'tis done, explore
How & why give the manner, name?
Allah need create no more,
We & His world ourselves can frame.

Nov 1/94. Wt 152 lbs. Pulse 74. Nov 9/94. Had a "Spell" for about 5 days; acted silly, lying down on his stomach, touching his face to the floor - felt depressed; would sit down on a chair & go to sleep; "30 several times, a day. Nov 30/94 Keeps about the same, Generally; does some work on the ward.
Dec 3/94 Dec 3/94. Wt 154 lbs. Pulse 84. Dec 31/94. Has not had any "Spells" during the month. Is somewhat
1895 worried, at times. Is anxious to go home - Behaves well. Appetite good; Bowels are free —
Jan 3/95 Jany 3/95. Wt 157 lbs. Pulse 78 - Jan 31/95. Appetite good; Makes no Complaints of bowels; worries
about Staying here - Admits that he has been out of his mind, but thinks he is well enough now to take care
Feb 1 of himself - Writes a few letters home. In good physical condition - Feb 1/95. Wt 157½ lbs. Pulse normal.
" 28 Feb 28/95: Behaves well. No delusions now noted, but he still has some peculiar ways & thoughts. Works some.
/95. Still behaves well. Talks freely & quite sensibly.
orks some on ward. Writes occasional letter home.
95: Seems to have improved considerably. The last few
me points. Talks sensibly. Worked in store-room,
haviri is good. Physical condition also good.
oyed recently at washing windows & cleaning up &
makes no complaints of late; has improved, but
ely & sensibly; no delusions noted; has worked
in good physical condition. Habits clean & tidy.
lusions noted: appears much improved mentally.
been working in store-room, the past few days.
lly. July 31/95: Behavior good; talks freely & sensibly
ed "trouble". Does not worry about home, is hope-
hysical health. Aug 1/95. Wt 164 lbs. Pulse 76.
ked, Still keeps up. He talks sensibly. Does not
any delusions &c for some months back.
ked in Store-room as 3rd & 24th. No change especially
P 88. Oct 8/95. Commenced to work at bricklaying
h improved: works daily at brick-laying. —
Has been working outside, bricklaying, for contractor
mplains of stomach: Nov 26/95. Resumed his work, today.
just working; seems to have had some trouble with Kidneys
Dec 21/95. Has left off working with Contractor
mind quite rational, in every way, for a long time,
personal habits. Sleeps well: Works on ward
Has remained about as described, for several
months past: Lately, has been given permission to attend Church in town, on Sundays, Eats and
Sleeps well: behavior good - Again, went to work, at his trade, with the Contractor, today. —
Feby 1/96. Wt 164 lbs. Pulse 78 - Feby 15/96. Worked at bricklaying 10 day, during month. Feb 26/96: Was,
" 26 today, advised by telegram of the death of one of his children. Was allowed to go home: Expects to return
" 29 in a few days. Feby 29/96 Returned from St Paul. (carried to Transfer Book "A" page 275)

Aug 1/30 Aug 1/96. Wt 162½ lbs. Pulse 82. Aug 30/96.

Personal and Medical History of John Franklin Wright

Personal and Medical History of John Franklin Wright

1894

This patient was brought here by Deputy-Sheriff John C. Gjertsen [illegible] following history. Habits are temperate and his morals are good. There is no hereditary history [illegible] attack is loss of work and consequent mental worry; form of attack is Chronic [illegible] accompanying bodily disorder. This attack seems to have occurred in January 1894, (previous [illegible] religious, political & other fancies were first manifested [illegible] in regard to social, political & religious fancies. Patient is [illegible] during the attack in January 1894, he was destructive [illegible] There is no history given of any bodily disease &c, [illegible] for a while, probably during one of his [illegible]

July 16 On admission, was put on B2 [illegible] face some scars on right side; [illegible]

" 17 July 17/94. Slept fairly well [illegible] Is quiet & well-behaved [illegible]

" 18 or injuries to report [illegible] Am. Pulse 76 [illegible] talks freely [illegible] weakness; [illegible] R. Strychnia [illegible] or ordinary diet &c [illegible]

" 19 Electricity; ordered [illegible] night. Am. Pulse 0. [illegible]

" 20 R. 18. Tr. 99.4. July [illegible]

" 21 July 21/94. Am. Pulse 7 [illegible]

" 22 July 22/94. Am. Pulse 76 [illegible]

" 23 [illegible]

" 24 [illegible] potatoes and R.R. Strike. [illegible]

" 25 July 25/94. Am. Pulse 80. Still [illegible]

" 26 July 26/94. Am. " 90. Behaves [illegible]

" 27 [illegible]; rode-lusions noted. July 27/94. Since last noted, patient has been sleeping well, [illegible] hours, each night. Quiet & well behaved; works some on the ward. Takes medicine. July 28. About the same. Today, transferred to A1 —

" 29 Pulse 84. July 29/94. Appetite good; bowels regular; he talks freely & sensibly; plays games; helps with the work. Pulse 99. July 30/94. Am. Pulse 86. No material Change —

" 31 July 31/94. Continues quiet & well-behaved. Talks quite freely; makes no complaints. Reads some and plays games &c. Writes considerably; (see attached letters). Works some on the ward. Habits, Clean

Augt 31 Aug 1/94. Wt 143½ lbs. Pulse 80. Aug 31/94. Quiet & well-behaved. Is writing or reading, almost all the time. (Letters are about like Samples attached). Talks quite freely. Still holds delusions.

Sept 1/94 to Sept 30 Sept 1/94. Wt 149½ lbs. Pulse 76. Sept 30/94. Seems more contented of late. Reads & writes a good deal. Quiet & well-Conducted — Helps some with the ward work. Physical health is good —

Oct 2 Oct 1/94. Wt 151½ lbs. (has gained 10 pounds in weight since admission). Pulse 76 —

" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion of his time. Works on ward, at times. Yet he still holds to his delusions. Habits neat & clean.

Nov 1/94. Wt 152 lbs. Pulse 74. Nov 9/94. Had a "Spell" for about 5 days; acted silly, lying down on his stomach, touching his face to the floor — felt depressed; would sit down on a chair & go to sleep; several times, a day. Nov 30/94. Keeps about the same, Generally; does some work on the ward.

Dec 3/94 Dec 3/94. Wt 154 lbs. Pulse 84. Dec 31/94. Has not had any "Spells" during the month. Is somewhat worried, at times. Is anxious to go home — Behaves well. Appetite good; Bowels are free —

1895 Jan 3/95 Jan 3/95. Wt 157 lbs. Pulse 78 — Jan 31/95. Appetite good; Makes no Complaints of bowels; worries about staying here — Admits that he has been out of his mind, but thinks he is well enough now to take care

Feb 1 of himself — Writes a few letters home — Is in good physical condition — Feb 1/95. Wt 157½ lbs. Pulse normal.

" 28 Feb 28/95: Behaves well. No delusions now noted but he still has some peculiar ways & thoughts. Works some.

March 31 March 1/95. Wt 153½ lbs. Pulse [illegible] March 31/95. Still behaves well. Talks freely & quite sensibly. Always working at something or writing. Works some on ward. Writes occasional letters home.

[illegible] 30/95: Seems to have improved considerably, the last [illegible] some points. Talks sensibly. Worked in store-room, [illegible] Behavior is good. Physical condition also good. [illegible] employed recently at washing windows & cleaning up &c. [illegible]; makes no complaints, of late; has improved, but [illegible] talks freely & sensibly; no delusions noted; has worked [illegible] in good physical condition. Habits clean & tidy. [illegible] no delusions noted: appears much improved mentally. [illegible] has been working in store-room, the past few days. [illegible] Valley. July 31/95: Behavior good; talks freely & sensibly [illegible] called "Trouble". Does not worry about home, as before. [illegible] good Physical health. Aug 1/95: Wt 164 lbs. Pulse 76. [illegible] noted, Still keeps up: he talks sensibly: Does not [illegible] show any delusions &c for some months back. [illegible] Worked in Store-room as 3d & 2d. No change especially [illegible]. P.88. Oct 8/95. Commenced to work at bricklaying [illegible] much improved: works daily at brick-laying — [illegible] 20/95. Has been working at the bricklaying for Contractor. [illegible]: complains of stomach: Nov 26/95: Resumed his work, today. [illegible]. Quit working, seems to have had some trouble with Kidneys. [illegible] work. Dec 21/95. Has left off working with Contractor [illegible] seemed quite rational, in every way, for a long time, [illegible] good personal habits. Keeps well: Works on ward [illegible] 30/96. Has remained about as described for several [illegible] mission to attend Church in town, a Sundays. Eats and [illegible] Sleeps well: behaves good — Again, went to work, at his trade, with the Contractor, today. —

Feby 15 Feb 1/96. Wt 165 lbs. P 78 — Feb 15/96. Worked at bricklaying 10 day, during month. Feb 26/96: Was,

" 26 today, advised by Telegram of the death of one of his children. Was allowed to go home: Affects Reticence

" 29 in a few days. Feb 29/96 Returned from St Paul. (carried to Transfer Book "A" page 275)

No 2. Hospital for Insane
Rochester Minn. Aug 1st 94.
Year of the Repn. 119th
Sec. B. + M., I. D. No 2. of Minnesota
Dear Sir + Brother,
I have been promised an opportunity to work at my trade here on the new Chapel that is now in course of construction for the benefit of Gods Children, I understand the job is by contract and the Bricklayers work ten hours, at 30 cents per hour. I would like to know if it is the will of Hon. S. of Minn. that I should work thereon under these condition, if not, I would like to know as soon as possible.
Yours Fraternally, J. F. W.

Stamped with thousand weeks to right
Star-clear is the bond that are we
Paragons on earth and for ending
Both of grief and for sublime
And the seconds sentence, — "Be ! !
Part, was not a second time!
Prodigied from Ed Gar A.
Burning, G.B.;
From "Goethe;
Gods Throne
To Tennyson, and Lamentation
Effulgated Cry:
Queen of
To my Emperor Nicholas Street heart.
Loving Gjertsen
Filled on
Deputy-Sheriff
Attached Remarks.
10. 1894.
Republic the 119th
absent
Sheriff.

HERBERT, FISCHER & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy-Sheriff John C. Gjertsen, with following history. Habits are temperate and his morals are good. There is no hereditary history. Cause of this attack is loss of work and consequent mental worry; form of attack is Chronic, depressed. No accompanying bodily disorders. This attack seems to have occurred in January 1894, (probably the 2nd one); but mental vagaries, religious political & other fancies were first manifested 6 or 7 years ago. Insanity is now found in regard to social, political & religious fancies. Patient is not disposed to injure others, nor suicidal, but, during the attack in January 1894, he was destructive & threw some household goods out of the window. There is no history given of any bodily disease

for a while, (probably during one of

July 16 On admission. Was put on B[illegible]

has some scars on right side; bodily

" 17 July 17/94. Slept fairly well, last night

is quiet & well-behaved: talks freely,

" 18 or injuries to report; works some on

Am. Pulse 76. R 18. T. 98.2. A[illegible]

talks freely. Examined today in o[illegible]

weakness; has had some insomnia, but s[illegible]

℞ Strychnia Sulph. gr. 1. Sm. Qu[illegible]

ordinary exercise advised; Can perhaps

" 19 Electricity; ordinary good diet to be given.

night. Am. Pulse 82. R 18 T. 98.8.

" 20 R. 18. T. 99.4. July 20/94. Am. Pu[illegible]

" 21 July 21/94. Am. Pulse 78. Behaves [illegible]

" 22/23 July 22/94. Am. Pulse 76. July 2[illegible]

" 24 Politics and R.R. Strike. July 24/[illegible]

" 25 July 25/94. Am. Pulse 80. Still given

" 26/27 July 26/94. Am. " 90. Behaves

noted, patient has been sleeping well

" 28 some on the ward. Takes medicine

" 29 Pulse 84. July 29/94. Appetit[illegible]

" 30 games; helps with the work. Pulse

" 31 July 31/94. Continues quiet & well-behave

plays games &c. Writes considerably; ([illegible] flecks on every [illegible]

Aug 1/30 Aug 1/94. Wt 143½ lbs. Pulse 80. Aug 31/94. Quiet & well-behaved. Is writing or reading, almost all the time. (Letters are about like Samples attached). Talks quite freely. Still holds delusions.

Sep 1/30 Sep 1/94. Wt 149½ lbs. Pulse 76. Sep 30/94. Seems more contented of late. Reads & writes a good deal. Quiet & well-Conducted. Helps some with the ward work. Physical health is good.

Oct 2 Oct 1/94. Wt 151½ lbs. (Has gained 10 pounds in weight since admission). Pulse 76.

" 31 Oct 31/94. Is quite contented & happy, of late. Talks religion a good deal. Reads a good portion of his time. Works on ward, at times. Yet he still holds to his delusions. Habits neat & clean.

1894

Nov 1/94. Wt 152 lbs. Pulse 74. Nov 9/94. Had a "Spell" for about 5 days; acted silly, lying down on his stomach, touching his face to the floor. Felt depressed; would sit down on a chair & go to sleep, several times, a day. Nov 30/94 Keeps about the same, Generally; does some work on the ward.

Dec 3/30 Dec 3/94. Wt 154 lbs. Pulse 84. Dec 31/94. Has not had any "Spells" during the month. Is somewhat worried, at times. Is anxious to go home. Behaves well. Appetite good; Bowels are free.

1895

Jan 3/31 Jany 3/95. Wt 157 lbs. Pulse 78. Jan 31/95. Appetite good; Makes no complaints of bowels; worries about staying here. Admits that he has been out of his mind, but thinks he is well enough now to take care of himself. Writes a few letters home. Is in good physical condition. Feb 1/95. Wt 157½ lbs. Pulse normal.

Feb 28 Feb 28/95. Behaves well. No delusions now noted, but he still has some peculiar ways & thoughts. Works some.

Mar 1/31 March 1/95. Wt 153½ lbs. Pgr. March 31/95. Still behaves well. Talks freely & quite sensibly. Always working at something or writing. Works some on ward. Writes occasional letters home.

Apl 1/30 Apl 1/95. Wt 162 lbs. Pulse 84. Apr 30/95. Seems to have improved considerably, the last 2 months. Admits that he was insane on some points. Talks sensibly. Worked in store-room, for a few days. Works on ward now. Behavior is good. Physical condition also good.

May 1/31 May 2/95. Wt 166 lbs. Pulse 80. Has been employed recently at washing windows & cleaning up &c.

" 31 May 31/95. Is a very quiet & orderly patient; makes no complaints, of late; has improved, but is not quite rid of his old "troubles". Talks freely & sensibly; no delusions noted; has worked some in store-room; also some on ward. Is in good physical condition. Habits clean & tidy.

June 1/30 June 1/95. Wt 169 lbs. Pgr. June 30/95. No delusions noted; appears much improved mentally.

July 1/31 July 1/95. Wt 152½ " " 90. July 6/95. Has been working in store-room, the past few days.

" 22/31 July 22/95. Visited by a friend, from Spring-Valley. July 31/95. Behavior good; talks freely & sensibly. Seems to have quite fully recovered from his old "Troubles". Does not worry about home, as before. Works on ward. Civil & obliging. Is in good Physical health. Aug 1/95. Wt 164 lbs. Pulse 76.

Aug 1 Aug 31/95. Improvement, for some time past noted, still keeps up. He talks sensibly; Corresponds frequently with his wife. Has not shown any delusions &c for some months back.

" 31 Sep 2/95. Wt 167½ lbs. Sgr. Sep 30/95. Works in Store-room as 3rd Asst to Change & generally to note, for the month. Oct 1/95. Wt 165 lbs. Pgr. Oct 8/95. Commenced to work at bricklaying on the new "Rear Centre". Oct 31/95. Very much improved. Works daily at brick-laying. —

Sep 2/30 Oct 1/8

" 31 Nov 2/95. Wt 163½ lbs. Pulse 80. Nov 20/95. Has been working outside, bricklaying, for contractor.

Nov 2 Nov 21/95. Did not work a day; not feeling well; complains of stomach. Nov 26/95. Resumed his work, today.

" 21/26 Dec 3/95. Wt 165 lbs. Pulse 84. Dec 6/95. Quit working; seems to have had some trouble with Builder about the pay. Dec 16/95. Went back to work. Dec 21/95. Has left off working with Contractor.

Dec 3/16

" 31 Dec 31/95. Behaves well; talks freely & has seemed quite rational, in every way, for a long time, now. Appetite good; bowels free. Has good personal habits. Sleeps well. Works on ward.

1896

Jany 1/30 Jany 1/96. Wt 162½ lbs. Pulse 82. Jany 30/96. Has remained about as described for several months past. Lately, has been given permission to attend Church in town, on Sundays. Eats and sleeps well; behaves good. Again went to work, at his trade, with the Contractor, today.

Feby 1/26 Feb 1/96. Wt 165 lbs. Pgr. Feby 25/96. Worked at bricklaying 10 days, during month. Feb 26/96. Was, today, advised by telegram of the death of one of his children. Was allowed to go home; expects to return in a few days. Feby 29/96. Returned from St Paul. (carried to Transfer Book "A" page 275)

To Dr. E. J. Kilborne,
Dear Sir & Dr.
Will you please to mail this
Letter, and oblige.
Yours Respectfully
John F. Wright

Personal and Medical History of Andrew Ovrei (Ari)

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3783.
Residence, Batt Township, Freeborn County.
Date Admission, 17th July 1894.
Admitted by, Dr. Kilbourne Hour, 7 PM
How Sent, Herman Blackmer, Jof C, Freeborn County
Sex, Male
Age, 38 Years
Civil Condition, Single
Children, none
Age Youngest Child, —
Occupation, Laborer
Degree Education, —
Profession Religion, Is church member
Habits, always temperate
Nativity, Norway
Physicians Committing, G. H. Earck and J. M. Todd.
Correspondents, A. J. Stathem (uncle)

No. for Year, 353.
Insane Relatives, one or two of mothers cousins
Cause Exciting, Self abuse & imperfect development of testicles
Cause Predisposing, Heredity possibly
Form, acute melancholia (Pertains blanks)
Accompanying Bodily Disorder, Imperfect development of testicles. (of one testicle)
Suicidal or Not, not
Date of this Attack, some 2 years since
Duration, about 2 years.
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 36.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Ex'd. by Dr. Phelps. July 21/94.

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Slightly depressed
DELUSIONS:
Systematized or Not, Systematized
Special Subjects, Sexual Emissions produced by masturbating —
Transitory or Not, Not —
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, normal

Personal and Medical History of Andrew Ovrei

27/337 3783
M. Andrew Ovrei —
Copy of Order for Hearing Petition of A. L. Ari for appointment of a guardian for Andrew Ovrei insane; served and service admitted December 25/1900.
(Papers filed with commitment papers.)

ADMISSION.—(Continued.)

TERISTICS.

NUTRITION, lost 10 to 15 lbs. since winter.

ext page.

Healthy Promptness Movement, fair

Size, Normal

mmodation, ✓

COORDINATION, Arms, Finger to nose, eyes shut, slight inaccuracy
Legs,
TREMORS, Hands, None Tongue, none
Facial Muscles, General,
REFLEXES, Patellar, normal & equal
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Depressed
SENSIBILITY,
HEART, Sounds good
LUNGS, Do Do
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Yes Poor,
SLEEP, Good, Fairly to Poor, Irregular,
PULSE, about normal RESP., TEMP., — Do —
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,
} Claims family all healthy

Personal and Medical History of Andrew Ovrei (Arr)

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3783.
Residence, Bath Township, Freeborn County.
Date Admission, 17th July 1894.
Admitted by, Dr. Kilbourne Hour, 7 PM
How Sent, Herman Blackmer, Jof C, Freeborn County
Sex, Male
Age, 38 Years
Civil Condition, Single
Children, none
Age Youngest Child, —
Occupation, Laborer
Degree Education, —
Profession Religion, Lu church member
Habits, always temperate
Nativity, Norway
Physicians Committing, G. H. Darch & J. M. Todd.
Correspondents, A. Stadheim (uncle)

No. f
Insan
Cause
Cause
Form,
Accon
Suicid
Date o
Durati
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 36.
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Ex. by Dr. Phelps. July 21/94.

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, Slightly depressed
DELUSIONS:
Systematized or Not, Systematized
Special Subjects, Seminal Emissions produced by masturbating —
Transitory or Not, Not —
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Normal

Personal and Medical History of Andrew Ovrei

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2½ WEIGHT, 120 pds. NUTRITION, lost 10 to 15 pds. since winter.
WOUNDS OR ABNORMALITIES, see "S. R." on next page.
TONGUE, Tremors, none Coatings, tongue fairly healthy Promptness Movement, fair
PUPILS, Equality, Equal Size, Normal
Response Light, respond readily Accommodation, "
SIGHT, Good
HEARING, Do.
COORDINATION, Arms, finger to nose, eyes shut, slight inaccuracy
Legs,
TREMORS, Hands, None Tongue, none
Facial Muscles, General,
REFLEXES, Patellar, normal & equal
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Depressed
SENSIBILITY,
HEART, Sounds good
LUNGS, Do Do
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Constipated, Irregular,
APPETITE, Good, Medium, Yes Poor,
SLEEP, Good, Fairly so Poor, Irregular,
PULSE, about normal RESP., TEMP., — Do —
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,
} Claims family all healthy

1894

EBERT, FICKE & SHAMBERG, DAVENPORT, IOWA.

This patient was brought here by Sheriffs Deputy E. H. Ellickson + attended by A. J. Stadheim (uncle), with the following history. There is some history of heredity, one or two of mother's cousins having been insane. Supposed cause of this attack is self-abuse, and improper development of testicles: form of attack, Chronic. First symptoms of the disease were manifested possibly slightly for 2 years, but practically only since this Spring, in March or April. This is the 1st attack. Insanity is now manifested by patient's persisting in thinking his relatives are after him, seducing him, poisoning him + troubling him. It is not supposed to injure others, nor suicidal, nor filthy nor destructive. There has been an imperfect development of the testicles, one remaining in the canal, causing genital irritation and probably masturbation. On June 11th 1894, castrated: perfect physical result, but mind not much improved.

July 17 On admission, was put on B½ (S.D. Complexion light; hair light; eyes blue; condition of skin, clean; scars from operation, over left groin; bodily condition clean; finger on right hand crooked; behavior good).

" 18 July 18/94. Rested quietly + slept 7 hours, last night. T.M. Pulse 100. R. 20 T. 99. Behavior is good. Appetite fairly good; bowels generally free: no cough noticed. Walks leisurely about hall. Has some delusions; "thinks some one is around him, nights". No complaint or injuries to report. T.M. Pulse 98. R. 21. T. 99.6.

" 19 July 19/94. Rested well, again, last night. T.M. Pulse 88 - R 21 T. 98.8. Complains some of pain in his

- 20 stomach + chest. Talks freely; works some. Is on medicine. P.M. Pulse 94. R 21. T. 99.2. July 20/94. Slept 8 hours, last night. T.M. Pulse 90. R 20 T. 99.6. Appetite fairly good. Talks freely. Works in dining-

" 21 -room. T.M. Pulse 92. R 22. T. 99.4. July 21/94. Again slept 8 hours, last night. T.M. Pulse 92. Behaves well. Still complains, at times, of pain in stomach. Helps with the work. Examines today. Patient has seminal Emissions + is in a somewhat hypochondriacal state. Use Pasteur Solution Bromides. (For neurasthenia) the following treatment: ℞ strychnia nitrate gr. 1; uroi, ℥ + strych. ℥ III; ag. ad. ℥ VIII; Sig: 2 teasp. after Each meal. Electricity is indicated as meeting neurasthenic tendencies + for its mental effect.

" 22 July 22/94. Slept well, last night. T.M. Pulse 90. Behaves well; Works some. Takes medicine regularly.

" 23 July 23/94. Slightly restless, but slept 8 hours, last night. T.M. Pulse 84. R 22. T. 99. Appetite good;

" 24 he talks freely; no delusions noted. July 24/94. Restless a couple of hours, but sleeping 8 hours last night.

" 31 T.M. Pulse 84. About the same, otherwise. July 31/94. During this, the 2nd week, patient has continued to rest + sleep well (8 to 8 hours), each night. Has been up + about daily; clean tidy + cares for self. Appetite good; bowels regular; has been well-behaved; Talks freely; during the first 2 days of his stay, he showed delusions; "thought some one was after him to do him harm", but since then no delusions have been noted. Pulse has been somewhat accelerated (101 - 98 today). He has Complains some of soreness in chest + lungs, also of some headache. Helps with work. On medicine.

Aug 1/ Aug 1/94. Wt 120 pds. Pulse normal. Aug 10/94. Complains of slight soreness in back. Pulse 88.

" 11 Aug 11/94. Has a slight headache; soreness in back has increased. Patient was put to bed. P.M. R 20. T. 98.5.

" 12/ Aug 12/94. Up, dressed + on the ward again: feeling much better. Appetite good. Aug 14/94. Restless 7 hours, and

" 18/ slept but 2 hours, last night. T.M. Pulse 89. Aug 18/94. Transferred to A. Aug 22/94. Complains

22 of not sleeping well. Otherwise, no change. Aug 28/94. Again complains of not sleeping well, at night,

" 28 and of feeling badly, in the morning). Aug 31/94. Continues quiet + well-behaved. Clean + neat in his

" 31 personal habits. Still has delusions. "Complains of some one coming into his room 2 or 3 times, every night + pulling the clothes off him", and of having pains in the back; also of some headache.

Sept 11/ Sept 11/94. Wt 125 ½ pds. (some gain in flesh, in past month). Pulse 86. Sept 13/94. Complains of headache and

13 of pains in breast. Sept 30/94. About the same. Appetite fair; bowels regular. Every 2 or 3 days, Complains

Sept 30 of headache + pains through the body. Still manifests delusions. Says "there are people come into his room at night". For the past week, has been working outside, with the hatter. Health improved.

Oct 7/ Oct 7/94. Wt 124 ½ pds. Pulse 92. Oct 7/94. Got up at night + walks around. Complains of severe

- 31 pains, through the body. Oct 31/94. Quiet + well-behaved, by day. Does not seem to sleep well at night. Complains of feeling badly, in mornings. Still manifests delusions. Says "that his father comes around at night + causes him trouble". Has not been working outside, lately. Seems to have tired of it. Helps some with work in the ward. Attends "patients' dances", participating in them. Is very neat + tidy about his personal appearance. Physical condition seems quite good.

Nov 1/ Nov 1/94. Wt 126 pds. Pulse 98. Nov 30/94. Behavior is good; has delusions still; says "he can hear his

30 father, nearly every night"; says "he would kill him, if he could"; Complains of slightly emissions. Works some on the ward. Dec 3/94. Wt 125 ½ pds. P.M. Dec 11/94. Does not rest well, at night.

Dec 3/ - 30 days, also, "that he does not like this ward". Transferred to B. Dec 30/94. Appetite fair; bowels regular, behaves well + is quiet. Talks freely + at times, quite sensibly, but still manifests Delusions.

