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

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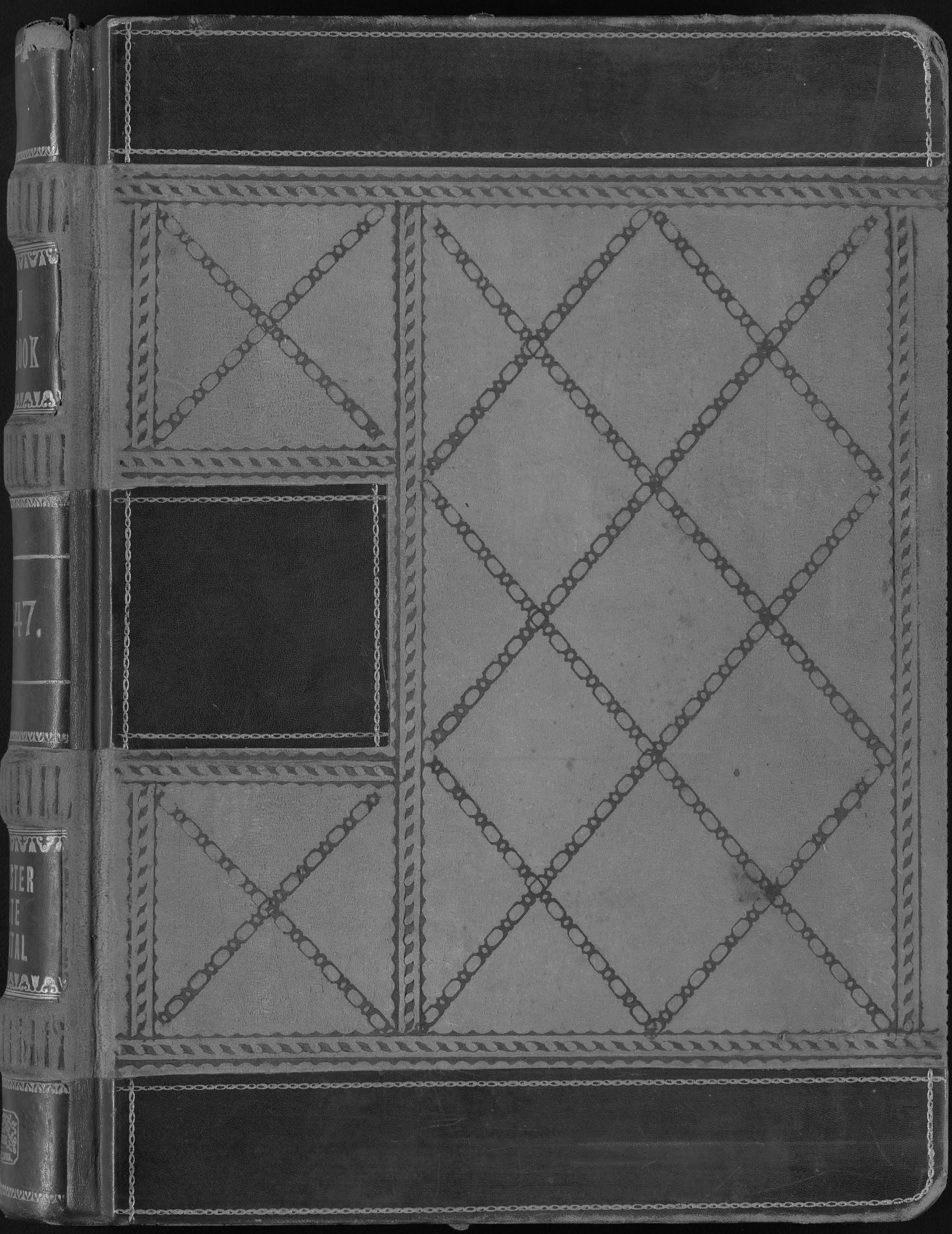
Version 3
August 20, 2018



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Respectfully,

Egbert Gideon & Chambers.

A
B
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Ennnd	Gustave	121
Ellerbush	Henry	221
Elmstrom	Robert	321

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Fontaine	Medora	137

Gripp	Henry	81	
Goldstein	Jacob	129	
Goyette	Felix	189	
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Haffner	Frank	33	
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Heimer	Nick	365	
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Liebhaber	Joseph	25	
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Rondeau	Frank	317	
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Van Vliet	Harlow	381	(from State Soldiers Home)

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Young Henry G.	349

Personal and Medical History of

Personal and Medical History of Christian Bauer.

Whole No. 5588

Residence, Faribault, Minnesota.

Date Admission, June 8th 1900.

Admitted by Dr. E. J. Wanous hour, 3.30 P.M.

How Sent, James Hunter & Sept. Rice Co.

Sex, male Age, 70

Civil Condition, married

Children, four Age Youngest Child,

Occupation, Day laborer.

Degree Education, Common school.

Profession of Religion, Catholic.

Habits, uses bow moderately: tobacco to excess.

Nativity, Germany. (Parents bore there also)

Physicians Committing, A. A. Dodge & J. S. Seeley.

Correspondents,

No. for Year, 218.

Insane Relatives, None known.

Cause Exciting, Sunstroke.

Cause Predisposing, Previous attacks.

Form, Senile Dementia

Accompanying Bodily Disorder,

Suicidal or not, Not.

Date of this Attack, About 10 days ago.

Duration, Has had attacks at intervals for 8 yrs.

No. of Attack, many.

No. of Admission, 1st

Age First Attack, About 62 yrs.

Time of Leaving, 4th January 1901

Time in Hospital, 6 mos. 27 Days

Result, Discharged, Recovered

apl 30/1901.

Examination on Admission by Dr. Wanous. *Date of* June, 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish.

MEMORY, Past Events, Impaired.

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct.

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects,

Has spells of forgetfulness.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead.

Paternal Relatives, no history of insanity.

Mother, dead

Maternal Relatives, no history of insanity

5 Brothers and Sisters, all well - 3 children well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Sunstroke

HABITS, Drinking, moderate and Smoking, excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Laborer.

Detail Date, Duration, and Character of Previous Attack, if any,

for eight years has had intervals of unconsciousness.

Sleep, fair Appetite, good Bowels, regular

Personal and Medical History of Christian Bauer.

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8 PRESENT WEIGHT, 121½ USUAL WEIGHT, NUTRITION, poorly nourished

WOUNDS, Abnormalities, Curvature of spine - depressed bulging of chest Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, dry coating.

PUPILS, Equality, Equal. Size, normal Response to Light, normal Accommodation, normal.

SIGHT, fair

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, Legs, Grasp,

TREMORS, Hands, marked Tongue, Facial Muscles, General,

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irritable.

Strength, Sounds, 1st sound very loud.

Size, normal.

Apex Beat, displaced downward + out

Murmurs, none noted

ARTERIES,

Sclerotic.

LUNGS,

Chest symmetrical
Expansion poor
Breath sounds harsh.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is quite clear through examination but has spells of marked loss of memory: is confused & does not answer rationally. Denies specific trouble tho has suspicious ideas. Physically is poorly nourished & there is a general sluggishness of organs -

Personal and Medical History of Christian Bauer.

1900.

This patient was brought here by Sheriff Gw. Moore attended by J.B. Thompson in poor physical condition, with the following history:-
No information concerning consanguinity; no heredity known: Patient uses beer moderately, tobacco to excess: his parents moderate drinkers. Patient's first attack occurred eight years ago & he has had many since, of several hours duration: About seven years ago was examined & discharged. First symptoms of this present attack occurred ten days ago, when he threw himself out of bed screaming & striking floor. this lasted about 15 hours. Disease appears increasing: is variable: tears clothing & uses bad language: Now does not know where he is, keeps asking until he grows violent & screams: At these times is disposed to injure anyone coming near him: Habits filthy & destructive: Before accession of disease was very even-tempered, says had a sunstroke at one time: No confinement nor restraint employed. Has been treated by several Physicians. No further facts noted on personal examination. On admission put upon Infirmary Diet. (G.H.H. Rpt.
Complexion dark: hair brown: eyes brown: skin hot & dry: Is clean: 9 lower teeth 1 upper also upper plate: Behavior quiet: Has delusions)

June 8 Received on T.W. & put to bed: has large bed-sore at base of Spine: feeble and somewhat
20/30 demented. June 10. No special change to note. June 30. Is somewhat weaker, physically.
July 31 but mind seems more clear. July 31. Patient seems to be making some improvement.
Aug 1 Ordered: Has bed sore at spine. Sept 5. Wt 124#. Sept 6. given clothes. Nov 20. Transferred to A 4
Dec 1/31 Wt 143#. Dec 30. Patient seems quite improved. Is neat & clean. Assists some on ward.
1901
Jan 1 Patient sent home: was improved, both mentally and physically.