1895 Jan 3/ Jan 3/95. Wt 126 ½ pds. Pulse 80. Jan 31/95. Still shows numerous delusions. Complains of slightly

31 Emissions. Sleeps rather poorly (was given sleeping-dose, last evening, at 9 30); Is at times, quite

Febry - 8/ dispondent + is, at all times, hypochondriacal, but is in good health. Feb 8/95. Wt 129 pds. P 79.

- 25/ Feb 8/95. Restless, occasionally, + sleeping poorly, at night. Feb 24/95. Complained of sore ache;

24 Can swallow slightly. Feb 25/95. Had tooth extracted, today. Feb 28/95. Appetite fair; bowels regular:

28 Behavior good. Has delusions, still: "thinks there is somebody going to kill him, every night".

Mar 7/ Takes medicine. Is indolent; not a worker. Mar 7/95. Wt 129 pds. P.M. March 9/95. Complains

" 21/ of headache. Given medicine. March 21/95. Visited by friend. March 31/95. Still has many delusions.

31 Very restless, during nights. "Thinks his father is in his room + is trying to kill him". No work.

April 7/ April 1/95. Wt 132 pds. P normal. April 7/95. Visited by friend. April 30/95. Physical condition good;

30 but he seems to be failing mentally. Still shows delusions. Appetite fair; bowels regular. Behavior good.

May 1/ May 1/95. Wt 128 pds. P 88. May 30/95. Patient has many delusions. Is continually "looking for some

30 one", under beds + searching the patients' rooms: consequently, he gets into trouble. Does no work.

June 1/ June 1/95. Wt 129 ½ pds. P 84. June 30/95. There seems a slight change, for the worse, in patient's Condition.

July 1/ July 1/95. Wt 130 " 80. July 31/95. This past month, patient has been more restless + his

31 delusions bother him more than ever. He is continually roaming about "looking for some one". Also wanders about, in the night. Appetite fair; bowels regular. Claims to be sick, quite often;

Augs (this may be imaginary); Idly inclined; does no work. Aug 1/95. Wt 124 pds. Pulse 74.

" 3/ Aug 3/95. Tried to escape, while out walking. Aug 31/95. Has many delusions, which cause him

31 to be a troublesome patient: always sneaking around. Tries to run away at every chance.

Sept 1/ Sept 1/95. Wt 120 ½ pds. (has been losing in flesh, the past 2 months). Pulse 82. Sept 30/95: no change.

Oct 1 - 30 has numerous delusions: is very troublesome. Does no work. Oct 1/95. Wt 118 ½ pds. Pulse 72.

" 31 Oct 31/95. Seems getting worse: shows various delusions: "thinks other patients are trying to harm him + also 'attendants'": Is very annoying + troublesome. Does no work: On medicine.

Nov 7/ Nov 7/95. Wt 118 ½ pds. P.M. Nov 20/95. Has been complaining, the past few days, of cold + soreness in lungs.

Dec 1/ 20 P. Temp. were normal. Feels much better now. Dec 1/95. Wt 122 pds. P.M. Dec 31/95. Keeps about same all the

1896 31 time: has numerous delusions - troublesome + obstinate; cranky with the others. Physical condition about the same, as usual.

Jan 2/ Jan 2/96. Wt 124 ½ pds. P 96. Jan 21/96. Nurse Ebert (on account of general run of patients). Jan 31/96. No change noticeable. A. P. 27

1894

Personal and Medical History of James Johnston (Johnston)

EHRET, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3784.
Residence, Unknown – Is a "Lawsuit."
Date Admission, 17th July 1894.
Admitted by, Dr. Kilbourne Hour, 5:30 PM.
How Sent, Thomas Fraser, Jof O, Olmsted County
Sex, Male.
Age, 36.
Civil Condition, Single
Children, none
Age Youngest Child, —
Occupation, Farm-Laborer
Degree Education, not given
Profession Religion, is a church member
Habits, Cannot ascertain as to these
Nativity, Norway
Physicians Committing, A.H. Stuckfeeld & Christ Gahan
Correspondents, none given in "papers"

No. for Year, 354.
Insane Relatives, Unknown
Cause Exciting, Unknown
Cause Predisposing, not given
Form,
Accompanying Bodily Disorder, none apparent
Suicidal or Not, not known
Date of this Attack, not known
Duration, not known
No. of Attack, unknown
No. of Admissions, 1st
Age First Attack, unknown
Time of Leaving, 13th October 1895.
Time in Hospital, 1 year; 2 mos; 26 days.
Result, Died: Phthisis pulmonalis.

EXAMINATION ON ADMISSION.

Exly. D. Phelps, July 21/94 – MENTAL CHARACTERISTICS.

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

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

Personal and Medical History of James Johnston

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8½ WEIGHT, 132 lbs. NUTRITION, Fair
WOUNDS OR ABNORMALITIES, none (see "J.Q.", next page).
TONGUE, Tremors, Slight Coatings, normal coating Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, response good Accommodation, ✓
SIGHT, Probably good
HEARING, Good
COORDINATION, Arms, Finger to nose, Eyes shut, fair
Legs, ✓
TREMORS, Hands, none Tongue, Heavy
Facial Muscles, General,
REFLEXES, Patellar, sluggish; about 3.
Other Reflexes,
ARTICULATION, Hesitating, ✓ Slurred, ✓
FACIAL EXPRESSION,
SENSIBILITY,
HEART, as if enlarged & palpitates. Tone.
LUNGS, Sounds, all right
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean,	Careless,
BOWELS, Normal,	Constipated,	Irregular, Sometimes
APPETITE, Good,	Medium,	Poor,
SLEEP, Good, yes	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,
Father or Pat. Relations,
Brothers or Sisters,

1894

This patient was brought here, in due form, by a Sheriffs Offcir; the history that accompanied him was rather meagre in particulars: As to his habits, any history of heredity, supposed cause of attack, any bodily disorder, when or how first symptoms of disease were manifested, number of attacks, if disposed to injure others, or suicidal, or filthy or destructive in habits, if subject to any bodily disease or any injury & if restraint or confinement has been employed or has been under medical treatment, nothing whatever seems to be known or ascertainable; form of this attack is depressed; insanity now shown by lack of mental power; patient was found wandering about the streets and he can give no intelligent account of himself. Addresses of relatives or friends could not be ascertained.

July 17 On admission, was put on B.3 (S.R. Complexion sandy; hair brown; eyes blue; Condition of skin, good; marks, scars or bruises noticed. Bodily Condition dirty: no bodily peculiarities noted. Is quiet & well-behaved)

" 18 July 18/94. Probably slept fairly well, last night. AM. Pulse 88. R 17 T. 99.8. Appetite fairly good; bowels have moved. No cough noticed. Is quietly behaved. Does not talk any. No complaints & injuries to report.

" 19 July 19/94. Rested fairly well, sleeping 6 hours, last night. AM. Pulse 76. T. 99.7. Appetite fair. Behavior is quiet; is rather stupid in his actions; generally remains in the same place, most of the time, unless requested to move; talks quite rationally. July 20/94. Slept 7 hours last night. AM. Pulse 62. T. 98.5. Appetite fair; bowels apparently regular. Is generally found standing up, going through some peculiar motion.

" 21 Does not enter into conversation with any one but will answer questions asked him. July 21/94. Rested quietly, & slept 7 hours, last night. AM. Pulse 70. Appetite good; bowels regular. Is quietly behaved — Examined today. The following treatment to be given: Rx. Dose Calomel & Salts, followed by tonic treatment; Rx. Tr. Gentian. Co. ℥ i; pyrophos. iron ℥ ii; ag. ad. ℥ iv. Sig. 2 Teasp. after each meal. July 22/94. Slept well, all night. AM. Pulse 76. Quietly-behaved, but still goes through his peculiar actions and motions.

" 23 July 23/94. Slept well, again, last night. AM. Pulse 88. Appetite good; bowels regular. Behavior good.

" 24 July 24/94. Appetite good. AM. Pulse 84. Continues to rest and sleep well at night. Habits cleanly.

" 31 July 31/94. During this, the second week, patient has been resting & sleeping well, at night. Pulse has been about normal. Appetite good; bowels regular. He has been quietly behaved. Hardly ever speaks to any one, but will answer questions; talks rationally then. Is rather stupid; does not seem to realize where he is; appears, however, to be perfectly contented. Goes through some peculiar actions with his hands & feet; laughs a good deal to himself. Habits are clean. He does no work. —

Aug 1/31 Aug 1/94. Wt 133 lbs. Aug 31/94. Is quietly behaved. Generally sitting down or standing in one place, almost from morning to night. Never speaks to any one. Laughs to himself. Goes through his "peculiar motions" of hand & feet. Habits are clean, but he is very slouchy in his personal appearance. —

Sep 3/30 Sep 3/94. Wt 136 lbs. Pulse 79. Sep 10/94. Continues about the same. Was, today, transferred to Ward B.3 —

" 30 Sep 30/94. Sleeps well, at night. Is stupid & dull. Sits in a settee, all day; will not talk. Sometimes, even when addressed, will not speak. Appetite fair; bowels regular. Untidy in his appearance.

Oct 1/15 Oct 1/94. Wt 134½ lbs. Pulse 81. Oct 15/94. Very stupid. Stands all day, in almost the same place, unless made

" 18/20 to sit down. Reticent; never speaks. Oct 18/94. Eats but little. Oct 20/94. Eats none at all, today. —

" 21/25 Oct 21/94. Was fed by physician (Dr. H), today. Oct 22/94. Was again fed. Oct 28/94. He has

" 31/28 been eating well, the past 3 days. Oct 31/94. Apparently sleeps well, at night. Appetite changeable, but generally good, & fair. Patient is very dull & stupid; talks none. Does not seem to make any improvement.

Nov 2/30 Nov 2/94. Wt 135½ lbs. Pulse 80. Nov 5/94. Appetite good. Is less stupid. Nov 30/94. Appetite good.

1894

Cont'd Nov 30 Sits about; talks none; does not go out walking; Physical condition good; he receives extra diet and

Dec 1/31 is gaining some in flesh. Dec 1/94. Wt 141 lbs. Pulse 84. Dec 31/94. Still stands about in a dull, stupid

1895 Jan 30 way - Talks none - Goes out for exercise, occasionally. - Jan 2/95. Wt 139 pounds. Pulse 84.

" 31 Jan 31/95. No special Change in conduct, manner, or behavior. Stupid & dull - Works some. Is untidy -

Feb 1/28 Feb 1/95. Wt 139½ lbs. Pulse 90. Feb 28/95: very stupid; stands idly in one place, talks none, at

Mar 2/31 all: appetite poor. Is untidy. March 2/95. Wt 137 lbs. P. 74. Mar 31/95: No change noticeable.

Apl 1/30 April 1/95. Wt 136 lbs. Pulse 84. Apl 30/95. Condition remains about same, from month to month

May 2/31 May 2/95. Wt 134 " " 66. May 31/95: No change noticeable, either mentally or physically.

June 1/30 June 1/95. Wt 130 " " 180. June 30/95: about the same. Physical condition seems run-down.

July 1/31 July 1/95. Wt 134 " " 85. (is gradually losing in flesh: lost 17 pounds since Dec 1/94) -

July 31/95. No change: is stupid & melancholy. Talks none. Stands idly about; dull & unintere-

-ested - Is untidy about his appearance - Aug 1/95. Wt 121 lbs. Pulse 90. Aug 15/95. Gradually

Aug 1/15 losing in flesh. Appetite poor - Is very dull & stupid - Aug 19/95. Transferred to T.W.E.

" 19 appeared emaciated; was weak & had a slight cough: raises a great deal of phlegm. Put to bed.

" 31 Aug 31/95. Appetite not very good. bowels fairly regular. Sleeps quite well at night. (See nurse's record)

Sep 5 Sep 5/95. Appears to rest & sleep well, nights. Coughs, at times, & raises phlegm. Is a regular & extra

" 7 diet, but eats sparingly. Appears weak & emaciated. Is a medicines. Sep 8/95. Has been restless

& sleeping poorly, the past 2 nights. Eats lightly. Otherwise about as usual, now. Temperature keeps high.

" 10 Wt, today, 100½ lbs. Sep 10/95: appetite not very good, still he eats some, at each meal. Is very much

" emaciated & appears quite weak. Coughs but little: raises some phlegm. Sleeps fairly well.

" 14/17 Sep 14/95. Slept all night: refused bed last night: Enema given & bowels afterward moved. Sep 15/95. Patient

" 18 lies in same position continually: is very weak. Sleeps quite well. Sep 18/95: Is steadily failing.

" 30 Eats lightly: occasionally refuses meals. Sep 30/95. Still in bed & is gradually failing.

Oct 5 Oct 5/95. Patient lies steadily in bed & continually in the same position. Does not talk: appetite

" 10 not good. Bowels irregular. Oct 10/95. Appetite very poor: he eats scarcely anything. Is still failing.

" 12 Oct 12/95. Appetite almost entirely lost: refuses meals; also medicine: is rapidly growing weak-

" 13 Oct 13/95. Continued to sink rapidly & died at 9½ P.M. last evening. — (records attached)

— Died —

Personal and Medical History of Wm. Kingston

EBBERT, PIOLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3787.
Residence, Stillwater Minn
Date Admission, 20th July 1894
Admitted by, D. Phelps Hour, 7 PM
How Sent, H.E. Doe, Court Com. Washington County
Sex, Male
Age, 29 —
Civil Condition, Single
Children,
Age Youngest Child,
Occupation, Lumberman; Works in the Pineries.
Degree Education, Probably good
Profession Religion, Not a church member
Habits, Is a heavy Drinker.
Nativity, New Brunswick —
Physicians Committing, W.C. Voigt & E.A. Eholm
Correspondents, (Relatives or friends) Wm Collins & Daniel McKenzie

No. for Year, 354.
Insane Relatives, none known of
Cause Exciting, Dissipation with women; legions & probably Syphilis
Cause Predisposing, probably bad habits
Form, Acute melancholia (ps. & am. Hand)
Accompanying Bodily Disorder, Syphilis
Suicidal or Not, not, so far as known; but threatens homicide
Date of this Attack, about one week ago
Duration, — about one week —
No. of Attack, 1st (so far as known).
No. of Admissions, 1st
Age First Attack, 29 years
Time of Leaving, Nov. 2nd '94
Time in Hospital, 3 mos 12 ds.
Result, Recovered

EXAMINATION ON ADMISSION.

Ex. by D. Phelps, July 21/94. — MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Confused and
Quick or Sluggish, Slightly sluggish
MEMORY:
Past Events, apparently good
Recent Events,
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Somewhat dull
Correct or Illusive,
REASONING POWER:
Ordinary Subjects, Considerably impaired
Own Mental State, — do —
Special Subjects, Denies by himself
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Depressed
Indifferent,
Exalted,
Depressed, Depressed
DELUSIONS:
Systematized ~~or Not~~, probably, though he denies them
Special Subjects,
Transitory or Not,
HALLUCINATIONS: none noted
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, } Fairly Coherent; rather unwilling. Seemed to be
Voluble or Reticent, } depressed & annoyed at questions implying doubt of health.

Personal and Medical History of Wm. Kingston

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9 3/4 WEIGHT, 160 lbs. NUTRITION, Fairly good
WOUNDS OR ABNORMALITIES, see D.P. on next page — no wounds —
TONGUE, Tremors, Slight Coatings, — Promptness Movement, quite prompt
PUPILS, Equality, Equal Size, Somewhat small
Response Light, rather slight Accommodation, —
SIGHT, Good
HEARING, — Do —
COORDINATION, Arms, Finger to nose, Eyes shut, Good.
Legs, Standing, Eyes shut, Good.
TREMORS, Hands, some Tongue, slight.
Facial Muscles, General,
REFLEXES, Patellar, Equal; about 7.
Other Reflexes,
ARTICULATION, Hesitating, Fair. Slurred,
FACIAL EXPRESSION, Depressed
SENSIBILITY, —
HEART, Normal
LUNGS, — Do —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Yes — Constipated, Kept Irregular,
APPETITE, Good, Yes — Medium, Recent Poor,
SLEEP, Good, Yes — Poor, Irregular,
PULSE, about 90. RESP., TEMP., Normal.
CRANIAL MEASUREMENTS,

HISTORICAL.

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

Personal and Medical History of Wm Kingston

1894

FOREST, FULLER & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Sheriff's Deputy J. R. Carle, with following history. Habits and morals have been bad, & he is a heavy drinker. There is no history of heredity, so far as known. The supposed cause of this attack is dissipation with women & liquor; possibly syphilis. Form of this attack is paroxysmal. Accompanying bodily disorder, syphilis. First symptoms of the disease were manifested about one week ago, by mental depression and fear of being killed by parties who have no enemies of his. This is the 1st attack so far as known. Insanity now shown, at times, by the fear that he is going to be killed or sent to prison from 5 to 20 years: he has threatened to kill 6 different men, the names of whom he has stated. He has not attempted suicide, so far as known. Is not filthy or destructive in habits. Has been confined in the City Jail for the last week. He has only had such treatment as he has used on himself for "chancres" ——

July 20 On admission, temperature 97° (S.R. Complexion dark; hair brown; eyes brown; condition of skin good; some scars on point of chin: no eruptions or ulcers noted; bodily condition is dirty; no bodily peculiarities observed; tried to get away when taken out to the others). July 21/94. Slept 4 hours, last night. Appetite medium, bowels seem free. Is stupid, cranky; indifferent; also somewhat depressed. Talks but little; no delusions noted; no complaints or injuries to report; no cough noticed. — Examined today. The following treatment adopted; Rx. unction mercury ointment and active anti-syphilitic treatment, for the acknowledged disease. He does not show marked signs, at present, but it is the probable cause. July 22/94. Slept 6 hours, last night; was somewhat restless. Appetite is medium. He stands idly about; talks none, except when addressed. July 23/94. Restless for 4 hours; slept but 2 hours, last night. AM. Pulse 80. R 24. T@1 97. Appetite medium. Behavior stubborn. July 24/94. Slept only 2 hours, last night. Was very restless & disturbed. AM. Pulse 86. Appetite is poor. Is stupid, cranky & stubborn. Attendants had trouble with him, when taking his temperature. — July 25/94. Somewhat restless, but slept 6 hours, last night. AM. Pulse 82. T@1 99.4. very still; cranky & stubborn. Takes medicine. July 26/94. Slept quite well (6 hours) last night. AM. Pulse. Stands around; won't talk; appetite has become quite good: bowels free. July 27/94. Quiet, and slept 4 hours, last night. AM. Pulse 84. No special change to note. July 28/94. AM. Pulse 86. —— July 29/94. AM. Pulse 84. July 30/94. Has been resting & sleeping quite well, the past 3 nights; about 7 hours, ea ch. Appetite not good: bowels are regular. Condition does not seem to change, in any respect. July 31/94. Restless & slept only 4 hours, last night. AM. Pulse 98. Testicle is swollen, to day.

Aug 1 Aug 1/94. Somewhat restless, but slept 6 hours, last night. Testicle quite swollen today. Patient put to bed.
" 2 Pulse 92. T@1 99 6/10. Aug 2/94. Restless 4 hours &c, but slept 8 hours, last night. Is still kept in bed.
" 3 Pulse 82 " 99 2/10. Appetite medium; he will not talk. Aug 3/94. Slept 8 hours last night; was slightly restless, an hour or so. Testicle seems much better today, though patient is still confined to bed. Pulse 80. T@1 98 2/10. Summary. When patient first came on ward, he was very stupid & indifferent; also cranky & depressed; would stand around & would not talk. Lately, though inclined to be petulent, get he will talk some, & is more agreeable. Appetite only medium; bowels seem regular.
" 4 Wt. today, 160 pds. Pulse 86. Aug 4/94. Is sick & in bed, today. Testicles are swollen.
" 5 He is very stupid & will not talk. Pulse (taken in bed) 82. T@1 98 8/10. Aug 5/94. No special change.
" 6 Pulse 82. T@1 98 8/10. Aug 6/94. Feeling much better today. Appetite good. Pulse 80. T@1 98 6/10. Slept 8
" 9 hours, last night; was restless an hour or so. Aug 9/94. Is up & on the ward today. Seems much

Personal and Medical History of Wm Kingston

1894 Cont'd

brighter & talks some now, when addressed. Pulse 81. T@1 98. Continues to sleep well, at night
Aug 31 Aug 31/94. Behavior is good. He is up & about, daily; reads some; plays games; talks freely & sensibly. Works some on the ward. Physical & mental condition seem to be greatly improved, of late. —
Sep 1/30 Sep 1/94. Wt 171 pds. (has gained 11 pounds in weight in the past month); Pulse 80. Sep 30/94. Apparently rests & sleeps well, at night. Quiet & well-behaved, by day. Appetite good; bowels regular. Talks freely, sensibly & rationally; plays games; reads; works in Dining room, also on hall. Improving.
Oct 1 Oct 1/94. Wt 182 pds (a further gain of 11 pounds in weight, in the past month). Pulse & R.
" 19/31 Oct 19/94. Worked with carpenter half a day. Oct 31/94. Plays games: talks freely & sensibly; no delusions noted. Works on the ward; also, works outside occasionally. Continues to improve.
Nov 2 Nov 2/94. "For 2 months past, patient has been, apparently recovered; probably this attack was brought on by over-indulgence in alcohol." (D.H.) ——

Patient was sent home, today, on trial.

Discharged Feb. 6th '95

John Freyer

1895 Grove 272.

May 13 May 13/95. Patient lies steadily in bed; bowels regular. He appears quite weak & is apparently failing. —
" 14 May 14/95. Had a very hard "Coughing Spell"; raising phlegm in considerable quantities. Pulse 104. Temp 103.
" 18 May 18/95. Lies steadily in bed, day after day; is on medicines - also regular diet, with eggs. —
" 23/27 May 23/95. Has bile on rectum; complains of its being painful — May 27/95. Sleeps poorly; Coughing continually, at night - May 31/95. Bowels regular: Passages painful on account of abscess - Lies steadily in bed. Coughs a great deal, at times. Patient is very weak & seems to be failing quite rapidly.
June 7 June 7/95. Sleeps very poorly; Coughing & raising phlegm continually. Abscess appears much smaller than before; apparently broke during the night. Still has severe "Coughing Spells" by night. Appetite growing poor.
" 13/17 June 13/95. Abscess on rectum, discharging pus, this am - June 17/95. Sleeps very poorly. Is steadily failing.
" 23 June 23/95. Appetite growing poorer, every day; Keeps steadily failing. Coughs raises considerable phlegm.
" 25 Rests & sleeps very poorly - June 25/95. Lies quietly in bed: steadily growing worse. Complains of limbs
" 30 aching, from lying in bed - June 30/95. Has very severe "Coughing Spells" & is steadily growing weaker -
July 5 July 5/95. "Coughing Spells" continue; he also has indications of bed-sores on hips. Appetite is fair
" 7/9 July 7/95. Wt 91 pds. Is growing steadily weaker - July 9/95. Is now so weak that he has involuntary passages & soils his bed. Is rapidly failing; respiration labored & rapid: complains of pains all
" 10 over his body - July 10/95. Lies steadily in bed; coughs much & raises phlegm. Sleeps very poorly -
" 13 and groaning while asleep - Has a disagreeable odor about him - July 13/95. Is steadily failing.
" 16 July 16/95. Rapidly failing - Took no solid food, today - Groaning & breathing very hard & fast. ——
" 17 July 17/95. Was groaning all night. Slept only 2 hours. Was very restless. Is very low, this morning.
10 Am Is rapidly failing - 10:15 Am. Died (see attached record) —

— Died —

Personal and Medical History of Charles L. Bonner

Whole No. 3788.
Residence, Stewartville, Minn.
Date Admission, 21st July 1894
Admitted by, D. Phelps. Hour, 11:30 A.M.
How Sent, Thomas Fraser, Jof P, Olmsted County.
Sex, Male
Age, 54
Civil Condition, married
Children, Three
Age Youngest Child, —
Occupation, Grain Merchant.
Degree Education, probably good
Profession Religion, is a church member
Habits, Good
Nativity, Mount Pleasant, Penn
Physicians Committing, A. A. Witherstine & Chas. Graham
Correspondents, D. L. Bonner, Stewartville Minn

No. for Year, 358.
Insane Relatives, None
Cause Exciting, Loss of money
Cause Predisposing, not given
Form, Gen Paresis
Accompanying Bodily Disorder, None
Suicidal or Not, not
Date of this Attack, January 1894
Duration, about 6 months —
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 53 +
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Evly D. R. M. Phelps July 23/94.

MENTAL CHARACTERISTICS.

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

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

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

REASONING POWER:
Ordinary Subjects, Fair
Own Mental State, } somewhat impaired
Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:
Has had headaches for 3 or 4 years, lasting 3 or 4 days at a time, rather periodical.

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

DELUSIONS: No well-defined delusions but
Systematized or Not, delusive idea as to ability &
Special Subjects, lack of appreciation of his own state
Transitory or Not,

HALLUCINATIONS:

ILLUSIONS:

CONVERSATION:
Coherent or Incoherent, } Fairly Coherent, but shows
Voluble or Reticent, } ideas as above. Denies his insane, but shows some considerable mental failure. —

Personal and Medical History of Charles L. Bonner

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8½ WEIGHT, 170 pds. NUTRITION, normal
WOUNDS OR ABNORMALITIES, None noted — see "B" next page.
TONGUE, Tremors, None Coatings, Considerable White Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, Good. Accommodation,
SIGHT, } Good
HEARING, }
COORDINATION, Arms, Good; —
Legs, pretty good, by all tests.
TREMORS, Hands, steady Tongue, None
Facial Muscles, General,
REFLEXES, Patellar, Equal about 4 —
Other Reflexes, some ankle clonus
ARTICULATION, ~~Hesitating~~, Good. Slurred,
FACIAL EXPRESSION, Fair
SENSIBILITY,
HEART, somewhat Enlarged —
LUNGS, Sounds Clear
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Yes Careless,
BOWELS, Normal, Yes Constipated, Irregular,
APPETITE, Good, Yes Medium Poor,
SLEEP, Good, Yes Poor, Irregular,
PULSE, 94. Recd RESP., TEMP., Normal
CRANIAL MEASUREMENTS,

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN, probably 3 months.
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") Denied —
Mother or Mat. Relations,
Father or Pat. Relations, } Brother in law state patient's maternal uncle recently died in a private
Brothers or Sisters, } hospital. Had been in Penitentiary became insane.
Apl 4/95 D.H.H.

Personal and Medical History of Charles L. Bonner.

1894

This patient was brought here by Charles Stewart, Sheriff, with the following history. Habits, as regard temperance & morality, good. There is no history of heredity. Supposed cause of this attack is loss of money; form of attack is depressed. There is no accompanying bodily disease. The first symptoms of disease was manifested in January 1894, by wild money schemes. This is the 1st attack. Insanity is now manifested on the subject of money. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. There is no history of any bodily disease & nor of any injury to the head. He has not been restrained or confined, nor under medical treatment. Financial losses supposed to have a bearing in the case.