Discharged

Personal and Medical History of

Personal and Medical History of Chas. A. Rysdale

Whole No. 5589

Residence, St. Paul. Minn

Resident of State + County at least two yrs.

Date Admission, June 11th, 1900

Admitted by Dr. C. E. Chapple hour, 7 pm

How Sent, Henry Gallick Court Room. Ramsey Co.

Sex, male Age, 51

Civil Condition, married

Children, Two Age Youngest Child,

Occupation, Hotel keeper

Degree Education, Is educated

Profession of Religion, —

Habits, Not known as to intemperance

Nativity, Canada. Parents also

Physicians Committing, John J. Rogers + C. Eugene Riggs

Correspondents, Mrs C.A. Rysdale (wife) Hotel Fey, 33 E 7th St. St Paul

3/27/1901 Wm J. McMurran, St Paul appt'd Guardian in place of Dr McDonald resgd.
pg 6 of 9

No. for Year, 219

Insane Relatives, not known

Cause Exciting, Syphilis

Cause Predisposing,

Form, Syphilitic Insanity

Accompanying Bodily Disorder, Syphilis

Suicidal or not, not Suicidal (recent)

Date of this Attack, 2 mos. ago

Duration, 2 mos.

No. of Attack, 1st

No. of Admission, 1st (Ten)

Age First Attack, 51 years.

Time of Leaving, Mar 6th 1901

Time in Hospital, 8 mos 23 ds

Result, Discharged May 1/1901 Improved

Examination on Admission by Dr. Wasson *Date of* June - 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quick + confused.

MEMORY, Past Events, poor

Recent Events, Special Subjects, ds.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted.

DELUSIONS, Systematized, grandiose Transitory,

Special Subjects, investments, wealth etc.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, 2 mos.

ONSET, Gradual or Sudden, gradual.

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead - Brights.

Paternal Relatives, no history of insanity.

Mother, dead - Consumption.

Maternal Relatives, no history of insanity.

Brothers and Sisters, Well. 2 children - Well.

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

Syphilis - Lumbago(?) Oedema of extremities

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS, No.

OCCUPATION, Healthy or not, Hotel keeper

Detail Date, Duration, and Character of Previous Attack, if any,

no.

Sleep, good Appetite, good Bowels, regular

ST. PAUL DISPATCH

IT'S IN A MIX-UP

THE OWNERSHIP OF THE HOTEL FEY AND ITS OLD PROPRIETOR.

HIS RETURN UNEXPECTED.

Guardianship Proceedings While Rysdale Was in the State Asylum —Nancy D Rysdale and N. D. Green

3/3/01 Dispatch

Charles A. Rysdale, who was paroled from the Rochester insane asylum last week, has sought legal advice as to the course he should pursue to secure possession of property of which he was the owner when committed to the asylum.

When Rysdale was sent to the asylum in June last he was the proprietor and owner of the Fey hotel, Cedar and Seventh. On his return to St. Paul, which was unexpected, he finds, so far as the records show, that his guardian has a note of N. D. Green for $750, which represents all of his property.

The records of the probate court show that application was made to the court May 16, 1900, for the appointment of a guardian for Rysdale. The application was made by Benton O. Allen, and sets forth that Rysdale owned the Fey hotel and contents and that the property was valued at $1,200.

W. H. McDonald, an attorney, was appointed guardian, and the bond of the guardian fixed at $2,000. In the order for letters it is set out that Nancy D. Rysdale was the wife of Charles A. Rysdale.

June 9 information of insanity was filed against Rysdale by his guardian, W. H. McDonald, and two days later, after a hearing, Court Commissioner Gallick committed him to the asylum.

June 20 an inventory filed in the proceedings shows Nancy D. Green as the owner of a half interest in the Fey hotel, and in possession of the property.