July 21 On admission, was put on B3. (S.R. Complexion dark; hair gray streaked; Eyes gray; Condition of skin good. Some scars on left leg. Bodily Condition dirty. Has a mole in centre of neck. Behavior is good). July 22/94. Was quiet & slept 8 hours, last night. Appetite fairly good; bowels generally free: no cough noticed; talks freely; no delusions noted; is discontented & wants to get out.
" 23 July 23/94. Again, rested well, sleeping 8 hours, last night. AM. Pulse 98 R 20 T 98. Appetite good.
" 24 Behaves well. No delusions yet noted. July 24/94. Slept well, (8 hours), last night. AM. Pulse 95. Talks freely no delusions noted; makes no complaints. Examined in office 1/4 hr. Proposed treatment; calomel dose followed by a nerve tonic; ℞ Strych. sulph. gr. 1; tr. Gent. Co. ℥ iii; ag. ad. ℥ viii; sig: ℥ ii. t.i-d, in water.
" 25 July 25/94. AM. Pulse 95. Somewhat discontented; talks about wanting to go home. Shows a staggering gait, when walking. Same medicine. July 26/94. AM. Pulse 92. Appetite fairly good. Still talks about "wanting to go home" - also talks to himself at times; amuses himself. July 27/94. AM. Pulse 92. —
" 26 Appetite not good. Same medicine. No delusions noted; makes no complaints. July 28/94. Since last noted, he has been resting well, sleeping from 7 to 9 hours, each night. Appetite medium; bowels regular. P.M.
" 27/30 July 29/94. AM. Pulse 76. Has been quite restless today; wanting to go home. July 30/94. Am. Pulse 78.
" 31 Continues, otherwise, about the same. July 31/94. AM. Pulse 76. Behavior is good. Appetite medium; bowels regular. Unsteady when walking; staggers. Habits are cleanly. ——— ——— ———

Augt 1 Augt 1/94. Has, with the exception of only about one night, been resting & sleeping well, meals. AM. Pulse 68.
" 2 Same medicine. Augt 2/94. AM. Pulse 80. Appetite only medium. Patient seems failing physically.
" 3/4 Shows delusions. Augt 3/94. AM. Pulse 79. No special change in condition. Still take medicine Augt 4/94. AM. B.M.
Continues to sleep 7 to 8 hours, each night. Appetite medium; bowels regular. Behavior good, but he is somewhat restless & discontented; "wants to go home". Shows delusions; "thinks he is worth thousands of dollars & is dealing in real Estate". Is very unsteady when walking; gait staggering. ———
" 5/6 Augt 5/94. Wt 170 pds. Pulse 80. Had a convulsion, last night. Augt 6/94. Patient seems to be failing both physically & mentally - Is very unsteady, when walking). Augt 7/94. Has been resting & sleeping
" 29 well, at night. Behaves well. Reads, plays games &c & writes a few letters, no delusions noted.
" 31 Was transfered to B3 East, today. - Augt 31/94. Keeps about the same. Is quite restless, easily excited & quite nervous. Talks a great deal about going home; says "he must go to work". Habits are cleanly.
Sep 3/6 Sept 3/94. Wt 169 pds. (a gain of 17 pounds, in the past Month). Pulse 114. Sept 5/94. Vomited, today by
" 8/30 his father & a friend. Sept 7/94. Visited by two friends, today. Sept 30/94. Always quiet & well behaved -
Oct 1/30 Greatly agitated: wanders about ward as if he was lost. Inclined to ask many questions. Wants to go home.
Oct 1/94. Wt 189½ pds. Pulse 82. Oct 31/94. Does not improve any. Restless, at all times. Very nervous & very forgetful. Will wander about the ward, in an aimless way, as if he was lost; will stagger and

Personal and Medical History of Charles L. Bonner.

1894

Oct 31 Cont'd and almost fall down. Much inclined to ask many questions - Has a great deal to say about buying & selling, and in this regard shows delusions. Also writes letters of the same tenor & tone.
Nov 2/30 Nov 2/94. Wt 192 pds. Pulse 94. - Nov 30/94. Restless; easily excited; very nervous; inclined to wander aimlessly around ward, a great deal; asking many questions; troubled a great deal about getting
Dec 3 away. Writes quite a few letters home & to parties on business matters, ventures &c. Dec 3/94. Wt 190½ pds.
" 31 Pulse 95. Dec 31/94. Very uneasy; worrying about going home "to attend to his business" (speculating &c); write, now, 2 or 3 letters every day; is somewhat unsteady on his feet - Has a very good appetite;
1895 Jan 2 bowels are regular. Jan 2/95. Visited by friend - Jan 3/95. Wt 188 pounds. Pulse 96. -

Wea. SAT. JAN. 5, 1895 Ther.

Hall 8 & 4 Please
Deliver to Hall ward 4
Care of Dr Hall
3 Hrs for rule & [illegible]
300 Hundred Dollars
Hogs
C L Bonner

[illegible] at 4 PM & one at 7 PM); each lasting about 20 minutes -
[illegible]y; asking questions about his going home - Somewhat dirty in habits -
[illegible] 98. Feb 9/95. Had a convulsion at 8 am: lasting about 5 minutes.
[illegible]il has delusions. Nervous, at times: always talking about & wanting
[illegible]usiness & speculations, all the time: buys hogs &c &c &c") —
[illegible]5th. March 31/95. No special change. Still full of delusions;
[illegible]. in hogs &c." Asks nonsensical questions. Very untidy. Does no work.
[illegible]se 98. April 1/95: Had a convulsion, lasting about 5 minutes.
[illegible] at 5th am. April 30/95. Appears growing worse, mentally.
[illegible]sions. Always full of "speculations"; "buying hogs &c".
[illegible]person. Does no work. May 2/95: Wt 196½ pds. Pulse 88. —
[illegible] 5th, lasting about 10 minutes - May 7/95. Tried to Escape.
[illegible]: does not improve: behaves quietly, but is always trying to
[illegible]ay closely - Does no work. June 1/95. Wt 192 pds. Pulse 86.
[illegible], while not walking: June 30/95. No change noticeable. —
[illegible]. July 1/95. Had a convulsion at 4th PM. July 2/95. Tried to
[illegible] as far as Chester, before he was overtaken. July 31/95. Seems to
[illegible]. Has convulsions, frequently. Has many & various delusions.
Appetite poor. Behavior, as a rule good: very untidy about his person. "Still full of speculations" -
Aug 1/15 Aug 1/95. Wt 189½ pds. Pulse. Aug 15/95. Condition remains about the same: he appears, however,
to stagger more, when he walks. Not very clean, in his appearance. Appetite very good.
" 19 Aug 19/95. Had 4 Convulsions, during the day: appears much weaker & cannot walk much.
" 20 Received bruises on nose & forehead, by falling on the floor. Aug 20/95. Transferred to I.W.E. -
" 25/31 Aug 25/95. Sleeps 7 to 8 hours, nightly. Aug 31/95. Still full of delusions; "Speculations &c",
continually asking patients onward, if they have any hogs to sell" - Seems about the same
Sep 5 as when received in this ward. Sept 5/95. Patient seems to be doing fairly well.
" 6 Sleeps 7 to 8 hours, nightly. Appetite good: bowels regular. Sept 6/95. Wt 191 pds. —
" 12 Sept 12/95: appears brighter & more active than usual, this morning. 8 Am: Had Convulsion.
" 22/23rd Sept 22/95: 2 PM. Had a convulsion: Sept 23/95: 6 Am. Had a convulsion. Sept 24/95: He is
" 30 continually falling on floor: does not seem to have much control of his legs. Sept 30/95. No
special change to note: Condition has not changed much: he is quite boisterous & an-
- noying, by continually asking questions. Still shows various delusions "Speculation" &c.

→ Transfer Book A - 220

Personal and Medical History of Charles L. Bonner.

1894

This patient was brought here by Charles Stewart, Sheriff, with the following history. Habits, as regard temperance & morality, good. There is no history of heredity. Supposed cause of this attack is loss of money; form of attack is depressed. There is no accompanying bodily ... The first symptoms of disease was manifested in January 1894, by wild money ... is the 1st attack. Insanity is now manifested on the subject of money. Patien... to injure others, nor suicidal, nor filthy nor destructive. There is no ... nor of any injury to the head. He has not been restrained or confined ...

Financial losses supposed to have a bearing in the case.

July 21 On admission, was put on B2. (T.R. Complexion dark; ha... of skin good. Some scars on left leg. Bodily Condition dirty ... 22 Behavior is good). July 22/94. Was quiet & slept 8 hou... generally free: no cough noticed; talks freely; no delusio... 23 July 23/94. Again, rested well, sleeping 8 hours, last n... 24 Behaves well. No delusions yet noted. July 24/94. ... freely ... ved ... water. ... staggering ... talks about ... PM. Pulse 92. — ... ly 25/94. Since last ... edicine; bowels regular. P 70 ... w. July 30/94. Am. Pulse 78. ... to ... ... ; ... ...

Personal and Medical History of John Brooks (Colored)

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3794.
Residence, St Paul (from City & County Hospital)
Date Admission, 27th July 1894
Admitted by, D. Kilbourne Hour, 7 P.M.
How Sent, John B. Olivier, Jof A, Ramsey County
Sex, Male.
Age, 15 (about)
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, unknown
Degree Education, unknown
Profession Religion, unknown
Habits, unknown
Nativity, unknown
Physicians Committing, A. B. Ancker and Arthur Sweeney
Correspondents, "none given in papers"

No. for Year, 364.
Insane Relatives, unknown
Cause Exciting, unknown
Cause Predisposing, unknown
Form, apathetic type of Melancholia (per Gram Wash
Accompanying Bodily Disorder, none
Suicidal or Not, not.
Date of this Attack, 3 weeks ago
Duration, 3 weeks. probably
No. of Attack, unknown
No. of Admissions, 1st
Age First Attack, unknown
Time of Leaving, Feb. 10' 96.
Time in Hospital, 1 yr. 6 mo. 14 da.
Result, Disc. Recov.

EXAMINATION ON ADMISSION.

Ed by Dr. Phelps Eby July 28/94

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Impaired
Recent Events,
Special Subjects,

PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive,

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

GENERAL DESCRIPTIVE REMARKS:
Patient says he lives in St. Paul.

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

DELUSIONS:
Systematized or Not, Vague in various subjects
Special Subjects,
Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS: None noted

CONVERSATION:
Coherent or Incoherent,
Voluble or Reticent,
Seems to apprehend ordinary questions, but answers reluctantly, without particular Coherence.

Personal and Medical History of John Brooks (Colored)

THE CITY AND COUNTY HOSPITAL,
DR. ARTHUR B. ANCKER, SUPERINTENDENT,
AND PHYSICIAN AND SURGEON IN CHARGE.

DIRECTORS:
JOHN KERWIN,
ADAM FINCK,
EDWARD H. JUDSON.

ST. PAUL, MINN., July 3rd, 1894. 189

JOHN BROOKS.

Body well nourished. Age uncertain. Lies perfectly quiet looking at some flowers in his hand. Seems to understand questions put to him, but will not say a word.

Respiration normal. Apex beat an inch in diameter. The outer border equals nipple line. The heart sounds, both systolic and diastolic, booming, slow and irregular apex. Pulse 46 to 50. At aortic cartilage t the first sound is indistinct, the second sound distinct, but of slight clacking character.

Lungs normal as to inspection, palpation, percussion, and auscultation.

Abdomen: Muscles lax, skin soft, flexible and moist. Palpation of abdominal contents seems to give no pains. The recti contract on palpation. There is little gurgling in right iliac fossa. Braydicardia present.

Signed H. J. O'Brien, M.D.
Staff Physician.

Exaggerated abdominal reflexes. Pupils react sluggishlt to light. Tongue protrudes straight. Facial muscles and expression natural. Grasp of hands equal and strong. Spastic rigidity of muscles of arms and legs present. Loss of control of bladder and bowels.

Intellect clouded. Does not reply to questions except in regard to food.

Signed A. Sweeney, M.D.
Staff Physician.

July 7th.

More rational. Talks more. Gives his home as Richmond, Va., but when repeatedly asked for his age he answers sixty six, probable meaning that he was born in that year. He says it is twenty nine years since he was in Richmond. The spastic contraction of muscles not so marked to-day.

July 8th.

Improved still more. Not so wandering in his answers. Stays in bed with out looking after. Wants to go outside and claims that he will not run off.

July 9th.

Very much changed. Very melancholic. Crying most of the time. Big tears rolling down his cheeks. Refuses to eat. Says it is Devil's food and that God told him not to eat it. No control over bowels or bladder. Found wandering around among the beds of the ward at night, and when asked what he was up for, answered - I see the Devil; at the same time pointing to one of the patients. Another patient he called God. Speaks i n a rambling way about a sermon he had heard and as to how the Minister preached about Hell. Slight attempt at imitating the gestures of the minister. When asked what he wanted he answered - I want to go to Heaven there are Angles there, and my mother and sister. When asked if he prayed, he said he was praying all of the time.

good.

rupt

ds fairly steady.

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 —
Brothers or Sisters, one sister dead —

Person

Wh

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Early Dr. Phel,

MENTAL ACTIVITY:

Clear or Confused, Con,

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Impaired

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, Poor

Own Mental State,

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

Patient says he lives in St. Paul.

ON.

AL STATE:

al, Calm,

ndifferent,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not, Vague in various subjects

Special Subjects,

Transitory or Not,

HALLUCINATIONS: Unnoted

ILLUSIONS: Unnoted

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Seems to apprehend ordinary questions, but answers reluctantly, without particular Coherence.

Personal and Medical History of John Brooks (Colored)

Y AND COUNTY HOSPITAL,
DR. ARTHUR B. ANCKER,
SUPERINTENDENT,
AND PHYSICIAN AND SURGEON IN CHARGE.

DIRECTORS:
JOHN KERWIN,
ADAM FINCK,
EDWARD H. JUDSON.

good.

rupt

fairly steady.

2

ST. PAUL, MINN., 189

There is a more rapid hearts action to-day and pulse fuller.

July 10th. Condition about same as yesterday.
" 11th. "
" 12th. " and no control of bowels
" 13th. "
" 14th. " pulse still more rapid.
and for the first time in a long while, ate a fairly good supper.

July 26th.

Materially no change during the last 12 days. Has been outside some, but prefers to stand about the halls in ward building listless and seemingly unobserving. Says now that he is fifteen years old.

Signed

A.B.Ancker, M.D.
Supt. in charge
per J.G.Vigen, Interne.

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 —

Brothers or Sisters, one sister dead —

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ON.

MENTAL ACTIVITY:

Clear or Confused, lo.

Quick or Sluggish, Sluggi

MEMORY:

Past Events, Impaired

Recent Events,

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Dull

Correct or Illusive,

REASONING POWER:

Ordinary Subjects, } Poor

Own Mental State, }

Special Subjects, }

GENERAL DESCRIPTIVE REMARKS:

Patient says he lives in St. Paul.

STATE:

, Calm,

different,

Exalted,

Depressed, Yes

DELUSIONS:

Systematized or Not, Vague in various subjects

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None noted

ILLUSIONS: None noted

CONVERSATION:

Coherent or Incoherent,

Voluble or Reticent,

Seems to apprehend ordinary questions, but answers reluctantly, without particular Coherence

Personal and Medical History of John Brooks (Colored)

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4in — WEIGHT, 94 lbs. NUTRITION, not good.

WOUNDS OR ABNORMALITIES, See "S. R." on next page. —

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

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, yes

SIGHT, probably good

HEARING, Good

COORDINATION, Arms, Good; finger to nose, eyes shut, no irregularity.

Legs, Good; standing at rest, stands well; standing, eyes shut, stands fairly steady.

TREMORS, Hands, none Tongue, none

Facial Muscles, General,

REFLEXES, Patellar, — O — slight on reinforcement.

Other Reflexes,

ARTICULATION, ~~Hesitating~~, probably good. Slurred,

FACIAL EXPRESSION, Depressed.

SENSIBILITY, —

HEART, Sounds seem all right

LUNGS, seem good

EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty, Clean, Careless,

BOWELS, Normal, Constipated, Irregular,

APPETITE, Good, Good Medium, Poor,

SLEEP, Good, Poor, yes Irregular,

PULSE, 65. 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 —

Brothers or Sisters, one sister dead —

Personal and Medical History of John Brooks (colored)

1894

GERRAT, FOLEAR & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy Sheriff A.W. Chapel, with the following history, which is very meagre + indefinite. Very little particular could be obtained regarding him. He was found in a stupid condition about 3 weeks ago, at the Fair Ground, since which time he has been silent, stupid, sleepless and shows delusions. Number of attack is unknown. Insanity now shown by the belief that the devil is chasing him and "he sees horses + wagons on the wall". Patient is not disposed to injure others, nor suicidal, nor filthy nor destructive. No peculiarities to be were previously shown. He has been at the City and County Hospital, St Paul from July 2nd to July 26th; no improvement shown under treatment there.-

July 27 On admission, was put on Ward 3 (S.R.) is a colored boy; hair black; eyes dark brown; condition of skin good; has a vaccination mark on left arm; no further scars; no eruptions, ulcers or bruises noticed: bodily condition clean; no bodily peculiarities noted; is well-behaved). July 28/94. Was awake for 2 hours or so, but slept 7 hours last night: A.M. Pulse 66. R 27. Temp 98.4; appetite poor; bowels have not moved: is very quiet; does not speak to anyone - 28 no cough noticed: no complaints or injuries to report. July 29/94. Slept well, last night. A.M. Pulse 78 R — Temp 98.2. Appetite still poor. Patient is stupid + dull; appears 'lost' and bewildered; does - 30 not seem to know enough to dress himself in the morning, without assistance. July 30/94. Slept 5 hours last night, was restless about 4 hours. A.M. Pulse 60. Temp 97.6. Appetite poor; refuses medicine. Examined 28th July; no lesion found. Treatment to be directed toward a stuporous melancholy state, as follows; Rx: calomel purg; Rx. Tinct. Valerian ℥ ii. Sig: ℥ iv after supper. Rx Br. spir. ℥ iv - Sig. Teasp. after - 31 breakfast + after supper. Electricity would hold out somewhat of hope of benefit, a little later in the treatment - July 31/94. Slept 6 hours; was somewhat restless. A.M. Pulse 66. Temp 97.2. Appetite is improving, and he also appears to be brighter this morning, than at any time since became here. Takes his medicine again.

Aug 1 Aug 1/94. Slept well, last night. A.M. Pulse 64. Temp 97 4/5. Wt today, 97 pds. (a trifle of a gain)- - 2 Appetite is not very good; bowels still constipated. Aug 2/94. Seemed to sleep well, again, last night, also. A.M. Pulse 68. Temp 97.6. Appetite still poor: he appears to be afraid of eating, while the rest are in the - 3 dining-room; eats some after they have gone out. Aug 3/94. Slept only 3 hours, last night; was restless 6 hours or so. A.M. Pulse 66 Temp 97.6. Still eats poorly. Behavior + manner are dull + stupid; he hardly ever speaks: appears confused + lost; most of the time. 5 P.M. Pulse 68 Temp 97.6. - - 4 Aug 4/94. Restless + disturbed, sleeping only about 5 hours, last night. 8 Am. Pulse 65. Temp 98.6. No improvement whatever in appetite. Patient has a distressing look on his face +, at times, appears - 5 as though he was crying: stands idly about, most of the time. 8 P.M. Pulse 98. Aug 5/94. Again very restless, sleeping only about 5 hours, last night. A.M. Temp 97.8. Appetite poor; behavior as usual; - 6 no change to note. 7 P.M. Pulse 88. Temp 99 1/5. Pulse quite strong, this evening. Aug 6/94. Slept only 5 hours last night. 8 Am. Pulse 60 Temp 98.2. Pulse very weak. Appetite is not improving any; says his bowels have not moved for some time. Is on medicine. In other respects, is about as usual. -

- 7 Aug 7/94. Slept 6 hours, last night. Appetite somewhat improved, today. In other respects, no change to note. - 8 Aug 8/94. Rested quite well, sleeping 6 hours, last night. Appetite quite fair; ate a good breakfast this morning. - 9/10 Aug 9/94. Slept well, again, last night. Appetite fair; conduct + behavior, as usual. Aug 10/94. Rested + slept well, last night. 8 Am. Pulse 68 Temp 99.2. Appetite fair. Otherwise, no special change noted.

Summary. Rest + sleep at night, very poor for some time, have improved considerably of late. Appetite, at times, fair + at others very poor. Is, most of the time, dull + stupid; seems confused + lost; also depressed; very seldom, will answer when spoken to, + when he does, it is in such

Personal and Medical History of John Brooks (Colored)

Summary cont'd

1894

a low tone of voice that it is impossible for any one to understand him. He has still to be assisted in dressing + undressing. Has, at all times, a rather distressing + melancholy look on his face + cries, at times.

Aug 25 Habits are clean. He does no work. Is on medicines. Aug 25/94. Appetite improving) some, of late; he appears to be improving also mentally, as he is brighter and more active than usual. —

" 31 Aug 31/94. Appetite, at times fairly good. At other times, again, very poor. Nurse says, he will be better and more bright than mothers + will answer if spoken to. At other times, is very dull + stupid. Habits are fairly clean. (was 2 days dirty, during month). He has gained a little in flesh, since Comg

Sep 3/10 Sep 3/94. Wt 99 pds. Pulse 78. Sep 20/94. Appetite poor. Won't take any food, unless he is fed-

" 21 occasionally, wets his pants. Sep 21/94. Was ordered to bed. Was given Massage treatment (by E. Hoard)

" 22/24 Sep 22/94. Appetite good, today. Bowels have moved. Sep 24/94. Appetite failing some; today, did not eat any dinner; ate only a small supper. Was given massage treatment, again, today.

- 26 Seems somewhat brighter, since treatment began. Sep 26/94. Appetite not so good, as a few

- 28 days ago. Bowels move more freely. Again given Massage treatment today. Sep 28/94. Given

- 30 another massage treatment today. Does not appear as bright, as a few days ago. Sep 30/94. Ap-

-petite poor + at times will not eat, unless fed. Habits occasionally dirty; (was dirty 7 days during the month); is stupid + dull, as a rule. Hardly ever answers when spoken to. —

Oct 1/6 Oct 1/94. Wt 100 1/2 pds (undressed). Pulse 78. Oct 6/94. Patient has been given Massage treatment

" 31 on 1st 3d + 5th inst. Is up, onward, this afternoon. Oct 31/94. Has remained up, daily. — Was given Electrical treatment, today. Patient does not appear to improve any. Does not speak to any one. Is dull + stupid. Wets his clothing night + day. (was 17 Days Dirty during month)

Nov 1/14 Nov 1/94. Wt 115 pds. Pulse 100. Nov 14/94. Has been receiving "electrical treatment" for some time past.

" 30 Nov 30/94. Appetite good; bowels regular. Appears dull + stupid; wets his clothes, both night + day; (number of Days dirty during month, 21). On the whole, is improving + some of late. Still receives

Dec 1/15 "Electrical treatment". Dec 1/94. Wt 122 pds. Pulse 95. Dec 15/94. Has improved, considerably, of late + talks quite a good deal; also works some on ward; wets his bed, during nights, but says he is not aware that he does it; does not wet his clothes, by day, now. Dec 21/94. Drowsy + stupid the last 3

" 31 days. Dec 31/94. Appetite rather poor, the past few days. Otherwise no special change noted.

1895 Jan 2 Jan 2/95. Wt 134 pds. (has gained very markedly, in flesh, the past 2 months). Pulse 82. -

" 16 Jan 16/95. Patient was caught in the act of unlocking the door, today: a key was found on his person.

" 19/24 Jan 19/95. Is getting very contrary + stubborn. Jan 24/95. Has improved very much of late,

" 25 but is still rather contrary + independent. Jan 25/95. Some one passing through ward, left the hall-door open. Brooks went out, shut the door after him, + took a ride to the town.

" 31 Jan 31/95. Improvement has kept up, quite well, though he is still very contrary + independent, at times. Habits have become cleaner. Works a little on ward. Physical Condition good-

Feb 1/3 Feb 1/95. Wt 137 pds. P.O. Feb 13/95. Secreted himself under the billiard table, when ready

" 14 to go home from the dance, this evening: was found + brought back. Feb 14/95: Had some trouble

" 28 with patient John Hare, striking him in face. Feb 28/95: No special change in manner, conduct or behavior. Saucy + independent. Quiet-moving. Quite frequently caught in the act of picking locks.

Mar 1/3 March 1/95. Wt 143 pds. (has gained some in flesh). P.O. March 3/95: Rather more troublesome, of late. Very saucy, when spoken to. Does not work any; rather slouchy in dress, at times.

(carried to 385).

Personal and Medical History of Nicholas Koch

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3796.
Residence, Unknown -
Date Admission, 28th July 1894.
Admitted by, D. Kilbourne Hour, 7 PM.
How Sent, John B. Olivier, Jof P. Lawrence County
Sex, Male
Age, 53
Civil Condition, Single
Children, —
Age Youngest Child, —
Occupation, Laborer
Degree Education, not given
Profession Religion, Roman Catholic
Habits, Temperate
Nativity, Germany
Physicians Committing, Geo. F. Hanley & D. A. Macdonald
Correspondents, none given in papers



No. for Year, 366.
Insane Relatives, none
Cause Exciting, Supposed Epilepsy
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, Suffered Epilepsy
Suicidal or Not, Suicidal; Jumping off bridge
Date of this Attack, unknown
Duration, unknown
No. of Attack, unknown
No. of Admissions, 1st
Age First Attack, unknown
Time of Leaving, Apr. 26. 1900
Time in Hospital, of 1 yr.
Result, Transferred to Hastings.

EXAMINATION ON ADMISSION.

Early D. Phelps, July 30/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, not very clear
Quick or Sluggish, Sluggish
MEMORY:
Past Events,
Recent Events,
Special Subjects, Impaired at special time
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, fair
Own Mental State, somewhat dull
Special Subjects, " "

EMOTIONAL STATE:
Normal, Calm,
Indifferent,
Exalted,
Depressed, None
DELUSIONS:
Systematized or Not,
Special Subjects, None noted, at present.
Transitory or Not,
HALLUCINATIONS: none
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, ✓
Voluble or Reticent,

GENERAL DESCRIPTIVE REMARKS:
Says he has had a broken knee-cap. Patient describes "a shaking spell" coming on frequently from once a day to once a month for past 15 years, followed by headache, dizziness & sweating, lasting sometimes only a minute & sometimes several hours; never loses consciousness, never has false mental confusion produced, at times. Previous the "spell", the more prominent all these symptoms. It seems probable he had an attack & was thought drunken.

Personal and Medical History of Nicholas Koch

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 5in WEIGHT, 140 lbs. NUTRITION, somewhat impaired
WOUNDS OR ABNORMALITIES, See S.R. on next page
TONGUE, Tremors, slight Coatings, none Promptness Movement, sluggish
PUPILS, Equality, Equal Size, normal
Response Light, Yes Accommodation, Yes
SIGHT, some impairment
HEARING, Good
COORDINATION, Arms, impaired; finger to nose, Eyes shut, impaired.
Legs, Standing on foot, Stands fairly well; Standing, Eyes shut, some swaying.
TREMORS, Hands, some Tongue, slight
Facial Muscles, some General, none
REFLEXES, Patellar, Equal — about 7 or 8 —
Other Reflexes,
ARTICULATION, Hesitating, Seems fair Slurred,
FACIAL EXPRESSION, somewhat depressed & dull.
SENSIBILITY, normal
HEART, Sounds good; no atheroma.
LUNGS, Sound — good.
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Constipated, Irregular, Yes
APPETITE, Good, Good Medium, Poor,
SLEEP, Good, Record Kept Poor, Irregular, 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 Nicholas Koch.

1894

This patient was brought here by Deputy Shereff M. N. Goss, with the following history. Habits temperate. There is no history of heredity. Cause of attack is supposed Epilepsy: form of attack chronic, form of tonical. When first symptoms were manifested or number of attack are unknown. Insanity is now shown by being dispersous & suicidal: attempted to jump off bridge. If disposed to injure others is unknown; is not filthy or destructive. If he has been restrained or confined is unknown if under medical treatment is also unknown. ——

July 28 On admission, was put on B.P. (S.R. Complexion dandy; hair dandy; eyes brown; condition of skin good; scars on right cheek: no ruptures noticed: bodily condition dirty: first toe of right foot off: behavior is good).
" 29 July 29/94. Restless 3 hours, but sleeping 6 hours, last night. A.M. Pulse 68 R 18. T 98. Appetite good; bowels seem regular. Is quiet & well-behaved. Talks but little; no delusions noted. No complaints or injuries to report.
" 30 July 30/94. More restful, sleeping 7 hours, last night. A.M. Pulse 70; R 16-20. T 98. Appetite & behavior good; no delusions yet noted. Works around on the ward. Examined to day. Patient has some incoordination and impairment of general health. Rx. Tinct. Strychnia gtt II; aq. ad. ʒ IV. Sig: teasp. after meals. ——
" 31 Rx. Galvanism to neck & back, every other day. July 31/94. Slept 9 hours, last night. Appetite medium. He complains of some dreness in chest, but it is slight. Bowels are free. No delusions have yet been noted.
Aug 1 Aug 1/94. A.M. Pulse 63. T 98. Appetite good: he complains of headache; bowels regular. Is well-behaved.
" 2 Aug 2/94. Was restless for a while, last night. A.M. Pulse 66. About as usual. Is on medicine. —
" 3 Aug 3/94. A.M. Pulse 70. Is very quiet; talks but little. Appetite keeps good. Otherwise, about as usual.
" 4 Aug 4/94. A.M. Pulse 79. Still Complains some of headache. Walks out daily. Takes medicine as directed. —
" 11 Aug 11/94. During this the 2nd week, there is no special change to note. He is occasionally restless at night, but sleeps, usually, from 6 to 8 hours, as such. Appetite is only medium: bowels seem normal. Pulse ranges from 68 to 72. He continues quiet & well-behaved; causes no trouble. Stands a lot around and will not talk, unless addressed. Does not read or take any part in games &c. Complains quite often of headache & weakness in the knees. No delusions noted. He walks out daily; is on medicine. —
" 19/20 Aug 19/94. Had a "Spell" to day. Commenced to yell & run through the hall. Aug 20/94. Last night at 12 P.M. was found by night-watch, with a sheet twisted in a rope, & having a loop at me end—
" 31 Aug 31/94. Occasionally restless, at night. Is very dull & stupid. Lies around on the benches, all day. Will not talk unless addressed. Sep 1/94. Wt 145 pds. Pulse 88. Sep 16/94. Restless last night;
Sep 1/16 " 23 had a "peculiar spell"; seemingly, a slight convulsion. Sep 23/94. Complains of headache, yesterday and today, was given a cathartic before breakfast. Patient also complains of his throat being sore.
" 24/25 Pulse 70. Sep 24/94. Given washes for throat. Pulse 78. Sep 25/94. Throat is now much better.
" 29/30 Pulse 80. Sep 29/94. Had a convulsion at 10 to last night. Sep 30/94. Still somewhat restless. Some nights. Has slight convulsions, from time to time, but these usually last only about 3 minutes. Complains of pains in head quite frequently. Behaves well. appetite only fair; bowels more regular.
Oct 1/8 Oct 1/94. Wt 143½ pds. Pulse 78. Oct 8/94. Patient has been given a few treatments by electricity.
" 31 Oct 31/94. On quite a few of the nights, this month, patient has been quite restless & has slept poorly. Appetite very changeable. He is stupid & dull.; depressed; talks but little. No special improvement noted.
Nov 2/9 Nov 2/94. Wt 146½ pds. Pulse 72. Nov 9/95. Occasionally restless at night and sleeping poorly.
" 30 Nov 30/94. Appetite changeable. Sits about; is very stupid; talks but little & only in monosyllables, when questioned. Dec 1/94. Wt 155 pds. (some gain in weight). Pulse 90. Dec 10/94. Has been
Dec 1/10

Personal and Medical History of Nicholas Koch

1894

restless & sleeping poorly, the past few nights. Appetite is poor. Dec 31/94. No special change: Is
Dec 31/Jan 7 stupid & depressed. Talks but seldom. Jan 2/95. Wt 158 pds. Pulse 91. Jan 31/95. Still stupid & dull.
" 7/31 Talks but seldom & then only in monosyllables. Does not waiting for exercise sometimes. Untidy in dress.
Feb 1/28 Feb 1/95. Wt 159 pds. P 80. Feb 28/95. Very stupid: appetite poor. Feb 28/95. Still stupid; talks some:
Sits about most of time: Does not work or participate in any recreation. Is untidy.
Mar 2/31 Mar 2/95. Wt 153 pds. P 80. March 28/95. Had several spells of kicking floor & tearing around,
generally. Mar 31/95. Stupid: appetite changeable; walks out, at times. Talks but seldom. Untidy.
Apl 1/30 April 1/95. Wt 154 pds. Pulse 80. Apl 30/95. No noticeable change. Unsociable. Transferred to D.C., today.
May 1 / July 31 During this quarter, patient has been quiet; seldom speaks; rather stupid; does no work.
Habits clean: does rather untidy. During early part of June, was confined to his bed, for several days
by lameness in the back. Health is apparently good. Aug Sep & to Oct 31/95. During this
Aug 1 / Sept Quarter, patient has been quiet, stupid & dull; seldom speaks. Health seems good. During September,
Oct 31 he was in bed, more or less; nothing seemed the matter with him: would persist in staying there, unless almost
Nov 1 / Dec 99 / Jan 31 forced out; but, after that, would work on ward. Nov 4/95. Wt 153 pds. P 80. — Nov. Dec - Jan 1/96. For
this period, no change noticeable. Quiet, stupid; no work. seldom speaks: health apparently good.
Feby 4/28 Feby 4/96. Wt 157 pds P 90. Feby 28/96. No change noticeable: stands in alcove, most of day. Is stupid. Habits clean.
Mar 30 Health apparently good. March 30/96. Patient's condition remains about same, from month to month.
Apl 22/30 Apl 22/96. Patient in bed: has slight elevation of temperature. Appetite good: bowels regular. Apl 30/96. He
still lies in bed: appetite fair: bowels irregular: complains of stiffness in limbs.
May 1/Aug 1/97 / Sept Summary Nurses Notes by Dr. Phelps. Patient, quiet, stupid, melancholy. Stands about: Is somewhat untidy
though fairly clean. No bodily illness noted. Wt. 141 to 156 lbs. Aug 3/97 150th. Oct 31 Health
good: Quite inactive & stupid. Rather quiet in behavior: Does no work. Jan 31/99 Physical
health quite good. No special change of importance during period.
Feb 1 / 1900 / Jan 31 July 31/99. Wt. 141. Appetite good: Sleeps well: Physical condition good: mental state unchanged
Is stupid Aug 1 - Jan 31/1900 (Dr. Chapple) Wt. 138th. Condition about stationary, Health good:
Very demented: seldom speaks: Behavior quiet: habits untidy: Has worked a good
Mar 30 deal in mattress shop. Mar 30. Condition remains about the same. —
Apl 26 Transferred to Hastings Hospital.

Personal and Medical History of Stephen Meyer

EBBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA



Whole No. 3797
Residence, St. Paul. Minn
Date Admission, 28th July 1894.
Admitted by, D. Kilbourne Hour, 7 PM
How Sent, John B. Olivier, Jo Co, Ramsey County
Sex, Male —
Age, 34 —
Civil Condition, single
Children, none
Age Youngest Child, —
Occupation, Gardener
Degree Education, probably fair
Profession Religion, Catholic —
Habits, Temperate —
Nativity, Germany
Physicians Committing, Geo. F. Hauley — A. Macdonald
Correspondents, none seen in papers

No. for Year, 367
Insane Relatives, Unknown.
Cause Exciting, unknown
Cause Predisposing, unknown. (previous attks)
Form, Paranoia (persecution Mania)
Accompanying Bodily Disorder, None —
Suicidal or Not, not.
Date of this Attack, about 6 years ago
Duration, about 6 years —
No. of Attack, not 1st — (off + on during past 6 years)
No. of Admissions, 1st —
Age First Attack, about 28 —
Time of Leaving,
Time in Hospital,
Result,

EXAMINATION ON ADMISSION.

Ex'd by Dr. Phelps July 30/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Quick
MEMORY:
Past Events, Fair
Recent Events, Fair
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Alert
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Fair
Own Mental State, Impaired
Special Subjects, Concerning a Woman & Marriage
GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:
Normal, Calm, Yes
Indifferent,
~~Exalted~~,
Depressed,
DELUSIONS:
Systematized or Not, Acts on various subjects.
Special Subjects, "Woman following him"
Transitory or Not,
HALLUCINATIONS: Hearing woman talk to him
ILLUSIONS: none noted
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, Free

Personal and Medical History of Stephen Meyer

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10 in WEIGHT, 151½ lbs. NUTRITION, Good
WOUNDS OR ABNORMALITIES, see S. Q. on next page
TONGUE, Tremors, none Coatings, whitish Promptness Movement, prompt
PUPILS, Equality, Equal Size, somewhat dilated
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, quite good —
Legs, Standing, Eyes Shut, quite firmly
TREMORS, Hands, none Tongue, none
Facial Muscles, none General, none
REFLEXES, Patellar, about 5 ; Equal.
Other Reflexes,
ARTICULATION, ~~Hesitating~~, Good ~~Slurred~~, foreign accent
FACIAL EXPRESSION,
SENSIBILITY, normal
HEART, palpitating ; no murmurs.
LUNGS, Sounds good
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

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

HISTORICAL.

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

Personal and Medical History of Stephen Meyer

1894

This patient was brought here by Deputy Sheriff M. N. Goss, with following history. Habits are temperate; as to any hereditary history, unknown. Supposed cause of this attack is unknown; form of attack is chronic. There is no accompanying bodily disorder. First symptoms of disease manifested about 6 years ago. This is not first attack, as he has had them, off & on, for past 6 years. Insanity is now manifested by the delusion that he is haunted by a woman, who follows him everywhere, and threatens to kill him. Patient is neither disposed to injure others, nor suicidal, nor filthy nor destructive. There is no history of any bodily disease, or injury to head. He has not been restrained or confined, nor under medical treatment.

July 29/94 On admission, was put on B^{2} (S.R.). Complexion light; hair brown; eyes blue, emotion of skin good; no marks noted, but has some scars on first finger of left hand; no eruptions noticed; bodily condition dirty - no bodily peculiarities noted. Is well behaved). July 29/94. Slept restfully, 8 hours, last night. Alm. P 70. R 18 to 19 T 98^{1}. Appetite good: bowels free; no cough observed. Is quiet & well-behaved. Shows delusions; "Talk about a lady bothering him" - No complaints or injuries to report. July 30/94. Somewhat restless, but slept 6 hours, last night. FM. Pulse 78. T 98 8/10. Continues well behaved. Delusion still prominent; says "there is a lady trying to put him in jail, every night". Talks of wanting to go home. Examined today. Patient seems, on the whole, a quite healthy man; no special indications for treatment first, but a tonic, as follows, may be tried. ℞. Strychnia sulf. (a dulph) grs ii; iron, quin & strych ℥iv ag. ad. ℥ viii. Sig: 1 teasp after meals. July 31/94. Slept 6 hours, last night. Am. Pulse 78. T 98 4/10. Appetite good; bowels regular. Still thinks "there is some lady around him, at night". Walks some on the ward. Is on medicine. Continues quiet & well-behaved. Habits are cleanly. Wt 151½ pds

Aug 1/94. Slept 7 hours during the night. Refuses his medicine. Still manifests delusions. Works on ward. P 88

Aug 2/94. Restless an hour or so, but slept 8 hours, last night. Am. Pulse 70. Appetite keeps good & bowels are regular. Still refuses to take medicine. Delusions still strong. Works some on the ward.

Aug 3/94. Slept 7 hours, was restless a couple of hours, during the night. Am. Pulse 72. No change otherwise.

Aug 4/94. Restless 3 hours, but slept 6 hours, last night. Am. Pulse 82. Refuses his medicine. Still has delusions; thinks there is poison in medicine. Aug 11/94. During the early part of this, the 2nd week of his stay, patient was quite restless at night, sleeping only 5 or 6 hours, at each; but the past few nights, he has been resting & sleeping much better, though still inclined to be somewhat restless. His pulse has been somewhat above normal. Appetite has continued good; bowels regular. He has been uniformly quiet & well-behaved; causing no trouble; delusions still prominent. "Thinks there is a woman around him, nights". Has only taken medicine once, during the past 10 days or so; refuses it, "thinking there is poison in it". He talks freely; reads some & plays games. Walks out daily. Physical condition good. He helps willingly with work on ward. -

Aug 15/94. No particular change. Appetite good. Still manifests delusions. Works some on ward.

Aug 31/94. Keeps about the same, as last generally described. Shows delusions. Helps with ward work.

Sep 1/94. Wt 154 pds. Pulse 75. Sep 30/94. Quiet & well behaved. Still holds to his delusions.

Oct 1/94. Wt 157½ " " 28. He has been steadily increasing in flesh, each month. -

Oct 30/94. Was helping in kitchen, this forenoon. Oct 31/94. Quiet & well-conducted. No delusions noticed of late, though he may still hold them. Works on the ward. Is tidy in personal habits.

Nov 1/94. Wt 194 pds. (is still gaining in weight). Pulse 84. Nov 19/94. Has been working, at times, in the laundry; also works some on the ward. Behaves well. Was, today, Transferred to B!

Personal and Medical History of Stephen Meyer

1894 Cont'd

Nov 26/94. Has continued quiet & well behaved & has been working, daily, at the laundry. Transferred to A!

Nov 30/94. No particular change noted. Quiet & well-behaved. Habits clean. Works outside at laundry.

Dec 31/94. Wt 173 pds. Pulse 92. Dec 25/94. Behavior has changed. Is restless; walks the floor all the time. Shows delusions. Says "that people are trying to kill him with knives & burn him with heated iron".

Dec 31/94. No special change since last report. Still works at laundry. Appetite good; bowels are regular.

1895 Jan 3/95. Wt 165 pds. (has lost some in weight); Pulse 82. Jan 31/95. Still holds to above delusions. Appetite is fair. Worked in laundry 26 days, during this month. Febr 28/95. Wt 161½ pds. Pulse 86.

Febr 5/95. Behavior good. Walks back & forth, nearly all the time, when on ward. Has delusions; says that "people appeared him, all night". Works all the time in laundry. Febr 9/95. Eloped from the Laundry.

Feb 20/95. Brought back & put on B^{2}. Sits idly about. Talks but little. Will not work any. Appetite good.

Feb 28/95. Restless & walks the hall nearly all the time. Seems to be in a "deep study"; looks down toward floor. Will stop & kick at some imaginary person, occasionally. Appetite is good. -

March 5/95. Wt 160 pds. (has been losing in flesh, the past few months). Pulse 100. March 9/95. Still restless, walks the hall; looks down & will stop & think for a moment & then walk on. March 31/95. Talks but little. Works some on ward. Restless & walks the floor a good deal; still acts jealously. Appetite good: makes no complaints, except that "he wants to go to St Paul": Is depressed.

April 1/95. Wt 160½ pds. Pulse 92. April 13/95. Showed attendant 2 or 3 marks on stomach, - where some woman in St Paul stuck pins in him, the night before". April 30/95. No change.

May 1/95. Wt 160½ pds. Pulse 76. May 31/95. Works on ward some; restless & walking the hall, a good deal of the time. Seems melancholy & depressed. Somewhat stupid in manner & actions.

June 1/95. Wt 163 pds. Pulse 88. June 30/95. "Wants to go to St Paul". Quiet: talks but little, unless addressed. Makes no complaints. Still restless & discontented. Works some on ward, also, occasionally out-doors, for an hour or so. Makes no complaints. Health seems good.

July 1/95. Has been somewhat "off" for a day or so. July 23/95. Is in a sort of "spell": tells of women bothering him etc". "Wants to get away". July 31/95. Evidently holds delusions; walks most of time, with eyes cast toward floor, and seems to be in deep thought. Works on ward. Habits are clean, but he is untidy. (Weight July 1st 158 pds. Pulse 88) - Aug 3/95. Wt 159 pds. Pulse 84.

Aug 28/95. June 16th last: patient has been troubled with a boil on left knee: same has been very painful: boil opened & dressed regularly: he was unable to walk & lay in bed, a good deal of the time: knee entirely well now (28th): Aug 31/95. No change. Specially brutal in his conduct.

Sep 1/95. Works now in the "Centre" daily. Sep 30/95. No change. Works daily in "New Centre"

Oct 1/95. Wt 154 pds - Pulse 84. Oct 31/95. Quiet & well-behaved. Works daily in "Centre". Quiet; does not talk much, but will answer rationally. Seems "thinking" a good deal, at times. Makes no complaints. Physical health good. Seems more contented of late

Nov 1/95. Nov 1/95 Loosing in flesh without known cause. Nov 30/95. Has been working steadily in "Centre", but, of late, has become stubborn & will not help there. No change noticeable in his mental condition.

Dec 1/95. Wt 138 pounds. P 78. Dec 1/95. Transferred to B!^{2}. Dec 31/95. A very quiet patient. Seems melancholy & depressed. Talks to no one unless addressed. Has numerous delusions. Very obstinate, at times. Refuses

1896 Jany 1/96. Wt 139½ pds. P 96. Jany 1/96. Seems growing worse: more restless. Walks in hall all day. Shifts from numerous delusions. Jany 21/96. Moved to B!^{2} (as a result of general change of ward). Jany 31/96. No change in condition noticeable

Ass^{t} M.D.

Personal and Medical History of James Silk

SIBLEY, FIDLER & CHAMBERS, DAVENPORT, IOWA

Whole No. 3800.
Residence, not stated - St Paul (?) Minn
Date Admission, 31st July 1894
Admitted by, D. Phelps. Hour, 7 P.M.
How Sent, John B. Olivier, Jof C, Ramsey County
Sex, Male
Age, 35 +
Civil Condition, single
Children,
Age Youngest Child, —
Occupation, none
Degree Education, not stated
Profession Religion, Is a church member.
Habits, a periodical Drunkard
Nativity, U.S.
Physicians Committing, O. Martell and A. MacDonald and W. D. Scelly
Correspondents, none given in papers

No. for Year, 370.
Insane Relatives, none
Cause Exciting, use of too liquor, when young
Cause Predisposing, "Chronic"
For
Acc
Suic
Dat
Dur
No.
No.
Age
Time of Leaving, June
Time in Hospital,
Result, Transferred to Hastings

Mr Michael Silk
344 Lawson St.
St Paul
Minn

copy of notice of hearing petition for appointment of Michael B. Silk as guardian for James Silk served upon Dr A.F. Kilbourne & filed with commitment papers 5/3/99
D

EXAMINATION ON ADMISSION.

Exd by D. Ely, Aug 1894.

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm, yes
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, not
Special Subjects,
Transitory or Not, Transitory
HALLUCINATIONS: none
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, voluble -

James Silk

ISSION.—(Continued.)
TICS.
NUTRITION, Fair
age
Promptness Movement, prompt
normal
on, yes

HEARING, — Good —
COORDINATION, Arms, Fingr to nose, eyes shut, no incoordination —
Legs, Standing, eyes shut, Stand steady
TREMORS, Hands, slight Tongue, slight
Facial Muscles, General,
REFLEXES, Patellar, Equal - about 5 —
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, normal
SENSIBILITY, normal
HEART, Sounds good —
LUNGS, Sounds good —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Neat, 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,") } Family, on mothers side, nervous. more insane —
Mother or ~~Mat. Relations~~, dead —
Father or ~~Pat. Relations~~, dead; Consumption —
Brothers ~~or Sisters~~, 4 living

Personal and Medical History of James Silk

Whole No. 3800.
Residence, not stated - St Paul (?) Minn
Date Admission, 31st July 1891
Admitted by, D. Phelps. Hour, 7 PM
How Sent, John B. Olivier, Jof C, Ramsey County
Sex, Male
Age, 35 +
Civil Condition, single
Children,
Age Youngest Child, —
Occupation, none
Degree Education, not stated
Profession Religion, In a church member
Habits, a periodical Drunkard
Nativity, U.S.
Physicians Committing, O. Marth (W) A Macdonald and W. D Kelly
Correspondents, none given in papers

No. for Year, 370.
Insane Relatives, None
Cause Exciting, use of poor liquor, when young
Cause Predisposing, "Chronic"
Form,
Accompanying Bodily Disorder, none
Suicidal or Not, not
Date of this Attack, when a boy
Duration, several years
No. of Attack, not 1st
No. of Admissions, 1st
Age First Attack, probably 18 years
Time of Leaving, June 6. 1900
Time in Hospital,
Result, Transferred to Hastings ft Pm 6/

EXAMINATION ON ADMISSION.

Exd by D. Ely, Augsgr -

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm, yes
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, not
Special Subjects,
Transitory or Not, Transitory
HALLUCINATIONS: none
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, voluble -

copy of notice of hearing petition for appointment of Michael B. Silk as guardian for James Silk issued upon Dr A.F. Kilbourne - [illegible] commitment

James Silk

ISSION.—(Continued.)
ICS.
NUTRITION, Fair
age
Promptness Movement, prompt
normal
on, Yes

ore, eye shut, no incoordination -
ye shut, Stands steady.
Tongue, Slight
Facial Muscles, General,
REFLEXES, Patellar, Equal - about 5. -
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, Normal
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.,
CRANIAL MEASUREMENTS,

Records Kept

HISTORICAL.

LENGTH OF INVASION, ONSET GRADUAL OR SUDDEN,
HEREDITY (Specify—"Insanity," "Hysteria," "Epilepsy," "Paralysis," or "Inebriety,") Family, on mothers side, nervous. none insane -
Mother or ~~Mat. Relations,~~ dead -
Father or ~~Pat. Relations,~~ dead; Consumption -
Brothers ~~or Sisters,~~ 4 living

Personal and Medical History of James Silk

Whole No. 3800.
Residence, not stated - St Paul (?) Minn
Date Admission, 31st July 1894
Admitted by, D. Phelps. Hour, 7 PM
How Sent, John B. Olivier, Jof C, Ramsey County
Sex, Male
Age, 35 +
Civil Condition, single
Children,
Age Youngest Child, —
Occupation, none
Degree Education, not stated
Profession Religion, Is a church member.
Habits, a periodical Drunkard
Nativity, U.S.
Physicians Committing, O. Martell (W) A Macdonald and W. D. Kelly
Correspondents, none given in papers

No. for Year, 370.
Insane Relatives, none
Cause Exciting, use of poor liquor, when young
Cause Predisposing, "Chronic"
For
Acc
Suic
Dat
Dur
No.
No.
Age
Time of Leaving, June
Time in Hospital,
Result, Transferred to Hastings 9th Jan

Mr Michael Silk
344 Lawson St.
St Paul
Minn

EXAMINATION ON ADMISSION.

Exd by D. Ely, Aug 1st -

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
Normal, Calm, yes
Indifferent,
Exalted,
Depressed,
DELUSIONS:
Systematized or Not, not
Special Subjects,
Transitory or Not, Transitory
HALLUCINATIONS: none
ILLUSIONS: none
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, voluble -

Personal and Medical History of James Silk

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6½ WEIGHT, 130 lbs NUTRITION, Fair
WOUNDS OR ABNORMALITIES, see "S.R", on next page
TONGUE, Tremors, slight Coatings, none Promptness Movement, prompt
PUPILS, Equality, Equal Size, normal
Response Light, yes Accommodation, yes
SIGHT, Good —
HEARING, — Good —
COORDINATION, Arms, Finger to nose, eyes shut, no incoordination —
Legs, Standing, eyes shut, Stand steady
TREMORS, Hands, slight Tongue, slight
Facial Muscles, General,
REFLEXES, Patellar, Equal — about 5 —
Other Reflexes,
ARTICULATION, Hesitating, Good Slurred,
FACIAL EXPRESSION, normal
SENSIBILITY, normal
HEART, Sounds good —
LUNGS, Sounds good —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Neat, 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,") Family on mothers side, nervous.
Mother or ~~Mat. Relations,~~ dead - none insane -
Father or ~~Pat. Relations,~~ dead; Consumption -
Brothers ~~or Sisters,~~ 4 living

Personal and Medical History of James Silk

BERRY, FIGLAR & CRAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy-Sheriff Kinney with the following history. Patient is a periodical drunkard: There is no history of heredity. Supposed cause of this attack is the use of liquor, when young. Form of attack is paroxysmal: no accompanying bodily disorder; first symptoms of disease manifested when a boy; in later years, he has had religious inclinations and political persistent ideas. He has had such attacks many times; do not know the exact time or duration of them. Insanity is now manifested on politics and religion. He is disposed to impose others from sudden passion, but is not suicidal, nor filthy nor destructive. There is no history of any bodily disease &c nor of any injury to head. He has not been restrained or confined, nor under medical treatment.

July 31 **On admission**, was put on B[2] (S.D. Complexion light; hair brown; eyes blue; condition of skin good; no marks, scars or bruises noticed; bodily condition clean; has varicose veins on right leg; behavior good).

Aug 1 Aug 1/94. Appeared to rest & sleep fairly well, last night. A.M. Pulse 76. R. 19. T. 99. Appetite good; bowels regular. Is quiet & well-behaved. Manifests delusions; "writes letters to Editors in St Paul" -

" 2 Complains of soreness in lungs & throat. Aug 2/94. Restless for an hour or so, but slept 8 hours, last night. A.M. Pulse 78. R. 19. T. 99. Quietly behaved. Still complains of soreness in lungs.

" 3 Aug 3/94. Slept 7 hours, last night. A.M. Pulse 92. R. 19-20. T. 99. Bowels regular. Work a little on ward.

" 4 Aug 4/94. Restless 3 hours or so, but sleeping 6 hours, last night. A.M. Pulse 79. Complains of soreness in lungs & throat. Is on medicine. Patient has been noticed as having delusions steadily since coming.

" 5 Aug 5/94. Somewhat restless, last night, but slept 7 hours or so. A.M. Pulse 80. No special change to note.

" 6 Walks out daily. Is on medicine. Aug 6/94. Slept 6 hours, restless for 3 hours, last night. Am. P. 78. Appetite continues good; bowels regular. Is well-behaved. Talks about politics. Still shows delusions.

" 7 Aug 7/94. Restless 6 hours, sleeping but 3 hours, last night. A.M. Pulse 79. Works on ward. Is on medicine.

" 8 Aug 8/94. Only slept 5 hours, was restless 4 hours, last night. A.M. Pulse 78. Refused today, to take medicine;

" 9 says "he will never leave here if he takes medicine" - Aug 9/94. Transferred to B[1], today. -

" 10 Pulse 81. Is full of delusive ideas & quite talkative - Takes his medicine now. Aug 10/94. Sleeps quite well. A.M. Pulse 88. Complains, at times, of a slight pain in chest. Behaves well and now takes his medicine regularly.

" 11 Aug 11/94. A.M. Pulse &c. In all respects, is about as usual.

" 12/13 Aug 12/94. A.M. Pulse 84. Aug 13/94. Am. Pulse 96. There is noticed a slight cough, occasionally.

" 14 Aug 14/94. A.M. Pulse 103. Seems quite nervous, at times. Is constantly craving for tobacco.

Summary. Patient, for the last few weeks, has, apparently, been sleeping quite well. Appetite has been good; bowels regular. - Behavior has been very good: he has been obedient; causing no trouble; has helped with the work, very industriously; talks considerable. Is rational, at times, yet he still shows delusions, (these seem to be quite permanent). He is, at times also, quite nervous. Complains of pain in chest, occasionally. Takes medicine regularly. Seems to be in fair health.

" 26 Aug 26/94. Uniformly quiet & well-behaved. Easily agitated. Talks a great deal. Has much to say about his being sent here. Says "it was only a scheme on the part of the People of St Paul, so he would not get the position he was looking for". He keeps about the same, all the time.

" 27 Complains that he cannot sleep well on account of so much noise. Aug 27/94. Moved to A[1], today.

" 31 Aug 31/94. Quiet, well-conducted; inclined to be somewhat boastful of his abilities. Still thinks he was put in here by a "scheme" as above mentioned. Personal habits good. Is fairly neat & tidy.

Personal and Medical History of James Silk

Hospital Oct 2 1895

To - Supt. Arthur Dillingham
Asst. Supt. Dr Phelps
Dear Sirs

I shall discharge Thomas Patchett and hope to have case forwarded to Rochester. Record of evidence books and papers & every substantiance to me which I should have in my own possession since I reached hospital and it is not mere supposition that to encourage the saying, I have time and again requested that I be forwarded new suit of clothes from St Paul insisting that I be allowed working facilities and same I do now. Will you please Correct those who might be mistaken and supply these few points And I shall make it a special

of 18 pounds, since admission). Sep 7/94. Visited by Supt the same. Still persists in thinking he was placed no special change. Is rather nervous & easily agitated. attends patients' Dances, participating in same. Says put him here, so as to get hold of his property." Is much improved. Oct 2/94. Wt 152 pds (another keeps about the same, from month to month. asking for privileges, which he cannot be allowed. ord. Takes great enjoyment at patients Dances &c 146½ pds. Pulse 96. Jan 3/95. Wt 149 pds. Pulse 100. t; claims he does not rest & sleep well - Appetite good; about the hall. Talks a great deal; worries and lly - Never seems contented; continually asking this time writing. Behavior mild & excitable; is gets into quarrels with the other patients - Works occa- caused so, that he was sent in D[2] ward, to sleep). officially noticeable. Quarrels quite often with he no reason to keep him here" he says. Says answers to get away March 2/95. Wt 149 pds. P 96. March 6/95. Transferred complaints. Works some. Transferred back to A[1]. for. Feet daily exited & given to making Complaints Apl 1/95. Wt 150 pds. Pulse 94. Apl 30/95. Always ticed. Always finding fault & complaining. Discontents. ical change; no improvement noted. Talks freely but is very unreasonable. Still claims that he is not insane & should not be treated as an insane patient.

June 1 So easily excited & very quarrelsome & hard to get along with. June 1/95. Wt 154½ pds. P 88.
" 30 June 30/95. About the same from month to month. Still anxious to get away. Fault finding &c.
July 1/95 July 1/95. Wt 156½ pds. Pulse 100. July 8/95: More anxious than ever to get away. Still grumbling &c
" 10 July 10/95: When out at the grounds today, asked permission to go & get a drink of water - This was given when he eloped. Search was made but without avail. Patient was subsequently
" 11 located at Spring valley. July 11/95: An attendant was sent for patient, and he was
" 13 returned this Evening & put on B[2]. He is rather lame & sore from walking. July 13/95: Crying,
" 31 because he cannot go on A[1] - "thinks he is being unjustly persecuted". July 31/95: He behaves well & is quiet. Still has his peculiar ways & suave manner. Holds to the idea "that there never was any reason for sending him here" and still believes there is no reason whatever for keeping him here & thinks himself very unjustly dealt with. Physical condition good, but mental condition about the same for months past.
Aug 1/95 Aug 2/95. Wt 160 pds. Pulse 96. Aug 31/95. Is very talkative. Continually arguing what he thinks, some
Sep 1/95 unfortunate subject or making some complaint to nurses. Sept 2/95. Wt 160 pds. P 84. Sept 30/95: Cranky; continually making complaints: still thinks himself unjustly held here: very troublesome, at times. Visits much

carried to A[1] 222

Personal and M

Personal and Medical History of James Silk

[illegible] This patient was brought [illegible] a periodical drunkard: [illegible] four legion, when young [illegible] first symptoms of disease [illegible] and political persistent ideas [illegible] or duration of them. Insan[illegible] injure others from sudden [illegible] history of any bodily disease [illegible] nor under medical treatment [illegible] ...nuations [illegible] ...ow the exact time [illegible] ...and religion. He is desirous to [illegible] ...ar, nor filthy nor destructive. There is no [illegible] ...injury to head. He has not been restrained or confined,

July 31 **On admission**, was put on B2 (Ld. Complexion light; hair brown; eyes blue; Condition of skin good; no marks, scars or bruises noticed; bodily Condition clean; has various veins on right leg; behavior good)

Aug 1 Aug 1/94. Appeared to rest & sleep fairly well, last night. HM. Pulse 76. R 19. Tr 99. Appetite Good; bowels regular. Is quiet & well-behaved. Manifests delusions; "writes letter to Editors in St Paul."-

" 2 Complains of soreness in lungs & throat. Aug 2/94. Restless for an hour or so, but slept 8 hours, last night. HM. Pulse 78. R 19. Tr 99. Quietly behaved. Still Complains of Soreness in lungs.

" 3 Aug 3/94. Slept 7 hours, last night. HM. Pulse 92. R 19-20 Tr 99. Bowels regular. Work a little in ward.

" 4 Aug 4/94. Restless 3 hours or so, but sleeping 6 hours, last night. HM. Pulse 79. Complains of soreness in lungs & throat. Is on medicine. Patient has been noticed as having delusions steadily, since coming.

" 5 Aug 5/94. Somewhat restless, last night, but slept 7 hours or so. HM. Pulse 80. No Special Change to note.

" 6 Works out daily. Is on medicine. Aug 6/94. Slept 6 hours, restless for 3 hours, last night. Am P 78. Appetite Continues good; bowels regular. Is well-behaved. Talks about politics. Still shows delusions.

" 7 Aug 7/94. Restless 6 hours, sleeping but 3 hours, last night. HM. Pulse 79. Works in ward. Is on medicine.

" 8 Aug 8/94. Only slept 5 hours, was restless 4 hours, last night. HM. Pulse 78. Refused, today, to take medicine; says "he will never leave here if he takes medicine" - Aug 9/94. Transferred to B1, today.-

" 9 Pulse 81. Is full of delusive ideas & quite talkative - Takes his medicine now. Aug 10/94. Sleeps quite well. HM. Pulse 88. Complains, at times, of a slight pain in chest. Behaves well and

" 11 now takes his medicine regularly. Aug 11/94. AM. Pulse 84. In all respects, is about as usual.

" 12/13 Aug 12/94. HM. Pulse 84. Aug 13/94. Am. Pulse 95. There is noticed a slight cough, occasionally.

" 14 Aug 14/94. HM. Pulse 103. Seems quite nervous, at times. Is constantly craving for tobacco.

Summary. Patient, for the last few nights, has, apparently, been sleeping quite well. Appetite has been Good; bowels regular. Behavior has been very good: he has been obedient; causing no trouble; has helped with the work, very industriously; talks considerable. Is rational, at times, yet he still shows delusions, (these seem to be quite permanent). He is, at times also, quite nervous. Complains of pain in chest, occasionally. Takes medicine regularly. Seems to be in fair health.

" 26 Aug 26/94. Uniformly quiet & well-behaved. Easily agitated. Talks a great deal. Has much to say about his being Sent here. Says "it was only a Scheme on the part of the People of St Paul, so he would not get the position he was looking for" - He keeps about the Same, all the time.

" 27 Complains that he cannot sleep well on account of Some much noise. Aug 27/94. Moved to A1. today.

" 31 Aug 31/94. Quiet, well-conducted; inclined to be somewhat boastful of his abilities. Still thinks he was put in here by a "Scheme" as above mentioned. Personal habits good. Is fairly neat & tidy.

[illegible] ...ing ape to augment [illegible] ...questions of they have [illegible] neither intelligence nor understanding therefore we have no disposition and time toward useless folly and untimely Argument hoping you will Continue to encourage your Attendant in the way of Impartial justice and preserve Harmony.

Yours truly and respectfully

D. S. B. - Dr.

...of 18 pounds, since admission). Sept 7/94. Treated by ...ut the same. Still persists in thinking he was placed ...o special charge. Is rather nervous & easily agitated - ...attends patients' Dances, participating in same - Says ...put him here, to get hold of his "property." Is ...much improved. Oct 2/94. Wt 152 pds (another ...keeps about the same, from month to month - ...asking for privilege, which he cannot be allowed ...ved. Takes great enjoyment at patients' Dances &c ...46½ pds. Pulse 96. Jan 3/95. Wt 147 pds. Pulse 100. ...t; claims he does not rest a sleep well - Appetite good; ...about the hall. Talks a great deal; worries and ...ally - Never seems contented; continually asking ...his time writing - Behavior wild & excitable; is ...to quarrels with the other patients - Looks occa ...ained so that he was sent in B3 (bad, to sleep) ...specially noticeable. Quarrels quite often with the ...no reason to keep him here" he says. Says he gets away ...March 2/95. Wt 147 pds. P 96. March 6/95. Transferred ...complaints. Looks some. Transferred back to A1. ...fore. Is at times excited & given to making Complaints ...April 1/95. Wt 150 pds. Pulse 94. April 30/95: Always ...iced. Always finding fault & complaining. Discontented. ...special change: no improvement noted. Talks freely but ...very unreasonable. Still "claims that he is not insane & should not be treated as an insane patient."

June 1 Is easily excited & very quarrelsome & hard to get along with. June 1/95. Wt 154½ pds. P 88.

" 30 June 30/95. About the same from month to month. Tried various to get away. Fault finding &c.

July 1/95 July 1/95. Wt 155½ pds. Pulse 100. July 7/95: More anxious than ever to get away. Still grumbling &c

" 10 July 10/95. When out at the grounds today, asked permission to go & get a drink of water - This was given when he Eloped. Search was made but without avail. Patient was subsequently

" 11 located at Spring valley. July 11/95. An attendant was sent for patient, and he was

" 13 returned this Evening & put on B2. He is rather lame & sore from walking. July 13/95. Cryptic, because he cannot go on A1 - "thinks he is being unjustly persecuted". July 31/95. Behaves well & is quiet. Still has his peculiar ways & suave manner. Holds to the idea that there never was any reason for sending him here" and still believes there is no reason whatever for keeping him here & thinks himself very unjustly dealt with. Physical Condition good, but mental Condition about the same, for Months past.

Aug 1/95 to Sept 1/96 Aug 2/95. Wt 160 pds. Pulse 96. Aug 31/95. Is very talkative. Continually arguing what he thinks, some important Subject or making some Complaint to nurses. Sept 2/95. Wt 160 pds. P 84. Sept 30/95: Cranky: Continually making complaints: Still thinks himself unjustly held here: very troublesome, at times. Writes much.

carried to "A" 222

Personal and Medical History of James Silk

ENGERT, FIDLER & CHAMBERS, DAVENPORT, IOWA.

This patient was brought here by Deputy-Sh[eriff] a periodical drunkard: There is no history of [his] how liquor, when young. Form of attack [unclear] first Symptoms of disease manifested when a[bout] and political persistent ideas. He has had suc[h] a duration of them. Insanity is now ma[nifest] injure others from sudden passion, but [no] history of any bodily disease &c nor of any [such] nor under medical treatment. — —

July 31 On admission, was put on 13[2] (S.R. Coupl[and] no marks, scars or bruises noticed; bodily Con[dition] Aug 1 Aug 1/94. Appeared to rest & sleep fairly well, last [night] bowels regular. Is quiet & well-behaved. Ma[kes] " 2 Complains of soreness in lungs & throat [this] last night. HM. Pulse 78. R 19. T 98 99. " 3 Aug 3/94. Slept 7 hours, last night. HM. " 4 Aug 4/94. Restless 3 hours a so, but sleeping [well] in lungs & throat. Is on medicine. Patient [is improving]. " 5 Aug 5/94. Somewhat restless, last night, but s[lept] " 6 Walks out daily. Is on medicine. Aug 6 Appetite continues good; bowels regular. [Has] " 7 Aug 7/94. Restless 6 hours. Sleeping but 3 " 8 Aug 8/94. Only slept 2 hours, was restless 4 " 9 Says "he will never leave here if he takes [medicine]." " 10 Pulse 81. Is full of delusive ideas & quite talkative - Takes his medicine now. Aug 10/94. Sleeps quite well. HM. Pulse 88. Complains, at times, of a slight pain in chest. Behaves well and now takes his medicine regularly. Aug 11/94. HM. Pulse &c. In all respects, is about as usual. " 12/13 Aug 12/94. HM. Pulse 84. Aug 13/94. Rem. Pulse 96. There is noticed a slight cough, occasionally. " 14 Aug 14/94. HM. Pulse 103. Seems quite nervous, at times. Is constantly craving for tobacco.

Summary. Patient, for the last fewnights, has, apparently, been sleeping quite well. Appetite has been Good; bowels regular. Behavior has been very good: he has been obedient; causing no trouble; has helped with the work, very industriously; talks considerable. Is rational, at times, yet he still shows delusions, (these seem to be quite permanent). He is, at times also, quite nervous. Complains of pain in chest, occasionally. Takes medicine regularly. Seems to be in fair health.

" 26 Aug 26/94. Uniformly quiet & well-behaved. Easily agitated. Talks a great deal. Has much to say about his being sent here. Says "it was only a scheme on the part of the People of St Paul, so he would not get the position he was looking for". He keeps about the house, all the time. " 27 Complains that he cannot sleep well on account of [illegible]. Aug 27/94. Moved to A[1] Ward. " 31 Aug 31/94. Quiet, well-conducted; inclined to be somewhat boastful of his abilities. Still thinks he was put in here by a "Scheme" as above mentioned. Personal habits good. Is fairly neat & tidy.

June 18 '95

Supt Rakeman
And Drs. Rochester State Hospital
For the Insane

Please I desire you would
investigate by letters the
Question and Importance of the
use and Abuse of Temperance
which has not been properly
estimated nor Adjusted (where
most needs be practiced)
be Ignorance & factor of dire
negligence and Carelessness on the part
of those who are invested with the
responsibility to exercise themselves
diligently, faithfully and
honorably with credit
to the yeomanry and Ground
- State of Minnesota
thereby putting a stop to punishment
where it is undeserved -
Patients and Otherwise

Personal and Medical History of James Silk

Rochester Augt. 21/1894

Mr R. J. O'Connor
Clerk municipal Court
St Paul Minn.

Hon. Sir
would you please confer
with Hon's Mayor Smith,
Judge Twohy and President Brady.
to whom I have written within
two weeks that I am thirty days
at the hospital and would like
to return to business.
There is a grave mistake about
sending me to the Insane Hospital
in the first place because
I am Cancled And I know
I am no more Insane than
the Sanest person in this State
of Minnesota. While there is
Either derangement nor
disarrangement of Faculty

of 18 pounds, since admission). Sept 7/94. Visited by [illegible] but the same. Still persists in thinking he was placed [illegible] special charge - Is rather nervous & easily agitated - attends patients' Dances, participating in same - Says he put him here, has to get hold of his property." Is much improved. Oct 2/94. Wt 154 pds (another [illegible]. Keeps about the same from month to month - asking for privileges, which he cannot be allowed - ward. Takes great enjoyment at the patients' Dances &c [illegible] 146½ pds. Pulse 96 - Jan 3/95. Wt 147 pds. Pulse 100. [illegible]; claims he does not rest asleep well - Appetite good; about the hall. Talks a great deal; worries and [illegible]ly - Never seems contented; Continually asking [illegible] this time writing. Behavior wild & excitable: is [illegible] into quarrels with the other patients - Works occa- [illegible]ired so that he was sent in D[2] Ward, to sleep; officially noticeable. Quarrels quite often with the no reason to keep him here" he says. Buy answers to get away March 1/95. Wt 147 pds. P 96. March 6/95. Transferred [illegible] complaints. Works some. Transferred back to A[1]. [illegible]ow. Is not easily excited & given to making Complaints. April 1/95. Wt 150 pds. Pulse 94. April 30/95. Always [illegible]cited. Always finding fault & complaining. Discontents. May 31/95. No special change: no improvement noted. Talks freely but is very unreasonable. Still claims that he is not insane & should not be treated as an insane patient. June 1 Is easily excited & very quarrelsome & hard to get along with. June 1/95. Wt 152½ pds. P 88. " 30 June 30/95. About the same from month to month. Still answers to get away. Fault finding &c. July 1/95 July 1/95. Wt 150½ pds. Pulse 100. July 8/95: More answers than ever to get away. Still grumbling &c " 10 July 10/95. When out at the grounds today, asked permission to go & get a drink of water - This was given when he Eloped. Search was made but without avail. Patient was subsequently located at Spring valley. July 11/95. An attendant was sent for patient, and he was " 11 returned this Evening & put on D[2]. He is rather lame & sore from walking. July 13/95. Crying, " 13 because he cannot go on A[1] - "thinks he is being unjustly persecuted". July 31/95. Behaves " 31 well & is quiet. Still has his peculiar ways & suave manner. Holds to the idea that there was any reason for sending him here" and still believes there is no reason whatever for keeping him here & thinks himself very unjustly dealt with. Physical condition good, but mental condition about the same for months past. Aug 1/95 Aug 2/95. Wt 160 pds. Pulse 96. Aug 31/95. Is very talkative: Continually arguing what he thinks, but Sept 1/95 is important subject or making some complaint to nurses. Sept 2/95. Wt 160 pds. P 84. Sept 30/95: Cranky: continually making complaints: Still thinks himself unjustly held here: very troublesome, at times. Writes much.

carried to "A" 222

EBERT, PUCKAN & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Deputy-Sh
a periodical drunkard: There is no history of
how he got, when young. Form of attack,
first Symptoms of disease manifested when a
and political persistent ideas. He has had suc
a duration of them. Insanity is now ma
in five others from sudden passion, but
history of any bodily disease &c nor of any
nor under medical treatment. —

July 31 On admission, was put on B² (L.B. Sick
no marks, scars or bruises noticed; bodily Cond
Aug 1 Aug 1/94. Appeared to rest & sleep fairly well, last
bowels regular. Be quiet & well-behaved. Ma
" 2 Complains of soreness in lungs & throat.
last night. AM. Pulse 78. R 19. T. 99.
" 3 Aug 3/94. Slept 7 hours, last night. AM.
" 4 Aug 4/94. Restless 3 hours or so, but sleeping
in lungs & throat. Is now medicine. Patient
" 5 Aug 5/94. Somewhat restless, last night, but sle
" 6 Walks out daily. Is now medicine. Aug 6/
Appetite continues good; bowels regular. Is
" 7 Aug 7/94. Restless 6 hours. Sleeping but 3 h
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" 9 says he will never leave here if he takes
" 10 Pulse 81. Is full of delusive ideas & quite talkative
quite well. AM. Pulse 88. Complains, at times, of a slight pain in chest. Behaves well and
" 11 now takes his medicine regularly. Aug 11/94. AM. Pulse &c. In all respects, is about as usual.
" 12/13 Aug 12/94. AM. Pulse 84. Aug 13/94. Am. Pulse 96. There is noticed a slight cough, occasionally.
" 14 Aug 14/94. AM. Pulse 103. Seems quite nervous, at times. Is constantly craving for tobacco.
Summary. Patient, for the last few nights, has, apparently, been sleeping quite well. Appetite has been Good; bowels regular. Behavior has been very good; he has been obedient; causing no trouble; has helped with the work, very industriously; talks considerable. Is rational, at times, yet he still shows delusions, (these seem to be quite permanent). He is, at times also, quite nervous. Complains of pain in chest, occasionally. Takes medicine regularly. Seems to be in fair health.
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" 27 Complains that he cannot sleep well on account of too much noise. Aug 27/94. Moved to A¹ Ward.
" 31 Aug 31/94. Quiet, well-conducted; inclined to be somewhat boastful of his abilities. Still thinks he was put in here by a "scheme" as above mentioned. Personal habits good. Is fairly neat & tidy.

of Dyestem either Mentally or
Physically except for the
been Done from tearing
tight Shoes and Continual
Learning; I hope you
will see to it that I return
Home not long hence forward;
why Should I be Condemned
Punishment without
even Committing the
Slightest Misdemeanor but
upon a Mistake.
Please write me a note
let me Know what
proceeding you will
advance by Granting Freedom
Freedom of life, Liberty
And Conveyance to the
American Citizen not
only in St Paul but
throughout the length
and breath of these free
United States.

Hoping I will receive
Note from you Soon
As you can Possibly make
it Convenient
I remain Yours Truly
L. B. Sick

of 18 pounds, since admission). Sept 7/94. Treated by
out the same. Still persists in thinking he was placed
to special Change. Is rather nervous & easily agitated.
attends patients' Dances, participating in same. Still
put him Here, so as to get hold of his property." He
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g about the hall. Talks a great deal; worries and
lly. Never seems contented; continually asking
f his time writing. Behavior wild & excitable; is
get into quarrels with the other patients. Looks occa-
ained so that he was sent in B³ Ward, to sleep;
Specially noticeable. Quarrels quite often with be
" no reason to keep him here" he says. Says he wants to get away
March 2/95. Wt 147 pds. P 96. March 6/95. Transferred
complaints. Looks same. Transferred back to A¹.
before. Not easily excited & given to making complaints.
April 1/95. Wt 152 pds. Pulse 94. April 30/95. Always
ticed. Always finding fault & complaining. Dissatisfied.
94. no special change; no improvement noted. Talks freely but
is very unreasonable. Still claims that he is not insane & should not be treated as an insane patient.
June 1 Is easily excited & very quarrelsome & hard to get along with. June 1/95. Wt 154½ pds. P 88.
" 30 June 30/95. About the same from Month to month. Still anxious to get away. Fault finding &c.
July 1/95 July 1/95. Wt 150 3 pds. Pulse 100. July 7/95. More anxious than ever to get away. Still grumbling &c
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" 11 located at Spring Valley. July 11/95. An attendant was sent for patient, and he was
" 13 returned this Evening & put on B². He is rather lame & sore from walking. July 13/95. Crying,
" 31 because he cannot go to A¹. "Thinks he is being unjustly persecuted". July 31/95. Behaves well & is quiet. Still has his peculiar ways & suave manner. Holds to the idea "that there never was any reason for sending him here" and still believes there is no reason whatever for keeping him here. & thinks himself very unjustly dealt with. Physical condition good, but mental condition about the same for Months past.
Aug 2/95 Aug 2/95. Wt 160 pds. Pulse 96. Aug 31/95. Is very talkative. Continually arguing what he thinks, some
Sept 1/30 unimportant subject or making some Complaint to nurses. Sept 2/95. Wt 160 pds. P 84. Sept 30/95. Cranky;
continually making complaints: still thinks himself unjustly held here. Very troublesome, at times. Visits much.

carried to A 222

1894

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nor under medical tre

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no marks, scars or bruises note

Aug 1 Aug 1/94. Appeared to rest & sleep fai
bowels regular. Is quiet & well-beh

" 2 Complains of soreness in lungs & m
last night. AM. Pulse 78. R 19. Tem 9

" 3 Aug 3/94. Slept 7 hours, last night. AM.

" 4 Aug 4/94 Restless 3 hours a so, but sleeping
in lungs & throat. Is on medicine. Patie

" 5 Aug 5/94. Somewhat restless, last night, but s

" 6 Walks out daily. Is on medicine. Aug 6
Appetite continues good; bowels regular.

" 7 Aug 7/94. Restless 6 hours. Sleeping but 3

" 8 Aug 8/94. Only slept 2 hours, was restless 4

" 9 says "he will never leave here if he take

" 10 Pulse 81. Is full of delusive ideas & quite talkative - Takes his medicine now. Aug 10/94. Sleeps quite well. AM. Pulse 88. Complains, at times, of a slight pain in chest. Behaves well and now takes his medicine regularly. Aug 11/94. AM. Pulse 84. In all respects, is about as usual.

" 12/13 Aug 12/94. AM. Pulse 87. Aug 13/94. Am. Pulse 96. There is noticed a slight cough, occasionally.

" 14 Aug 14/94. AM. Pulse 103. Seems quite nervous, at times. Is constantly craving for tobacco.

Summary. Patient, for the last few nights, has, apparently, been sleeping quite well. Appetite has been good; bowels regular. Behavior has been very good: he has been obedient; causing no trouble; has helped with the work, very industriously; talks considerable. Is rational, at times, yet he still shows delusions, (these seem to be quite permanent). He is, at times also, quite nervous. Complains of pain in chest, occasionally. Takes medicine regularly. Seems to be in fair health.

" 26 Aug 26/94. Uniformly quiet & well-behaved. Easily agitated. Talks a great deal. Has much to say about his being sent here. Says "it was only a scheme on the part of the People of St Paul, so he would not get the position he was looking for". He keeps about the same, all the time.

" 27 Complains that he cannot sleep well on account of too much noise. Aug 27/94. Moved to A1 Ward.

" 31 Aug 31/94. Quiet, well-conducted; inclined to be somewhat boastful of his abilities. Still thinks he was put in here by a "scheme" as above mentioned. Personal habits good. Is fairly neat & tidy.

Address
Mr R. W. Banning
St Paul
Minn.

to O. Common House

[illegible] pture,
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[illegible] to exercise themselves
[illegible] faithfully and
[illegible] honorably with credit
[illegible] to the yourself and Board
[illegible] State of Minnesota
[illegible] thereby putting a stop to punishment
[illegible] where it is undeserved -
[illegible] Patients and others are

1894

Sept 12 Sept 4/94 Wt 148 lbs (An increase in weight of 18 pounds, since admission). Sept 7/94 Irritable & broken, today. Sept 12/94. Patient continues about the same. Still persists in thinking he was placed here by means of some "scheme". Sept 30/94. No special change. Is rather nervous & easily agitated. Reads & writes, most of the time; plays games & attends patients' Dances, participating in same. Still shows delusions. Says "that some of his people put him here, so as to get hold of his property." Is fairly tidy in appearance. Physical health has much improved. Oct 2/94. Wt 152 pds (another small gain in flesh). Pulse 90. Oct 31/94. Keeps about the same from month to month. Still holds to his delusions. Is continually asking for privileges, which he cannot be allowed. Appetite good; bowels regular. Physical health good. Takes great enjoyment at patients' Dances &c

Nov 1 Dec 3 Jan 31/95 Nov 1/94 Wt 156 pds. Pulse 104. Dec 3/94. Wt 146½ pds. Pulse 96. Jan 3/95. Wt 147 pds. Pulse 100. Jany 31/95. Is occasionally, very restless at night; claims he does not rest & sleep well. Appetite good; bowels regular. Uneasy, most of the time, walking about the hall. Talks a great deal; worries and Complains that people are keeping him here wrongfully. Never seems contented; continually asking for some favor or privilege. Spends a good deal of his time writing. Behavior mild & excitable: is easily agitated & cannot then, control himself; gets into quarrels with the other patients. Works occasionally on the ward. (For a couple of nights complained so, that he was sent in B3 Ward, to sleep).

Feby 28 Feby 9/95. Wt 150 pds. Pulse 84. Feby 28/95. No change officially noticeable. Quarrels quite often with the other patients. Discontented at being kept here; "no reason to keep him here" he says. Behavior is to get away. Thinks himself far better than other people. March 2/95. Wt 147 pds. P 96. March 16/95. Transferred to B3. March 18/95: Has been quiet; made no complaints. Works some. Transferred back to A1.

March 16 " 18 " 31 March 31/95. Behavior now more quiet, than before. Get easily excited & given to making Complaints.

April 1/30 Does some work. Still teasing to go home. April 1/95. Wt 150 pds. Pulse 94. April 30/95. Always about the same. No special improvement noticed. Always finding fault & complaining. Discontented.

May 1/31 May 1/95. Wt 150 pds. Pulse 92. May 31/95. No special change; no improvement noted. Talks freely but is very unreasonable. Still claims that he is not insane & should not be treated as an insane patient. Is easily excited & very quarrelsome & hard to get along with.

June 1 " 30 June 1/95. Wt 152½ pds. P 88. June 30/95. About the same from month to month. Still anxious to get away. Fault finding &c.

July 1/31 " 10 July 1/95. Wt 150½ pds. Pulse 100. July 8/95: More anxious than ever to get away. Still grumbling &c July 10/95: When out at the grounds today, asked permission to go & get a drink of water - This was given when he eloped. Search was made but without avail. Patient was subsequently located at Spring Valley. July 11/95: An attendant was sent for patient, and he was returned this Evening & put on B3. He is rather lame & sore from walking. July 13/95: Crying, because he cannot go on A1 - "thinks he is being unjustly persecuted". July 31/95. Behaves well & is quiet. Still has his peculiar ways & suave manner. Holds to the idea "that there never was any reason for sending him here" and still believes there is no reason whatever for keeping him here. & thinks himself very unjustly dealt with. Physical condition good, but mental condition about the same, for months past.

Aug 1/31 Sept 1/30 Aug 2/95. Wt 160 pds. Pulse 96. Aug 31/95. Is very talkative: Continually arguing what he thinks, some unimportant subject or making some complaint to nurses. Sept 2/95. Wt 160 pds. P 84. Sept 30/95: Cranky: continually making complaints: still thinks himself unjustly held here: very troublesome, at times. Visits much.

carried to A1 222

Personal and Medical History of Cornelius Peterson

HUBERT, FICLAN & CHAMBERS, DAVENPORT, IOWA.

Whole No. 3801.
Residence, St Paul, Minnesota
Date Admission, 31st July 1894.
Admitted by, Dr Phelps Hour, 7 PM
How Sent, John B. Olivia, Jof P, Ramsey County
Sex, Male
Age, 51 Years
Civil Condition, Divorced.
Children, Yes; four
Age Youngest Child,
Occupation, Carpenter
Degree Education, probably fair
Profession Religion, Yes; Lutheran
Habits, Fairly good.
Nativity, Sweden.
Physicians Committing, James A. Quinn & Archer Sweeny
Correspondents, Albert Peterson
(brother's address) #136 - Eq St.

No. for Year, 371.
Insane Relatives, none.
Cause Exciting, Business worry
Cause Predisposing, not stated
Form,
Accompanying Bodily Disorder, has lost weight (Rheumatism)
Suicidal or Not, not
Date of this Attack, one week since
Duration, one week
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 51 years.
Time of Leaving, 11th August 1894
Time in Hospital, 11 Days —
Result, Died; acute peri-encephalitis

EXAMINATION ON ADMISSION.

Exd by D. Ely & following note made Aug 11/94

MENTAL CHARACTERISTICS.

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

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

GENERAL DESCRIPTIVE REMARKS:

Note. Patient came in with acute delirium, and after admission was not in a condition to undergo an Examination —

Personal and Medical History of Cornelius Peterson

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft. WEIGHT, 163 pds NUTRITION,
WOUNDS OR ABNORMALITIES,
TONGUE, Tremors, Coatings, Promptness Movement,
PUPILS, Equality, Size,
Response Light, Accommodation,
SIGHT,
HEARING,
COORDINATION, Arms,
Legs,
TREMORS, Hands, Tongue,
Facial Muscles, General,
REFLEXES, Patellar,
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART,
LUNGS,
EXAM. URINE.

Improved in this examination

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 Peterson

1894

This patient was brought here by Deputy-Sheriff Kinney and accompanied by Locke and Cox, with the following history. Habits are fairly good: there is no hereditary history. Cause of this attack is business worry; form of attack acute, exalted: there is probably some bodily disorder, as he has lost weight. First symptoms of disease were manifested one week since, by confused and by incoherent thought in business affairs. This is 1st attack. Insanity is now manifested in regard to business: is confused & incoherent; unable to concentrate thought on one topic: general restlessness. Patient is not disposed to injure others, nor suicidal, nor filthy nor destructive: He has not been restrained or confined, but has been under medical treatment for rheumatism. —

July 31 1894 On admission, was put on B[2] (S.R. Complexion light; hair brown; eyes brown; bodily Condition dirty; has a birth-mark on right arm. Is excited, on admission). After going onward, patient continued in quite an excited condition. Was given a hot bath & put to bed. Drank about a pint of milk, during the evening. —

Aug 1 Aug 1/94. Was very noisy & restless, during the night; out of bed; throwing bedding about the room, slept some. Ate a fair breakfast, a hearty dinner, but refused supper. Has been very wild & noisy all day. 5 Pm. Was put in restraint jacket. 6 Pm. Is quite ugly & talking continually. Aug 2/94. Last night, he was quite noisy when awake. Was given hypodermic, Hyoscine 1/100 gr. Morph 1/4. — Slept only 2 hours, during the night. Refused breakfast & supper, to day, but took a fair amount of nourishment, otherwise. Was so excited that he Could not be weighed. Has been very noisy all day; talking continually. Aug 3/94. Was quite noisy & restless, " 3 and slept only about 3 hours, last night. Ate fairly well, today. He has talked all day & been very noisy. Bowels have not moved since he has been on ward. Was given enema of soap-suds & glycerine, but no effect. " 4 Aug 4/94. At 9.15 was given a sleeping dose; was noisy all night, slept none. Slept about 1½ hours, today. He has also been fairly quiet, today. Passed about a pint of urine but bowels have not yet moved. " 5 7 Pm. Was given dose for bowels. Aug 5/94. Very noisy & restless all night; slept none. 8 Am. Is very wild & excited. Put ice-cap on him. Patient ate a light breakfast & dinner. 1.30 Pm. Was given bath, (sponge); was very wild up to time of bathing him: afterwards talked quite rationally: said "he was very weak". — He slept about 3 hours, this Pm. Eats fairly well. Ice cap was kept on him, all day. " 6 Aug 6/94. Was much quieter last night, though he slept only 3 hours or so. 8 Am. ate a very light breakfast. 8.30. Am. was given enema of soap suds & glycerine; bowels then moved fairly well. Took off the ice-cap. — 12 M. Patient took only a glass of milk. Slept about 1½ hours & was fairly quiet up to 3 Pm. Then, he became very noisy & excited. 5 Pm. Ice-cap again put on. 6 Pm. Took a glass of milk & a baked apple. — " 7 Aug 7/94. Was noisy all night; slept none. 8 Am. Was given sponge-bath. Ate a fair dinner; slept about 2 hours in afternoon. Refused supper. Was very noisy & wild during Pm; hallowing; throwing his head from " 8 side to side & having something similar to spasmodic hitchings. Aug 8/94. Was quieter during last night. At 11.30 2.30 & 5. was given eggnog. At 12. a sponge-bath. 7 Am. Again given Sponge-bath & glass of Eggnog. Refused dinner; ate a fair supper. Has been noisy, all day: given another Sponge bath, this " 9 evening. Passes urine regularly, but bowels are very costive. Aug 9/94. At 12 last night, was again given a sponge-bath. Was quite noisy the first part of the night — slept poorly the rest of the time. Refused breakfast. 4.30 Pm. Given dose of salts. At 9 Am, took about ½ a glass of milk. —

" 10 Aug 10/94. Was quiet, last night, & rested quite well. 7 Am. Patient ate no breakfast. He is very quiet. 7.30 Am. Again given enema of soap-suds & glycerine; feet are very cold. 9 Am. Patient was given a warm bath & hot sand-bags applied to feet. He drank one glass of milk.

Personal and Medical History of Cornelius Peterson

1894 Aug 10 At 2 Pm. [illegible] has been stupid all day; has taken little nourishment. Patient left Aug 1st at 5 Pm. Aug 11/94. Patient was very weak, last night only 3 hours or so. 6 Am. Is now perspiring profusely; has been kept in restraint until today, when he was taken out. Continued to sink rapidly & died at this hour. —

1894 C 2 E

DATE	HOUR	PULSE	RESP.	TEMP
Aug.	AM. PM.	AM. PM.	AM. PM.	AM. PM.
8	7 N	100 112	28 28	101.6 103.8
9	7	100 116	26 34	102 104
10	7	108 116	30 30	101.6 102.2
11	7		48	100.6

1894 Oct " " "

...Kinney and accompanied by brother and ...there is no hereditary history. Cause of this ...there is probably some bodily disorder, as he ...d one week since, by confusion and by ...k. Insanity is now manifested in ...

1894 @ 2. E													
DATE	HOUR		PULSE		RESP.		TEMP						
July	AM	PM	AM	PM	AM	PM	AM	PM					
31		7		104		26		101.6					
Aug.													
1.	7	5	92	106	20	28	99.4	101.4					
2	7		88		24		99.4						
3	7	5	80	112	26	28	100.2	101					
4	7	5	104	98	28		102.6	101.6					
5	7	5	124	100	30	26	104.2	101.2					
6	7	5	124	108	24	28	101.4	103.8					
7	7	5	104	100	28	28	103.2	103.2					

...ut to bed. Drank ...ning the night; out of b... ...ury drowsier, but refused supper. ... 5 P.M. Is quite ugly & talking entir... ...o. Was given hypodermic, Hyoscine 1/100 gr. ... ...used breakfast & supper today, but took a fair amoun... 3 Could not be weighed. Has been very noisy all day; talking c... and slept only about 3 hours, last night. Ate fairly well; ... Bowels have not moved since he has been on ward. Was gi... " 4 Aug 4/94. At 9.15 was given a sleeping dose; was noisy ... today. He has also been fairly quiet, today. Passed about a... " 5 7 P.M. Was given dose for bowels. Aug 5/94. Very noisy ... wild & excited. Put ice-cap on him. Patient ate a l... (sponge); was very wild up to time of bathing him: aft... weak". He slept about 3 hours, this P.M. Eats fairl... " 6 Aug 6/94. Was much quieter last night, though he sle... 8.30 Am. Was given enema of soapsuds & glycerine; bowels ... 12 M. Patient took only a glass of milk. Slept about 1½ ... became very noisy & excited. 5 P.M. Ice-cap again put on ... " 7 Aug 7/94. Was noisy all night; slept none. 8 Am. Was gi... 2 hours in afternoon. Refused supper. Was very noisy & ... " 8 side to side & having something similar to spasmodic twitch... 11.30 2.30 & 5. Was given eggnog. At 12 a sponge-b... Eggnog. Refused dinner; ate a fair supper. Has been noisy all day: Given another sponge bath, this ... " 9 Evening. Passes urine regularly, but bowels are very costive. Aug 9/94. At 12 last night was again given a sponge-bath. Was quite noisy the first part of the night - slept poorly the rest of the time. Refused breakfast. 4.30 P.M. Given dose of salts - at 9 Am, took about ½ a glass of milk. — " 10 Aug 10/94. Was quiet last night & rested quite well. 7 Am. Patient ate no breakfast. He is very quiet. 7.30 Am. Again given enema of soap-suds & glycerine; feet are very cold. 9 Am. Patient was given a warm bath & hot sand-bags applied to feet. He drank one glass of milk.

1894
Aug 10 At 2 P.M & 4.30 P.M, drank milk ¾ qt.; he has been stupid all day: has taken little nourishment. Patient
" 11 has been in restraint, continuously, since Augt 1st. at 5 P.M. Aug 11/94. Patient was very weak, last night & seemed to be failing rapidly: slept only 3 hours or so. 6 Am. Is now perspiring profusely; respiration labored; feet & hands cold. He has been kept in restraint until today, when he was taken out. Was visited by brother today. 7.55 Am. Continued to sink rapidly & died at this hour. —

Summary; Patient came on ward in a very excited condition; was put in seclusion. At 5 P.M, on the following day, was taken out of seclusion & put in restraint-sheet. Continued very wild & excited for the first 5 Days, then an Ice-cap was kept to his head & baths given, which seemed to have some-what of a quieting effect. He talked rationally, at intervals. After sleeping for a short while, he would wake up, with a start, & imagine someone was taking his money. Baths & Ice-cap were in Continual use - It was necessary to keep patient in restraint, up to a few hours previous to his death, as he continued so excited - (See attached record of Pulses & Temperatures)

Died —

P. K. Linck

1894 from 296
Oct 4 Oct 4/94. No change to note. Has the delusion, that he is the curse of the world and chooses
" 6 Starvation as his Penance". Oct 6/94. Has eaten no food the past 2 days, as today. Is very obstinate.
" 7 Oct 7/94. Fed by Physician, today. Is very stubborn. Lies on settee, all day, seemingly very stupid.
" 11 Oct 11/94. Has had to be fed by Physician, by tube on the 8th, 9th, 10th, as he persistently & obstinately refused food. Also seemed stupid. Still holds to the delusion "that he is a pest & God told him to starve" Today there is some change for the better; drank a good quantity of milk in the morning, ate a hearty supper; also helped to do the dining-room work & wrote a letter to his brother.
" 12 Oct 12/94. Eats, regularly, 3 times daily. Works on ward. Seems to have got over his
" 14 delusion as to "Starvation". Oct 14/94. Eats well; sleeps well; does not talk much. Behavior quiet-
" 21 Oct 21/94. Has improved quite a good deal, the past 10 days: Seems to have overcome his delu-sion as he says, now, "he has ceased to be a pest & a curse & will not have to starve" Oct 24/94. Improvement has kept up & patient was today, transferred to Ward B.
" 31 Oct 31/94. Quiet & well-behaved. Has had no "peculiar spells" since coming on this ward. Is not inclined to work. Appears bright, but not inclined to have much to say. —
Nov Nov 2/94. Wt 157½ pounds; (has regained some of his lost flesh). Pulse 78. Appetite good.
" 13 Nov 13/94 Patient has continued to make improvement - Has had no "spells" and no delusions have been noted, of late; appears to have quite recovered from these. He wrote his brother recently who wished to have him sent home on trial.
Patient was allowed to leave here, this morning.

Discharged Feb 6th '95.

Personal and Medical History of Arthur O'Keefe

EBERT, FULLER & CHAMBERS, DAVENPORT, IOWA



Whole No. 3804

Residence, Union Township, Minn

Date Admission, 7th August 1894

Admitted by, Dr. Phelps Hour, 4.30 P.M.

How Sent, Thos. Ryan, Sof A, Houston County

Sex, Male

Age, 28 (on Augt 1st 1894)

Civil Condition, single

Children, —

Age Youngest Child, —

Occupation, Farmer

Degree Education, probably fair

Profession Religion, Catholic —

Habits, Intemperate; morals poor.

Nativity, Houston County; Minn

Physicians Committing, W.W. Freeman and E.B. Johnston

Correspondents, Mary O'Keefe

Dec 28/95 address now changed to Chatfield, Fillmore; Minn

No. for Year, 3.

Insane Relatives, Cannot find any hereditty taint.

Cause Exciting, masturbation + intemperance

Cause Predisposing, probably bad habits + drink

Form, Melancholia, Chronic stuporous

Accompanying Bodily Disorder, weakness; sleeplessness.

Suicidal or Not, not

Date of this Attack, 2 or 3 years ago

Duration, 2 or 3 years.

No. of Attack, 1st

No. of Admissions, 1st

Age First Attack, about 25.

Time of Leaving,

Time in Hospital,

Result,

EXAMINATION ON ADMISSION.

= Exd by Dr Ely, Aug 8/94 =

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:

Clear or Confused, Some confused

Quick or Sluggish, Sluggish

MEMORY:

Past Events, Poor

Recent Events, Poor

Special Subjects,

PERCEPTIVITY:

Alert or Dull, Rather dull

Correct or Illusive, Correct

REASONING POWER:

Ordinary Subjects, Impaired at all

Own Mental State, times —

Special Subjects,

GENERAL DESCRIPTIVE REMARKS:

EMOTIONAL STATE:

Normal, Calm, Demented

Indifferent,

Exalted,

Depressed,

DELUSIONS:

Systematized or Not, None brought out

Special Subjects,

Transitory or Not,

HALLUCINATIONS: None

ILLUSIONS: none

CONVERSATION:

Coherent or Incoherent, Coherent

Voluble or Reticent, reticent; can get very little information from him.

Personal and Medical History of Arthur O'Keefe

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft 1 in WEIGHT, 145 lbs NUTRITION, Quite good

WOUNDS OR ABNORMALITIES, See "S.R." in next page.

TONGUE, Tremors, Coarse Coatings, White Coating Promptness Movement, Not prompt

PUPILS, Equality, Equal Size, normal

Response Light, Yes Accommodation, Yes

SIGHT, Good

HEARING, Good

COORDINATION, Arms, Finger to nose, Eyes shut, Correct

Legs, Standing, Eyes shut, Stands firmly —

TREMORS, Hands, Slight Tongue, Yes

Facial Muscles, none General, none

REFLEXES, Patellar, Equal; about 3 —

Other Reflexes,

ARTICULATION, Hesitating, Good Slurred, Foreign accent

FACIAL EXPRESSION,

SENSIBILITY, Normal

HEART, Sound — good

LUNGS, Sound — 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 Arthur O'Keefe

EBERT, FIDLAR & CHAMBERS, DAVENPORT, IOWA

1894

This patient was brought here by Deputy-Sheriff Geo. Blessed, with following history. Habits are intemperate; morals poor; no hereditary taint known of; supposed cause of this attack is masterbation and intemperance; form of attack is chronic; Accompanying bodily disorde Sleeplessness & weakness. First symptoms of disease were manifested for past 2 or 3 years, by wandering about and a tendency to assault women. This is the 1st attack. Insanity is now manifested in the subject of hunting for horses. When men are away, he has made an attack on women. Is not suicidal, & does not attempt to destroy property; has been chasing Cows; There is no history of any bodily disease or use of any injury to head. His mind, regarding business matters, is almost blank. He has not been pestered or confined, nor under medical treatment. ——— ——— ———

Aug 7 On admission, was put on B3 (I. R. Complexion dark; hair dark; eyes blue; condition of skin, good; no marks, scars or bruises noted; bodily condition dirty; has sores on back of right hand; behavior good)

" 8 Aug 8/94. Was restless 3 hours, but slept 6 hours, last night. H.M. Pulse 68. R 19. Tem 97 2/10. Appetite good; bowels regular. no cough observed. No delusions or hallucinations have been noted. No Complaints or injuries to report. — Aug 9/94. Slept 6 hours, was restless 3 hours or so, last night. H.M. Pulse R 19. Tem 98 4/10. Appetite Good; bowels regular. Behavior good. Stands around in hall. Talks but little; no delusions yet noticed.

" 10 Aug 10/94. Was slightly restless, but Slept 7 hours, last night. H.M. Pulse 102. R 19. Tem 98 2/10. Is on medicine.

" 11 Aug 11/94. Restless 3 hours, but sleeping 6 hours, last night. H.M. " 68 Tem 98. Appetite medium. Is very drowsy & stupid; sits around idly; Talks but little; shows no delusions. Takes medicine regularly. Habits cleanly.

" 12 Aug 12/94. Fairly restful, Sleeping 7 hours, last night. H.M. Pulse 69. No special change to note. Aug 13/94. Slept 8 hours last night. H.M. Pulse 70. Is about as usual. Plate has become dirty in habits. Aug 14/94. Again restful quite well except 8 hours, last night. H.M. Pulse 70. Not much of any change in patients Condition

" 21 Aug 21/94. During this the 2nd week of his stay, patient has been Sleeping well, about 8 hours each night. Pulse has been about normal. Appetite good; bowels regular. He has been, usually, well-behaved, though very obstinate at times; is also somewhat stupid: sits around on settee, while in hall, all the day. Will not talk; even when addressed, at times, refuses to answer. No delusions have been noted. Habits are dirty.

" 22 He goes out walking daily. On medicine. Physical Condition is good. Aug 29/94. Slept well, last night. Pulse. Pulse 84. Aug 31/94. Continues about as described in above note of Aug 21st inst.

Sep 1/30 Sep 1/94. Wt 162 pds. (a gain of 7 pounds in weight since admission). Pulse 80. Sep 30/94. Behavior is fairly good; is inclined to be stubborn, at times; sits around on the benches; will not talk, even when sometimes addressed. Is very untidy about his person & is hard to keep clean. ———

Oct 1/31 Oct 1/94. Wt 167½ pds (a further small gain in flesh). Pulse 84. Oct 31/94. Continues about the same, from month to month. Reticent. Slouchy in dress. Reads some. Violent; does not work any-

Nov 1/31 Nov 2/94. Wt 162 pds. Pulse 84. Nov 21/94. Had trouble with him in dining-room & had to expel out. He

Dec 1 imagined he saw something on wall & was trying to strike it. Dec/94. Wt 155 pds. Pulse 104.

1895 Jan 1/31 Jan 1/95. Wt 174 pds. (has gained some). Pulse 8. Jan 31/95. Talks to himself at times. Has delusions & hallucinations. Is slouchy in dress. Talks but very little to others. Physical condition seems good.

Feb 1 Feby 1/95. Wt 158½ pds. Pulse 76. (Has not gone markedly in flesh, without apparent cause.

" 16 not reported as having Complained of any ill feeling). Feb 15/95. Is slovenly. Does not seem to be informed

" 28 any. Sees objects on walls & ceiling". Feb 28/95. Makes no complaints. Talks none. Is demented

Mar 1/31 & slouchy & untidy in appearance. March 2/95. Wt 161 pds. Pulse 100. March 31/95. Talks to himself &

Personal and Medical History of Arthur O'Keefe

1895 Cont'd

Mar 31 Strikes at imaginary objects. Talks but little when addressed; simply answers in monosyllables. Awkward.

Apl 1/30 Goes out walking. Appetite good. Still untidy. April 1/95. Wt 163½ pds. Pulse 78. April 14/95. Is off, today. Fighting imaginary persons that "he saw on the walls". & when requested to sit down, began on more realistic ones. Attendants had quite a tussle with him before they could get him quieted down.

" 30 Apl 30/95. No change. Talks to self. Deluded. Works none. Is clean, but untidy in appearance.

May 1/31 May 2/95. Wt 160 pds. Pulse 70. May 31/95. Unchanged untidy; talks to "imaginary devils &c".—

June 1/30 June/95. Wt 158 " " 80. June 20/95. Visited by friend. June 21/95. Slovenly & untidy: no

" 30 change noted, mentally. Transferred to B3. June 30/95. No change noticeable, in any way.

July 1/31 July/95. Wt 174 pds. Pulse 108. (Has gained considerably in flesh). July 17/95. Moved to Annex.

" 31 July 31/95. Keeps about the same, from month to month. Stupid. Inclined to wander away. Does no work.

Aug 1 / Sept 30 / Oct 31 During the quarter, Patient has continued quiet, stupid & dull: Does no work: seldom speaks: habits clean. Has to be closely watched as he attempts to escape. Health & senses good.

Nov 1 / Dec 31 / Jan 31 / 1896 Nov 1/95. Wt 159 pds. Pulse 76. Nov Dec & to Jany 31/96. During this period no special change noted. Restless: seems timid: Answers fairly well, when spoken to. Does no work. Habits clean, but is untidy about dress: health is apparently good. —

Febr / March & to Apl 30 Feby/96. Wt 170 pds. P 90. Feb. March & to Apl 30 96. During the period, Patient has been quiet, and rather stupid: has done no work: Incoherent in speech: Habits clean, but he is careless and untidy in dress & appearance. Health apparently good. (Weight fluctuates a good deal).

May 1/96 to Aug 1/97 Summary Nurses Notes by Dr. Phelps. Patient quiet, stupid & demented: wanders aimlessly about: habits clean: dress untidy: behavior good except for occasional noisy spells. Which have been principally since March '97. The change was some what abrupt. Wt. 153 to 162½. '97 Wt. 157# Oct 31/97 Health seems good: Talks to himself in a rambling way: Is rather untidy: Does no work: Is quite thoroughly demented Jan 31/99 Intervening note shows no change

Feb 1 1900 to Jan 31 1900 July 31/99 (Dr Wanous) Wt. 160# Appetite & behavior good: Wanders about aimlessly: No change mentally Aug 1 - Jan 31 1900. (Dr Chapple) Wt. 158# No change during period health fairly good: Is restless, destructive in habits & quite demented & untidy. Does nothing. ———

Feby 1/31 Wt 158#. P 78. Feby 22. Was tripped by Steve Underdahl, falling on hip & producing fracture. Transferred to T.W. Extension put on leg: very restless frequently tore bandage off: cannot be kept quiet. In restraint-sheet, for a time. Mar 6. Extension removed. Patient very restless: noisy: will not keep dressings in place.

March 1 / April 1 / July 28 / " 31 Ops. no ward. Injured limb shortened & patient cannot straighten it at knee. Fracture seems to have united all right. Patient has no pain. July 28. Transferred to A4. July 31. Mental condition the same. Is very demented: irrational: fairly cleanly & well-behaved. Uses limb in walking, but it is short & bent at the knee. Aug 1 Wt 158#. Nov 30 Condition remains about same. but little Change, during period: rather thin in flesh, but health quite good: Injured leg somewhat shortened & Knee bent: Gets about quite well. Is rather untidy: very demented. Feby 22 Wt 157# Wt 155#: Aug 1 Wt 155#: Nov 1 Wt 158#. Jany 31/97. Very little Change during year: Health fair: Habits untidy: is restless in ward: much confused: irrational: does no work.

May 1 / 1900 / Jany 31 / 1901 / Aug 31 Habits very untidy: Is demented & silly in manner. Does no work: Sits about, in an aimless way: Health fairly good. —

Personal and Medical History of Joseph Peka Jr.

EGBERT, FISCHER & SAUNDERS, DAVENPORT, IOWA.

Whole No. 3807.
Residence, Jordan, Minn
Date Admission, 11th August 1894.
Admitted by, D Linton – Phelps Hour, 8:30 Pm.
How Sent, E.V. Farrington, Jct P, Fillmore County
Sex, Male
Age, 23
Civil Condition, single
Children,
Age Youngest Child, —
Occupation, Farmer
Degree Education, probably fair
Profession Religion, M. E. Church
Habits, Good.
Nativity, Bohemia
Physicians Committing, J. G. Phillips & G. A. Love
Correspondents, Joseph Peka (father) Chatfield, Minn

No. for Year, 6.
Insane Relatives, None
Cause Exciting, Hard work; Sunstroke.
Cause Predisposing, Previous attacks
Form, Melancholia acuta
Accompanying Bodily Disorder, None mentioned
Suicidal or Not, not.
Date of this Attack, a few weeks ago.
Duration, a few weeks.
No. of Attack, 3d probably
No. of Admissions, 1st
Age First Attack, not given.
Time of Leaving, September 11th 95.
Time in Hospital, 1 yr. 1 mo.
Result, Improved 7/8/96

Ed by Dr. Eby.

EXAMINATION ON ADMISSION.

MENTAL CHARACTERISTICS.

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

MEMORY:
Past Events, Fair
Recent Events, Fair
Special Subjects, Impaired on some

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

REASONING POWER:
Ordinary Subjects, not very good
Own Mental State, Poor
Special Subjects,

GENERAL DESCRIPTIVE REMARKS:
Father told attendant Patient had some sort of a fit while in the Old Country –

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

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

HALLUCINATIONS: None now
ILLUSIONS: None
CONVERSATION:
Coherent or Incoherent, Coherent
Voluble or Reticent, free

Personal and Medical History of Joseph Peka Jr.

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 feet 8½ WEIGHT, 157½ lbs. NUTRITION, ✓
WOUNDS OR ABNORMALITIES, See "I. R." on next page.
TONGUE, Tremors, ✓ Coatings, ✓ Promptness Movement, ✓
PUPILS, Equality, Equal Size, dilated
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Slightly impaired –
COORDINATION, Arms, finger to nose, eyes shut, no incoordination –
Legs, Standing, eyes shut, stands firmly –
TREMORS, Hands, ✓ Tongue, –
Facial Muscles, ✓ General,
REFLEXES, Patellar, Equal, about 1 or 2. –
Other Reflexes,
ARTICULATION, Hesitating, Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds good –
LUNGS,
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,
HABITS, Dirty, Clean, Careless,
BOWELS, Normal, Regular 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,~~ all right
Father or ~~Pat. Relations,~~ Cranky
Brothers or Sisters, Brothers & sisters all well & healthy

Personal and Medical History of Joseph Peka Jr

1894

This patient was brought here by a Deputy-Sheriff, with the following history of case. Habits have been good. There is no hereditary history. Supposed cause of this attack is hard work + sunstroke: form of attack is depressed. There is no bodily disorder mentioned. First symptoms of disease were manifested a few weeks ago; he ached peculiarly; would steal; follow girls around; he goes to other peoples' rooms; hides his clothing. Has hallucinations. This is not the 1st attack; has had 2 mild attacks, of a similar nature. He now wants whatever he sees; takes them, without offering to pay. Patient is not dangerous to others, so far as known. Is not suicidal nor filthy nor destructive. Has not been subject to any bodily disease, so far as known, nor any injury to head. He has not been restrained or confined, nor under medical treatment.—

Aug 11 On admission, was pallid Wh. (S.R.) Complexion dark; hair dark brown; eyebrows; condition of skin good; no marks noticed, but a scar on left wrist. Bodily condition clean. No bodily peculiarities noted. Behavior is good). Aug 12/94. Was restless for 3 hours, but slept 6 hours last night. T.M. Pulse 74. R 22. Te 99.2—
" 12 Appetite good; bowels regular. Behavior is good; he talks but little; no delusions noticed. No complaints
" 13 or injuries to report today. No cough observed. Aug 13/94. Restless a couple of hours, but slept 7 hours
" 14 last night. T.M. Pulse 74. Te 99. Appetite not good today; but bowels are regular. Is obstinate and
" 14 stubborn; no delusions yet noticed. Aug 14/94. Was restless for only an hour or so; slept well, (8 hours) last night.
" 15 A.M. Pulse 94. R 20. Te 98. Is very still; will not talk unless addressed; shows no delusions, as
" 15 yet. Complains of soreness in chest. Aug 15/94. Fairly restful, sleeping 7 hours last night. Am. P 94.
" 16 No special change to note. Appetite good; bowels regular. Was visited by father today. Aug 16/94. Am. P 90.
" 17 Talks freely + sensibly; no delusions yet detected. Behaves well. Works in ward. Aug 17/94. Am. P. 88.
" 18 Is about as usual. Aug 18/94. Since last noted, he has been resting + sleeping well, 7 to 8 hours, each night.
" 25 Am. Pulse 84. Worked in Kitchen, today. Seems improving. Aug 25/94. During this the 2nd week of his stay, patient has been uniformly quiet + restful, at night, sleeping well. Has been up + about, as usual, by day; clean in + of good personal habits. Pulse, somewhat accelerated the early part of week has become now nearly normal. He talks freely + sensibly; no delusions have been noted. He reads some; plays games etc. Appetite has been good; bowels regular. Is on medicine. Helps with hard-work.

Summary. When patient first came on ward, he was obstinate + reticent; also melancholy at times; but after 5th day, seemed to improve; talked more freely + sensibly; worked some on ward; also in kitchen. Complained, at times, of soreness in his chest, + of headache. Says that when he was about 8 years old he had some kind of a fit, so that he was unconscious for about 24 hours, and ever since has been afflicted." No delusions detected. Physical + mental condition seem to be improving. Aug 31/94. About as last described. Works on ward + down in kitchen.

" 31 Sep 1/94. Wt 153½ lbs. Pulse 80. Sep 1/94. Complains today, of a pain in his chest; quite severe.
Sep 1/94 " 2/94 Sep 2/94. Complains again of soreness in chest. Pulse 82. Is on medicine — Sep 28/94. Was, today,
" 28 " 30 transferred to A1. Sep 30/94. No special change. Behaves well; is quiet. Works in dining-room.
Oct 1 Oct 1/94. Wt 155½ lbs (a gain in weight of 12 lbs. in past month). Pulse 84. Seems improving.
" 31 Oct 31/94. Still complains, at times, of pains in heart. Is uniformly quiet + well-behaved. Works in Dining-room. Attends patients' dances, taking part. Habits clean. Has improved.
Nov 1/94 Nov 1/94. Wt 163½ lbs. Pulse 66. Nov 30/94. Behaves well. Has been doing some special work outside. Works,
Dec 1/30 also, in Dining-room; habits are clean. Dec 3/94. Wt 164 lbs. Pulse 82. Dec 24/94. Visited by father
" 30 and brother who decided they had better not take him, as yet. Dec 30/94. No particular change to note.

Personal and Medical History of Joseph Peka Jr

1895

Jan 3/95 Jan 3/95. Wt 157 lbs. Pulse 80. (Has lost some in weight without known cause). Jan 26/95. Com-
" 31 plains of headache + a sore-throat. Pulse 84. Jan 31/95. Behaves well + is quiet. Talks freely and
sensibly. Says "he does not want to go home until Spring" + is contented here. Has privilege of going
down town to Church, on Sundays. Habits clean. Has been working at Fire-Hall, 5 days, this month.
Feb 2/95 Feb 2/95. Wt 155½ lbs. Pulse 70. Feb 28/95. Appetite good; bowels regular. Behaves well. Habits clean.
" 28 Talks freely + sensibly. Complains of headache, every little while. Works in the dining-room.—
Mar 2/95. Wt 156½ lbs. Pulse 78. Mar 7/95. Complains of headache. + left him in a dull + melancholy
" 7 state of mind. Mar 9/95. Refused to eat his meals. Took a cup of coffee for breakfast, but no
" 9 supper or dinner. Has delusions; says also "he can hear + see things that is not so"—
Mar 10/95. Ate some breakfast; took half-cup milk for dinner; no supper. Mar 11/95. No breakfast;
10/11 7.30 A.m. Pulse 74. T. 98.8. P.M. P 62. T. 98.6. Has eaten very little today, at meals.
7 P.m. Transferred to Infirmary Ward. Complains of severe pain in head. Is very weak. Was put to bed.
" 14 Mar 14/95. Has been very restless, at night, sleeping only 3 or 4 hours. Has refused some meals. Bowels
have been constipated. Refused all nourishment, today. Is growing very despondent, of late.
" 15/16 Mar 15/95. Ate very little; complains "of food hurting his stomach". Mar 16/95. Was catheterized, today.
" 19 Mar 19/95. Eats poorly; at times refused all food. Sleeps poorly; is restless. Requires to be catheterized.
" 20/22 Mar 20/95. Restless 6 hours, sleeping only 2 hours. Complained of pain. Mar 22/95. Has taken no
nourishment for some days. Sleeps poorly. Cries frequently + very despondent. Bowels constipated.
" 26 Mar 26/95. Ate fairly well the past 2 days. Still despondent + crying "Jew". "Imagines
" 31 someone is going to murder him". March 31/95. Sleeps poorly; from 3 to 5 hours, nightly. Has been
Eating sparingly, the past few days. Very despondent + crying continually. Requires frequent enemata.
Apl 8 April 8/95. Patient is very restless, at night + sleeps only 3 or 4 hours at each. Eats very poorly + must some
days, nothing. Is on regular diet. Sometimes, refuses his medicine. Is very despondent + continually crying.
" 9/15 Apl 9/95. Wt 118 lbs. (Has lost very markedly in flesh). Apl 15/95. Continues very restless + sleeps only
2 or 3 hours, each night. Eating fairly well, the last few days. Still has "crying spells"; and "thinks some
" 20 one is going to harm him". Bowels free + now fairly regular. Apl 20/95. Complains of pain in Stomach.
" 23 Apl 23/95. Still sleeps poorly; groaning + crying continually. Is on medicine, 3 times a day, though,
at times, he refuses it. Is given frequent shower-baths. Bowels moved by Enema. Appetite is now fair.
" 30 Apl 30/95. Appetite fair. Bowels constipated, at times. Refuses medicine often. Continually crying, when awake.
May 3 May 3/95. Patient depressed + continually crying; saying "he never done any thing out of the way";
" 7 has been refusing food quite often, the past 3 days. Wt 118½ lbs. May 7/95. Very restless; continually
getting out of bed. Eats very poorly. Still has "fears of being harmed". Is very despondent.
" 11/14/17 May 11/95. Ate heartily, today. May 15/95. Has been refusing an occasional meal. May 17/95. Lies steadily
in bed, very quietly. Is some bright + contented of late. Sleeps poorly; but lies awake quietly.
" 25 May 25/95. Patient asked to get up. May 26/95. Up in roller chair, today, 6 hours. May 27/95. Sleeps quite
" 28/29 well, of late. Up, in roller chair, 8 hours today. May 28/95. Up, in chair, most of day. May 29/95. Is
" 31 dressed + up, in ward, today. May 31/95. Appetite poor, of late; Bowels not regular.—
June 3 (See attached music record, for fuller details). June 3/95. Wt 127½ lbs. Pulse 70.—
" 5 June 5/95. Temp now + on ward, every day. Appetite poor. Complains of feeling worse, this am.
" 10 June 10/95. Is quite despondent, at times: frequently crying + thinks some one is going to harm him.

(carried to 252)

Personal and Medical History of Pleasant Parks

EBERT, FIDLER & SHAMBERS, DAVENPORT, IOWA

Whole No. 3809.
Residence, Pleasant Grove, Minn
Date Admission, 13th August 1894
Admitted by, D. Phelps Hour, 12 M. noon
How Sent, Thos Fraser, Jof P. Olmsted County
Sex, Male
Age, 76 years
Civil Condition, married
Children, - 13 -
Age Youngest Child, —
Occupation, Farmer
Degree Education, probably limited
Profession Religion, is church member
Habits, Temperate —
Nativity, Indiana
Physicians Committing, E. H. Cross & Charles T. Gauger
Correspondents, Mrs Martha Partridge
Pleasant Grove Minn

No. for Year, 8.
Insane Relatives, none
Cause Exciting, unknown
Cause Predisposing, previous attack
Form, Dementia senile (paretic form)
Accompanying Bodily Disorder, Feebleness -
Suicidal or Not, not
Date of this Attack, probably some time ago
Duration, probably long
No. of Attack, 2nd
No. of Admissions, 1st here
Age First Attack, about 41
Time of Leaving, 26th October 1894.
Time in Hospital, 2 months & 13 Days
Result, Died; Acute peritonitis -

EXAMINATION ON ADMISSION.

Exd by D. Ely Aug 27/94. -

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Some Confusion
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Poor
Recent Events, Poor
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dulled
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Impaired
Own Mental State, Impaired
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Patient is a typical case of Senile Dementia —

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

Personal and Medical History of Pleasant Parks

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7½ WEIGHT, 143½ pds NUTRITION, Good
WOUNDS OR ABNORMALITIES, See "S. R.", next page
TONGUE, Tremors, Coarse Coatings, White; large & flabby Promptness Movement, Quite prompt
PUPILS, Equality, Equal Size, normal
Response Light, Do not respond to any degree Accommodation, Has arcus senilis of Cornea
SIGHT, Impaired
HEARING, Fair
COORDINATION, Arms,
Legs,
TREMORS, Hands, Yes Tongue, Yes
Facial Muscles, Yes General, Yes
REFLEXES, Patellar, Sluggish; right 5 -; left 2 — 3 -
Other Reflexes,
ARTICULATION, Hesitating, Fair Slurred,
FACIAL EXPRESSION,
SENSIBILITY,
HEART, Sounds muffled; action intermittent -
LUNGS, Sounds good —
EXAM. URINE.

OPHTHALMOSCOPIC EXAM.,

HABITS, Dirty,	Clean, Kept	Careless,
BOWELS, Normal,	Constipated,	Irregular,
APPETITE, Good, Poor	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,

1894

EBERT, FOLEY & CHAMBERS, DAVENPORT, IOWA

This patient was brought here by Sheriff Charles Stewart, with the following history. Habits have been temperate; there are no insane relatives; supposed cause of this attack is unknown: form of attack, chronic. First symptoms of disease were manifested about 3 years ago; when that attack lasted 6 months, and was cured after that length of treatment. This, then, seems to be the 2nd attack. Patient now shows senile dementia. He is disposed to injure others, from sudden passion, but is not suicidal, nor filthy nor destructive. There is no history of any bodily disease &c or injury to head. He has not been restrained or confined.

Aug 13 On admission, was put in C.4 (S.K.). Complexion light; hair gray; eyebrows; condition of skin good; some scars on left wrist; no eruptions noted. Bodily condition dirty + has some moles or birth marks on his
" 14 back. Patient is quite an infirm old man. Behavior is quiet + good). Aug 14/94. Was awake all night; very restless + constantly getting out of bed. AM. Pulse 98 R 22 T. 98 4/10 F.; appetite good; — bowels seem free; no cough noticed. Is restless + nervous today; walks around considerably; speaks quietly and collectedly, but is weak-minded; manifests Delusions. No complaints or injuries to report today. —
" 15 Aug 15/94. Was again restless, noisy + awake all night. AM. Pulse 94. R 20. T. 98 4/10 F. — Appetite good; bowels somewhat loose. Is still restless + uneasy; speaks quietly, but is rambling + incoherent in speech. —
" 16 Aug 16/94. Slept 5 hours, awake 4 hours, during the night. AM. Pulse 88. R 19. T. 98 2/10 F. — Is quietly-behaved but very restless. Talks quite incoherently. Walks lame on right leg; says "his knee pains him".
" 17 Aug 17/94. Awake 3 hours, but slept 6 hours, last night. Vomited during night. AM. P 86. R 23. T. 98 8/10 F.
" 18 Walks better today. Otherwise, about as usual. Aug 18/94. Slept 4 hours; awake 2 hours; restless 2 hours, last night; was also noisy for an hour or so. AM. Pulse 90. R 22. Quietly behaved, by day; but still restless +
" 19 uneasy. Talks incoherently; still shows delusions. Does not complain any. Aug 19/94. Restless 3 hours, noisy 6 hours; slept none, last night. AM. Pulse 94. R 24. Conduct, behavior, talk &c show no change —
" 20 Aug 20/94. Restless 5 hours, awake 4 hours, during the night. AM. Pulse 82. R 22. No special change —
" 21 Aug 21/94. Slept better (7 hours) last night; tho' was restless a couple of hours. AM. Pulse 92. R 21. Appetite has been good, but today it is poor. Bowels regular. Is well-behaved. Talks plainly, but is incoherent. Can
" 22 scarcely walk; he appears very weak. Aug 22/94. Slept quite well, 8 hours, last night. AM. Pulse 86. R 22. Appetite good; bowels regular. Otherwise about same. Aug 23/94. Was restless for 2 hours; awake 2 hours + slept only about 2 hours, last night. AM. Pulse 89. R 23. Behaves well, but is restless.
" 24 Aug 24/94. Restless 3 hours; slept 4 hours; was awake 2 hours, during the night. AM. Pulse 90. R 23.
" 25 Behaves well; talks incoherently + shows delusions. Makes no complaints. Aug 25/94. Lay awake 5 hours + only slept 4 hours, last night. Appetite continues Good; bowels regular. Behaves well; is not so restless + uneasy. AM. Pulse 97. R 22. Still talks ramblingly. Complains of pain in back.
" 26 Aug 26/94. Awake 5 hours, but slept 7 hours, last night. AM. Pulse 76. R 24. Complains still of
" 27 pain in back. In other respects, no change. Aug 27/94. Fairly restful, sleeping 7 hours, last night. AM. Pulse 88. R 21. Appetite has continued Good; bowels regular. Behaves well. Talks calmly + collectively, but is still rambling in his remarks. Summary. This patient, when admitted, was restless, nervous + much excited. He could not be kept in bed + was constantly walking around ward. Slept very little; rambled in his talk; incoherent in speech + had delusions. Appetite also was poor. This restlessness has, in a great measure, disappeared + he is gradually quieted down. Appetite is much improved + he sleeps quite well. Physically, he seems much improved. His mental power also seems somewhat improved: his

1894

talk is more rational + connected + he has, to some extent, overcome the delusions under which he labored. Seems now to take more notice of treatment in his surroundings. —

Aug 31 Aug 31/94. Appetite fairly good; bowels regular. He goes walking daily. Is very restless, wanting to go home. Does not fully realize where he is + his talk is all about his wife + family. Habits have been dirty, but of late, have somewhat improved. (Was dirty 2 days + has been on medicine 10 days). —
Sep 1/4 Sep 1/94. Wt 135 pds. (has lost 8½ pds. since admission). Pulse 76. Sep 4/94. Was visited by wife,
" 5 daughter + son-in-law, today. Sep 5/94. Patient complains of pains in the breast; appears to be
" 30 suffering and is rather weak. Sep 30/94. Appetite good; bowels free; no cough observed; he appears to be in fairly good health but his lower limbs are weak and his gait tottering. Is generally well-behaved, but is, at times, inclined to be irascible + pugnacious. Talks quite freely + distinctly, but in a rambling + incoherent manner. Has delusions; also manifests hallucinations. Has become clearly in his habits. Is very anxious to go home.
Oct 1/11 Oct 1/94. Wt 133 pounds. Pulse 92. Oct 11/94. Visited by his wife + daughter, today.
" 15/21 Oct 15/94. No special change to note, at this date. Oct 21/94. For the past 2 days, he has been complaining of a pain in the left hip-joint; by orders of Physician, patient put to bed.
" 22 Oct 22/94. Slept well, last night; ate heartily today. Pain in left hip + thigh has abated.
" 23 Oct 23/94. Appetite continues fair. He has had no movement of the bowels for the past 36 hours; was given a cathartic. He complains of severe pains in breast + abdomen.
10 P.M. The cathartic did not operate + an enema was ordered to be administered. This
" 24 had the desired effect + patient had several movements of the bowels. Oct 24/94. Patient's pulse is very weak, this morning + he refused breakfast. Pains in breast still continue and he was given, hypodermically, ½ gr. morph. at 10 A.M. — 11 A.M. + at noon. He has slept most of the forenoon. Again refused food at dinner-time. At 1 P.M. he was transferred to C.2 (the "Sick Ward"). Was put to bed there. Is very weak and low. —
3 P.M. Restless + seems to be in pain. 5 P.M. Respiration apparently somewhat labored.
" 25 8.30 A.M. Visited by wife + daughter + son. Oct 25/94. Remained in a sort of a stupor, all night. Am. Is resting easier than last night. Respiration very slow and hard. —
9 P.M. Takes no nourishment. Seems resting easily. 10.30 P.M. Is sleeping now.
12.30 A.M. Feet cold; applied hot sand bags. Is given medicine regularly; also hypodermics. Hot applications also made to abdomen. Was quite restless, during the afternoon. Abdomen appeared swollen a great deal + very sensitive to the touch.
" 26 Enema given. Bowels moved slightly. Oct 26/94. 7 A.M. Patient seems to have considerable difficulty in breathing. 9 A.M. Appears in pain; given hypodermic of morph. —
11.30 A.M. Was visited by wife + daughter. Refuses all nourishment. 1.30 P.M. Hot applications kept to abdomen continually + hot sand bags to feet. Respiration increased + very labored. Is perspiring profusely + failing rapidly. — 2 P.M. Again visited by wife + daughter. 2.25 P.M. Continued to sink rapidly + died at this hour. —

— Died —

Personal and Medical History of Hermann Tribolt

Whole No. 3810.
Residence, Town of Woodbury, Washington County.
Date Admission, 14th August 1894.
Admitted by, D. C. H. Eby Hour, 2:30 P.M.
How Sent, Rudolph Lehnicke, Jr. P. Washington County.
Sex, Male.
Age, 38.
Civil Condition, Married.
Children, Three.
Age Youngest Child, ——
Occupation, Farmer.
Degree Education, Probably fair.
Profession Religion, Lutheran Church Member.
Habits, Temperate — never drinks.
Nativity, U.S.
Physicians Committing, W. C. Voight and Jas. C. Rhodes.
Correspondents, August Tribolt — P.O. Box A. St. Paul, Minn.

No. for Year, 9.
Insane Relatives, None.
Cause Exciting, being held-up & robbed.
Cause Predisposing, not k
Form, Melancholia a
Accompanying Bodily Disorder, he
Suicidal or Not, Tried to kill
Date of this Attack, last spring.
Duration, about 4 months.
No. of Attack, 1st.
No. of Admissions, 1st.
Age First Attack, about 38.
Time of Leaving, Oct. 5th '94.
Time in Hospital, 1 mo. 21 ds.
Result, Improved.

Herm Tribold, a young farmer who resides in the southern part of the county, was examined in the probate court yesterday as to the condition of his mind and he will be taken to the Rochester asylum to-day. Tribold imagines that he is pursued by parties who are anxious to take his life. His friends say that he was robbed by Otto Milhausen and Charles Ernisch and also witnessed the murder in St. Paul, of which they were convicted, and that he lost his reason then.

EXAMINATION ON ADMISSION.

Emily D. Eby. Aug 25/94. MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Good
Recent Events, good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Fair
Own Mental State, Impaired
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Patient will not talk, further than to answer questions —

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

Personal and Medical History of Hermann Tribolt

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 in. WEIGHT, 141½ lbs. NUTRITION, Fair
WOUNDS OR ABNORMALITIES, See "SR" on next page —
TONGUE, Tremors, ✓ Coatings, ✓ Promptness Movement, ✓
PUPILS, Equality, Equal Size, Normal
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Fingers nose, eyes shut, Incoordination
Legs, Staving, eyes shut, Sways.
TREMORS, Hands, none Tongue, slight
Facial Muscles, none General, none
REFLEXES, Patellar, Equal; 6 & 7. —
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, left Constipated, Irregular,
APPETITE, Good, Recent 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,
} No hereditary history of insanity —

Personal and Medical History of Hermann Tribolt

EGBERT, FOLEY & CHAMBERS, DAVENPORT, IOWA

Whole No. 3810.
Residence, Town of Woodbury, Washington County.
Date Admission, 14th August 1894.
Admitted by, D. C. H. Ely Hour, 2.30 P.M.
How Sent, Rudolph Lehmicke, Jo. Co. Washington County
Sex, Male
Age, 38
Civil Condition, Married
Children, Three
Age Youngest Child, ——
Occupation, Farmer
Degree Education, Probably fair
Profession Religion, Is a church Member
Habits, Temperate — Never drinks.
Nativity, U.S.
Physicians Committing, W. C. Voight and Jas. C. Rhodes
Correspondents, August Tribolt — P.O. Box A. St Paul, Minn

No. for Year, 9.
Insane Relatives, None
Cause Exciting, being "held up" & robbed
Cause Predisposing, not stated
Form, Melancholia acute
Accompanying Bodily Disorder, hemorrhoids & Dyspepsia
Suicidal or Not, Tried to hang himself last Friday
Date of this Attack, last spring
Duration, about 4 months
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, about 38.
Time of Leaving, Aug. 5th '94
Time in Hospital, 1 mo. 21 ds
Result, Improved

EXAMINATION ON ADMISSION.

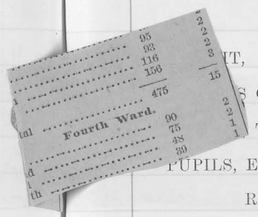
Emily D. Ely Aug 23/94.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY:
Clear or Confused, Clear
Quick or Sluggish, Sluggish
MEMORY:
Past Events, Good
Recent Events, Good
Special Subjects,
PERCEPTIVITY:
Alert or Dull, Dull
Correct or Illusive, Correct
REASONING POWER:
Ordinary Subjects, Fair
Own Mental State, Impaired
Special Subjects,
GENERAL DESCRIPTIVE REMARKS:
Patient will not talk, further than to answer questions —

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

Personal and Medical History of Hermann Tribolt



EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HT, 5ft 11in WEIGHT, 141½ lbs. NUTRITION, Fair
S OR ABNORMALITIES, See "SR" on next page —
Tremors, ✓ Coatings, ✓ Promptness Movement, ✓
PUPILS, Equality, Equal Size, Normal
Response Light, Yes Accommodation, Yes
SIGHT, Good
HEARING, Good
COORDINATION, Arms, Finger to nose, eyes shut, poor coordination
Legs, Staggering, eyes shut, sways.
TREMORS, Hands, none Tongue, slight
Facial Muscles, none General, none
REFLEXES, Patellar, Equal; 6 & 7. —
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, Poor	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,

No hereditary history of insanity —

Personal and Medical History of Hermann Tribolt

1894

This patient was brought here by Deputy Sheriff W. J. Bachmann, and attended by Aug. Tribolt (a relative), with the following history of case. (see also attached "clipping"). Habits are temperate; he never drinks. There is no history of any heredity. He was held up by Highwaymen two last spring and robbed & has been scared of his life, ever since. This is the supposed cause of this attack. Form of attack is depressed: accompanying bodily disorder, hemorrhoids & dyspepsia: first symptoms of the disease were manifested at about time, when he was on his way home from St Paul. He seems in constant fear of being killed or hung & insanity is now manifested in this way. This is the first attack — Patient is not disposed to injure others, but he is suicidal & tried to hang himself, last Friday. Is not pretty destructive. He was shot in the right arm, while hunting, about 20 years ago. He has not been restrained or confined, but has been closely watched by friends the past 3 or 4 days. Has had medicine prescribed for him by Dr. Chase, but has not been willing to take it.

August

On admission, was put on B2 (S.R. Complexion dark; hair dark brown; eyes gray; condition of skin good. Has some marks around neck; scars on right arm; no ruptures noticed; bodily condition clean; thumb on right hand is stiff. He is well-behaved). Aug 15/94. Restless, for about an hour but slept 8 hours last night. HM. Pulse 106. R 22. Temp 99 4/5. Appetite is not good; bowels seem regular; no cough observed, but he complains of headache. Behavior is good; but he is much depressed; "wishes he could die".

" 16 Aug 16/94. Again slept well (8 hours), last night. HM. Pulse 110. R 22. Temp 99 2/5. Is slightly

" 17 Constipated & complains of headache. Appetite poor. Aug 17/94. Slept 8 hours last night: slightly restless: HM. Pulse 104. R 21. Temp 99. Appetite still poor. He continues quiet & well-behaved.

" 18 Is melancholy; sits all day, thinking. Aug 18/94. Rested well, last night. AM. Pulse 104; no change noted.

" 19 Aug 19/94. HM. Pulse 104. Quiet; sits around, all day; will not talk unless addressed. Says "he wants

" 20 to die". Aug 20/94. HM. Pulse 84. "No change" to note in his condition. Visited, today, by a friend. —

" 21 Aug 21/94. Continues quiet & sleeps well, at night. HM. Pulse 82. Appetite is still poor. Complains of some

" 22 headache. He is slightly constipated. Aug 22/94. Would not eat any dinner or supper, today.

" 23 Appetite very poor now. Fever and fever. Aug 23/94. HM. Pulse 80. Is much depressed & melan-

" 24 -cholic. "Does not want to eat"; "he wants to die." Aug 24/94. AM. Pulse 82. "No special change.

" 25 Aug 25/94. Behaves well. There is a felon on second finger of left hand. Same seems quite sore. —

" 26 Aug 26/94. Felon lanced by Dr. this morning — Appetite still poor: he would not eat any supper. Bowels regular.

" 27 Aug 27/94. HM. Pulse 84. Aug 28/94. Patient, almost since admission, has been sleeping well, (6 hours

" 28 each night) though occasionally a little restless, at first. He is still much depressed: reticent; will not talk unless addressed: sits around, or settles, all day, in an absent minded manner.

Summary:- When patient first came on ward, he was very melancholy; would sit by himself all day & seem to be thinking; was very absent minded; would not talk unless addressed; — after the 8th day, he seemed to brighten up a trifle though still reticent & despondent. Physical condition not very good: he complains frequently of headache — Appetite poor. Little or no change to note as regards his mental condition — He has been sleeping, as a rule, well, each night.

" 31 Aug 31/94. Was visited by a friend, today. Physical & mental condition seem to be improving slightly, though he is still much depressed & cries, at times. Sleeps well. Appetite medium; bowels regular.

Sept 1/15 Sept 1/94. Wt 138½ pds — has lost slightly in flesh — Pulse 90. Sep 15/94. Is still much depressed —

" 18/20 Sept 18/94. Had a "crying spell" today. Sep 20/94. Visited by wife & brother. Is still melancholy.

Personal and Medical History of Hermann Tribolt

1894

Sept 21/94 - 25/94 Sept 21/94. Quite melancholy & having "crying spells" today - Sept 24/94. Continues in about the same depressed condition. Sept 25/94. Had another "crying spell" today - Sept 30/94. Does not seem to improve. Is quiet & well behaved, but much depressed; has "spells" of crying, nearly every day - "Wants some one to kill him" - Apparently rests & sleeps well. Appetite not very good; bowels regular -

Oct 1/5 Oct 1/94. Wt 137 pds. Pulse 80 - Oct 5/94. Stands about, crying & moaning - Does not seem to take any interest in his surroundings; is teasing to be allowed to go home; Melancholy. Was today visited by his wife and a relative - Was taken home, on trial, by them, today. Note by D.F. There has been some slight improvement in his condition, since admission but the relatives were very anxious to remove him, as the burden of his complaints seemed to be a desire to go home - There is some possibility of suicide, but not marked. —

ged Feb 6th '95

Brooks (colored)

Picked a lock & made his escape, but was again resisted & quite a struggle ensued before he was got i to go out alone on the grounds. Apl 22/95: Absent er. Was brought back & ordered to be kept on ward. present kept on C3. Is somewhat feeble minded, ds. Pulsed 100. May 1/95: Quite often strikes other frimanded for his actions, he pays no attention whatever w breakfast, by unlocking the screen. Searchers ght back, at dinner time, by four Farmers, May 9/95: Patient drops his shirt & his blanket, was also found unlocked. May 13/95: Taken May 24/95: Again, made his escape, by unlocking Fitzpatrick) & let himself down, was captured, ay 31/95. Is of a mean & mischevious disposition. t to rather silly; quite frequently gets into trouble w without cause. Habits clean. He does no work.

June

July 1/7/22 July 1/95. Wt 138 pds. Pulse 76. July 7/95. Transferred to C3 East. July 31/95: About as usual. Troublesome mischevious & annoying. Saucy & cheeky. "Bothers the Doctors to let him go". Mental condition does not improve, seemingly. - Physical health is quite good —

Aug 1/31 Aug 1/95. Wt 140 pds. Pulse 100. Aug 31/95. No change noticeable in his condition, during the month.

Sept 1/30 Sept 1/95. Wt 142 " " 84. Sept 30/95. Wakes up forward every day. No definite delusions noticed, but a certain amount of feeble-mindedness: apparently very bright & quick, but superficial: Quite Erotic & masturbates. Has had some nights (attendants think on purpose) is somewhat unruly attempts to escape sometimes. Oct 1/95. Wt 143 pds. Oct 30/95: No change. Leaves to go home.

Oct 1/30

carried to Transfer Book a — 42

File

Rochester Minn July 1894

Dr. Kit Bourne

I would like to go

Away Pritty soon

if you Cannot let me

go Home give me a

Parole — I dont want

to Be locked D all

the time.

John Brooks

1894

This patient was brought here by Deputy S
(a relative), with the following history of ca
he never drinks. There is no history of any heredi
robbed & has been scared of his life, ever since. H
is depressed: accompanying bodily disorder, hem
have manifested at above time, when he was af
of being killed or hung & insanity is now m
Patient is not disposed to injure others, but he
is not pretty destructive. He was shot in
He has not been restrained or confined, but ha
Has had medicine prescribed for him by Dr. O
Aug 14 On admission, was put on B³. (S.R. Complexion
has some marks around neck; scare on right
" 15 on right hand is stiff. He is well-behaved).
hours last night. HM. Pulse 106 R 22 T 98 99⅘.
observed, but he complains of head ache. Behavior is good; but he is much depressed; "wishes he could die".
" 16 Aug 16/94. Again slept well (8 hours), last night. HM. Pulse 110 R 22 T 99⅗. Is slightly
" 17 Constipated & complains of head ache. Appetite poor. Aug 17/94. Slept 8 hours last night: slightly
restless: HM. Pulse 104. R 21. T 99. Appetite still poor. He continues quiet & well-behaved.
" 18 Is melancholy; sits all day, thinking. Aug 18/94. Rested well, last night: AM. Pulse 104; no change noted.
" 19 Aug 19/94. HM. Pulse 104. Quiet; sits around all day; will not talk unless addressed. Says he wants
" 20 to die. Aug 20/94. HM. Pulse 84. No change to note in his condition. Visited, today, by a friend. -
" 21 Aug 21/94. Continues quiet & slept well, at night. HM. Pulse 82. Appetite is still poor. Complains of some
" 22 headache. He is slightly constipated. Aug 22/94. Would not eat any dinner or supper, to day.
" 23 Appetite very poor now, for some time. Aug 23/94. HM. Pulse 80. Is much depressed & melan-
" 24 -cholic. "Does not want to eat"; "he wants to die." Aug 24/94. AM. Pulse 82. No special change.
" 25 Aug 25/94. Behaves well. There is a felon or sore finger of left hand. Same seems quite sore. —
" 26 Aug 26/94. Felon lanced by D. this morning - Appetite still poor: he would not eat any supper. Bowels regular.
" 27 Aug 27/94. HM. Pulse 84. Aug 28/94. Patient, almost since admission, has been sleeping well, (6 hours
28 each night) though occasionally a little restless, at first. He is still much depressed: reticent;
will not talk unless addressed: sits around or settles, all day, in an absent minded manner.

Summary:- When patient first came on ward, he was very melancholy; would sit by himself
all day & seem to be thinking; was very absent minded; would not talk unless addressed; -
after the 8th day, he seemed to brighten up a trifle though still reticent & despondent. Physical
condition not very good: he complains frequently of headache - Appetite poor - Little or no change
to note as regards his mental condition - He has been sleeping, as a rule, well, each night.

" 31 Aug 31/94. Was visited by a friend, today. Physical & mental condition seem to be improving slightly,
though he is still much depressed & cries at times. Sleeps well. Appetite medium; bowels regular.
Sep 1/15 Sep 1/94. Wt 138½ pds - has lost slightly in flesh - Pulse 90. Sep 15/94. Is still much depressed -
" 18/20 Sep 18/94. Had a "crying spell" today. Sep 20/94. Visited by wife & brother. Is still melancholy,

1894

21/94. Quite melancholy & having "crying spells" today - Sep 24/94. Continues in about the same
ced Condition. Sep 25/94. Had another "crying spell" today - Sep 30/94. Does not seem to
ve. Is quiet & well behaved, but much depressed; has "spells" of crying, nearly every day -
to "some one to kill him" - Apparently eats & sleeps well. Appetite not very good; bowels regular-
/94. Wt 137 pds. Pulse 80 - Oct 5/94. Stands about, crying & moaning - Does not
to take any interest in his surroundings; is teasing to be allowed to go home; Melancholy.
today visited by his wife and a relative - Was Taken Home, on trial, by them, today.
pd D.C. There has been some slight improvement in his condition, since admission but the
ies were very anxious to remove him, as the burden of his complaints seemed to be a desire
home - There is some possibility of suicide, but not marked. —

Discharged Feb. 6th '95-

John Brooks (colored)

1895 from 356.

Apl 1/17 Apl 1/95. Wt 139 pds. Pulse 100. Apl 17/95: Picked a lock & made his escape, but was again
Captured, when out only a few minutes.: he resisted & quite a struggle ensued before he was got
" 18/22 to the ward. Apl 18/95. Was given permission to go out alone on the grounds. Apl 22/95: Went
down town; did not get back for dinner. Was brought back & ordered to be kept on ward.
" 30 Apl 30/95. Appetite good; bowels regular. Is at present kept on C³. Is somewhat feeble minded,
May 1/14 with some hallucinations. May 1/95. Wt 140 pds. Pulse 100. May 14/95: Quite often strikes other
patients, without cause or provocation: when reprimanded for his actions, he pays no attention whatever
" 5 May 5/95. Made his escape, this morning, before breakfast, by unlocking the screen. Search was
made, but he could not be found: was brought back, at dinner time, by some farmers,
" 9 and placed on C³, for safe keeping, for a while. May 9/95: Patient tore up his shirt & his blanket
" 12 during night: one of the screen locks in his room was also found unlocked. May 12/95: Taken
" 22 back to 73³, under promise of better behavior. May 21/95: Again, made his escape, by unlocking
screen in hall; with assistance of patient (? Fitzpatrick) he let himself down, was captured,
" 31 before he got very far; brought back & put on C³. May 31/95. Is of a mean & mischevious disposition.
Shows the "Nigger's Cheekiness & sauciness"; acts rather silly; quite frequently gets into trouble
with other patients, annoying them & striking them without cause. Habits clean. He does no work.
June 1/30 June 1/95. Keeps in about his usual flesh. June 30/95. No change. Continues to stay on C³.
July 1/31 July 1/95. Wt 138 pds. Pulse 76. July 29/95. Transferred to C³ East. July 31/95: About as usual.
Troublesome mischievous & annoying. Saucy & cheeky. "Bothers the Doctors to let him go".
Mental condition does not improve, seemingly. - Physical health is quite good -
Aug 1/ Aug 1/95. Wt 140 pds. Pulse 100. Aug 31/95. No change noticeable in his condition, during the month.
Sept 1/30 Sep 1/95. Wt 142 - " 84. Sep 30/95. Works on afternoon ward every day. No definite delusions noticed, but
a certain amount of feeble-mindedness: apparently very bright & quick, but superficial: Quite
Erotic & masturbates. Gets in bed some nights (attendants think on purpose): is somewhat nervous.
Oct 1/30 attempts to escape sometimes. Oct 1/95. Wt 143 pds. Pulse 84. Oct 30/95: No change. Leaves to go home.

(carried to Transfer Book a - 342

Personal and Medical History of Peter Johnson #2

GIBERT, PICKAR & CHAMBERS, DAVENPORT, IOWA

Whole No. 3812.
Residence, Forrest Lake, Minn
Date Admission, 16th August 1894.
Admitted by, D. Kilbourne Hour, 2.30 P.M.
How Sent, Rudolph Schnicks, Jr. Co. Washington County
Sex, Male —
Age, 63 Years
Civil Condition, married
Children, Yes; four.
Age Youngest Child,
Occupation, Farmer
Degree Education, Probably limited
Profession Religion, Yes: Lutheran
Habits, Temperate
Nativity, Sweden
Physicians Committing, Edward H. Eshelman & G. E. Clark
Correspondents, August Ahn
Forrest Lake, Minn

No. for Year, 11.
Insane Relatives, None, as known
Cause Exciting, Sunstroke, one year ago.
Cause Predisposing, not Stated
Form, Dementia Senile (paretic form)
Accompanying Bodily Disorder, None
Suicidal or Not, not
Date of this Attack, one year ago
Duration, one year —
No. of Attack, 1st
No. of Admissions, 1st
Age First Attack, 62 Years
Time of Leaving, 5th July 1895
Time in Hospital, 10 months. 19 Days —
Result, Died: Exhaustion in Senile Dementia.

EXAMINATION ON ADMISSION.

Ed'y Dr. Hazzard. Sept 25/94.

MENTAL CHARACTERISTICS.

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

EMOTIONAL STATE:
~~Normal, Calm~~,
~~Indifferent~~,
~~Exalted~~,
Depressed, Yes.
DELUSIONS:
Systematized or Not,
Special Subjects, Unknown
Transitory or Not,
HALLUCINATIONS:
ILLUSIONS:
CONVERSATION:
Coherent or Incoherent, Incoherent
Voluble or Reticent, Fairly voluble

GENERAL DESCRIPTIVE REMARKS:
Patient talks, at times, considerably at random. He speaks no English & hence Examination is difficult. He is quiet & fairly well behaved, but does not realize his condition & situation fully. He is somewhat filthy in his habits. There is some oedema of the ankles but no fluid in pleural cavities or abdomen. There is a suspicious looking ulcer over the left tibia about 4 inches in length. Now dressed with iodoform Gauze.
Treatment recommended: try inunctions of mercury with Iodide of potassium

Personal and Medical History of Peter Johnson #2

EXAMINATION ON ADMISSION.—(Continued.)

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 in WEIGHT, 141 lbs NUTRITION, Poor
WOUNDS OR ABNORMALITIES, See "S.R." on next page — 2 small ventral hernias.
TONGUE, Tremors, Slight Coatings, grayish at base Promptness Movement, Slow
PUPILS, Equality, Yes Size, Normal
Response Light, Normal Accommodation, Normal
SIGHT, Impaired
HEARING, " "
COORDINATION, Arms, Impaired; finger to nose, eyes shut, some uncertainty
Legs, Impaired; Standing on foot, cannot; Standing, eyes shut, sways slightly.
TREMORS, Hands, Slight Tongue, Slight
Facial Muscles, No General, None
REFLEXES, Patellar, 7; Equal
Other Reflexes,
ARTICULATION, Hesitating, Yes ~~Slurred~~,
FACIAL EXPRESSION, Somewhat dull
SENSIBILITY,
HEART, Distinct murmur of mitral insufficiency.
LUNGS, Slight dullness at left apex.
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, 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 Peter Johnson #2

SIBERT, PICKS & CHAMBERS, DAVENPORT, IOWA.

1894

This patient was brought here by Deputy Sheriff August Ahne, with following history. There is no history of heredity known of. Supposed cause of this attack is sunstroke; one year ago: form of attack is acute; there is no accompanying bodily disorder. First Symptoms of disease were manifested one year ago, by hallucinations. This is the first attack. Insanity is now manifested in all subjects; there is a tendency to violence and bodily injury, through premeditation. Patient is not suicidal, hints of filthy & destructive habits. There is no history of any bodily disease &c. He has not been restrained or confined, nor under medical treatment.

Aug 16 On admission, was put on B2: (S.L. Complexion light, hair light, eyes blue; Condition of skin good; no marks, scars w bruises noted; bodily Condition clean; feet & legs, from knees down, are badly swollen; behavior is good). —

" 17 Was kept on this B2 ward till 4 Am; Aug 17/94. becoming very noisy & excited, patient was, at 4 Am, moved to C3: at 7 Am was transferred to C4. — Pt slept until about 3 Am; then became noisy; singing, talking loudly & pounding at the door. Am. Pulse 84. R 23. T(o) 98°. Took no supper last evening; ate a little breakfast this Am; says he is hungry now (9 Am). Cannot ascertain anything regarding Condition of bowels. Talk Norwegian; his speech is quite unintelligible. No cough is observed. —

" 18 Aug 18/94. Slept 6 hours; was restless for 3 hours, during the night. AM. Pulse 92. R 22. T(o) 98 5/10 Appetite improving — Is much more quiet & subdued, today. Talks incoherently; wont answer questions.

" 19 Today, clipped on floor, cutting left side of head slightly. Aug 19/94. Was restless 4 hours, noisy 4 hours and slept none, last night. Appetite medium; bowels probably Constipated — AM. Pulse 82. R 23.

" 20 T(o) 97 2/5 — Behavior is restless; he talks incoherently & unintelligibly. Aug 20/94. Noisy for 5 hours, restless 2 hours, sleeping only 2 hours, last night. AM. Pulse 84. R 24. T(o) 97 7/10 — Appetite poor. bowels seem quite free. Quietly behaved; talks in a rambling way; makes no complaints — Received an injury to right eye last night. Aug 21/94. Restless 3 hours, but slept 6 hours, last night. — Am. Pulse 82. R 18. Appetite still poor. Behaves well. Still talks incoherently & in a rambling way.

" 22 Aug 22/94. Restless 3 hours, noisy 1 hour, slept 5 hours, last night. AM. Pulse 96. R 24. Appetite keeps poor; bowels loose, no cough has been observed. Behavior is quiet — Talks irrationally; no complaints

" 23 Aug 23/94. More restful last night; noisy for 1 hour & so but slept 6 hours. AM. Pulse 92. R 24. Still

" 30 talks irrationally & no information can be obtained from him. Aug 30/94. During this the second week of his stay, patient has been slightly restless, each night, for an hour or so, occasionally somewhat noisy, but he has been sleeping 7 to 8 hours, each night. Pulse, on 24th, 104; on 25th, 84, and today, 86.: R 24 to 21. Appetite has been poor, all the time. Bowels, at times, Constipated; at others, irregular, but they are more regular, the past 2 days. Behavior has been good; he still talks irrationally & unintelligibly; cant answer questions. No cough has been noticed, but he occasionally Complains of a pain in small of back. Summary. Patient, when admitted, was restless, noisy & excited. Slept very little; talked incoherently; appetite was poor; bowels Constipated & he was generally run down, both physically & mentally. He now sleeps quite well, has become quiet & his restlessness & excitement have entirely disappeared. Appetite, however, Continues poor; circulation weak. Mind appears blank; cannot answer questions. —

Summary

" 31 Aug 31/94. Habits are Dirty (10 days dirty, during this month). (Patient is a Senile Paretic: Dr. P) —

Sep 1/10 Sep 1/94. Wt 132 pds. (has lost 7 pounds in weight, since admission) — P. 78. Sep 10/94. On account of alterations & improvements about to be made in these lower wards, patient, was, with several others, to day moved to B2. — Has been better in his habits, this month — appetite fairly good; bowels irregular.

Peter Johnson #2

1894

Sep 30 Sep 30/94. During last 20 nights, patient has been restless & noisy during about 1/2 of them, (for from 5 to 6 hours in each & sometimes, all night). Appetite has been only fair; bowels apparently more regular. He sits in one place, most of the time — talks incoherently, he has to be dressed & undressed; is entirely incapable of attending to himself — habits dirty & filthy

Oct 1/94 Oct 1/94. Wt 135 1/2 pds. — Pulse 80. Oct 5/94. Has been noisy & restless, for from 5 to 7 hours, on each of the nights of the 12th 14th 15th & 23d inst; sleeping only 3 to 7 hours, in each of them. —

" 31 Oct 31/94. No special Change to note. Habits still dirty & filthy (was 5 Days dirty, during month)

Nov 1/30 Nov 1/94 — Wt 136 pds. Pulse 76. Nov 30/94. Has been noisy & restless, for about 5 hours, on almost every night, this month — Appetite good; bowels apparently regular — Behavior is quiet; he sits in one place almost all the time; cannot get around very well — Does not speak to anyone — Inclined to be rather filthy in habits — (Was Dirty 1 Day, during Month).

Dec 1 Dec 1/94. Wt 134 1/2 pds. (Pulse 83.

" 2/31 Dec 2/94. Ordered to bed today. Dec 31/94 During last 10 nights, he has been restless, sometimes noisy & destructive, sleeping only about 4 hours, in each — Still confined to bed — Appetite good; bowels regular — Does not talk to any one; will endeavor to answer questions. Habits dirty — wets the floor —

1895 Jan 2 (Number of Days Dirty, during month, 30). Jany 2/95. Wt 118 pds (in bed) — This shows some loss.

" 4 Pulse 88 — Jany 4/95 Transferred to D Infirmary ward. Is quite weak and also sore — Does not

" 9 walk but to bed — Jan 9/95. Has been sleeping only about 4 hours, nightly — appetite good — He is filthy in habits; soils room and bedding — appears quite dull and stupid, to day —

" 22 Jany 22/95 Has been sleeping of late, quite well. Also eats fairly well. Bowels are regular —

" 31 Jan 31/95. Continues to sleep & rest well — Bowels occasionally Constipated. Is still in bed —

Feby 1/15 Feb 1/95. Wt 114 pds. (Showing a loss of some 10 pounds in weight). Feb 5/95. Sleeps 6 to 8 hours, every night. Lies steadily in bed, in same Condition. Frequently habits are dirty. Appetite good.

" 28 Feb 28/95. Still confined to bed. Is quite weak — Looks well; eats well; frequently soils room —

Mar 1/5 Mar 1/95. Wt 132 1/2 pds. (Has regained his lost flesh). Mar 5/95. Patient lies in the same condition, day after Day; habits filthy — He soils bed & his room, frequently —

" 12 Mar 12/95. Sleeps 5 to 8 hours, every night — Lies in bed, very quietly — appetite good and

" 31 bowels regular. Mar 31/95. Eats & sleeps well. Lies in bed, in same condition, day after day —

Apl 15 Apl 15/95 Restless at night, but usually sleeping 6 hours, in each. Lies steadily in bed, very quietly. Appetite poor; bowels regular. Habits are filthy & he soils his room frequently.

" 30 Apl 30/95. Lies steadily in bed; sleeps well of late. Appetite poor. He appears failing, of late.

May 3/6 May 3/95. Wt 118 pds. May 6/95. Has been refusing food, quite frequently, the past 3 days.

" 8/15 May 8/95. Habits filthy; urinates on floor, Continually. May 15/95. Lies quietly in bed; soils his

" 31 bedding frequently. Eats very poorly & occasionally refuses meals. May 31/95 Sleeps well, at night Has been refusing food less frequently, of late. Lies steadily & quietly in his bed.

June 3/9 June 3/95 Wt 125 pds. (Has lost quite markedly in flesh). June 9/95. Has been noisy & restless, some nights & sleeping very poorly. Has also refused meals,

" 10 quite often. June 10/95. Patient has bed-sores on hips. Appetite poor: bowels regular.

" 17 June 17/95. Is growing steadily worse, June 14/95. Is steadily failing. Bed sores on

" 14/15 hips do not improve any. June 15/95. Lies very quietly: does not get out of bed — does not Complain of pain in legs or thigh (Injured knee 6). Eats very poorly. —

1895

- Peter Johnson - #3

June 19 June 19/95. Sleeping better, the past 2 nights. Is on regular & extra Diet. Given Sponge-bath
" 20 and hips bathed, as usual, with alcohol. June 20/95. Is given frequent Sponge-baths
" 21 June 21/95. Bowels move daily. Patient lies continually in bed, in a helpless condition.
Any movement causing pain in hip & leg. Hips bathed frequently with alcohol. Is failing
" 23 June 23/95. Patient's Stomach seems swollen or bloated. Bedsores are getting worse -
" 25 June 25/95. Restless at night & sleeps very poorly. Also eats very poorly. Patient is quite low
" 26/28 this Am & steadily failing - June 26/95. Breathes with difficulty, at times. June 27/95. Is very
" 30 low & rapidly failing: bowels move frequently of late. June 30/95. Still in bed & failing.
July 1/3 July 1/95. Bowels move several times daily. July 3/95. Bedsores look very bad, to-day.
" 4 Patient has a very offensive odor about him. July 4/95. Refused all nourishment to-day.
" 5 Lies in a stupor & is very low. July 5/95. Very low, this Am & rapidly failing. -
8 Am. Pulse rapid & thread like: respiration labored. Bowels moved freely. Is sinking
quite rapidly - 9.15 Am. Died at this hour - (See attached nurses' record).

= Died =