Aug. 22 the guardian of Rysdale filed a petition in the probate court setting forth that the lease of the hotel was about to expire, and asking permission to sell either at public or private sale the half interests in the property owned by his ward.

The order was issued, but subsequent transactions do not appear of record in the probate court files.

The sale of the half interest asked for by the guardian of Rysdale, however, was made, and on Aug. 24 there was filed in the city clerk's office a chattel mortgage, given by N. D. Green to W. H. McDonald, guardian for Rysdale, on the property and fixtures in the Fey hotel. The mortgage was given to secure the payment of a note by N. D. Green for $750, dated Aug. 22, due in one year at 7 per cent.

Rysdale, on his return to St. Paul, finds N. D. Green in possession of the property, and also the lessor of the building in which the hotel is located. It is this state of affairs which has caused Rysdale to seek legal advice to find out just where he stands.

Friends of Rysdale state that Attorney William L. Kelly had been retained by Rysdale, but when seen he refused to affirm or deny it.

Rysdale could not be located, but intimate friends say that Nancy D. Rysdale, mentioned in the guardianship proceedings as the wife of Rysdale, is the same person, who, as N. D. Green, purchased from Rysdale's guardian the half interest in the hotel and gave the note for $750.

REVIEWED AND DENIED.

New Trial in D. Eisen-

...cal History of

PHYSICAL CHARACTERISTICS.

...NT WEIGHT, 181 lbs USUAL WEIGHT, NUTRITION, fairly well nourished

...e veins on right leg. Condition of Skin, anaemic

...ovement, Coated - sluggish

Size, Normal Response to Light, normal Accommodation, fair.

...ilis, or other troubles,

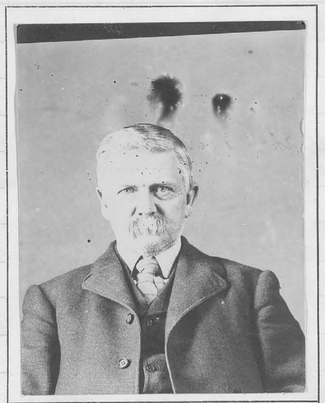
...ination Legs, ds. Grasp,

Tongue, Facial Muscles, General,

light - exaggerated. Other Reflexes,

Hesitating, Slow,

Sensibility, normal.



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

...tity, Sp. g. Reaction, Color and Appearance,

Sugar,

...NATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very talkative. Has grandiose ideas; is continually talking about great undertakings he is about to go into. Shows speech + other motor disturbances indicative of General Paresis.
Physical condition good excepting varicose veins of legs.

Personal and Medical History of Chas. A. Rysdale

Whole No. 5589

Residence, St. Paul. Minn

Resident of State + County at least ten yrs.

Date Admission, June 11th, 1900

Admitted by Dr. C. E. Applebee hour, 7 pm

How Sent, Henry Gallick Court Comm. Ramsey Co.

Sex, male Age, 51

Civil Condition, married

Children, Two Age Youngest Child,

Occupation, Hotel Keeper

Degree Education, Is educated

Profession of Religion, —

Habits, Not known as to intemperance

Nativity, Canada. Parents also

Physicians Committing, John J. Rogers + C. Eugene Riggs

Correspondents, Mrs C.A. Rysdale Hotel Ivy, 33 E 7th St St Paul

3/27/1901 Wm J. McMurran (wife) St Paul appt Guardian in place of Mr McDonald resgd

No. for Year, 219

Insane Relatives, not known

Cause Exciting, Syphilis

Cause Predisposing,

Form, Asyphobetic Insanity

Accompanying Bodily Disorder, Syphilis

Suicidal or not, not Suicidal (now)

Date of this Attack, 2 mos. ago

Duration, 2 mos.

No. of Attack, 1 st

No. of Admission, 1 st Cent

Age First Attack, 51 years.

Time of Leaving, Mar 6th 1901

Time in Hospital, 8 mos 23 ds

Result, Discha Mar 6/1901 Improved

Examination on Admission by Dr. Wilcox *Date of* June - 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quick + confused.

MEMORY, Past Events, poor

Recent Events, Special Subjects, ds.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

exalted.

DELUSIONS, Systematized, grandiose Transitory,

Special Subjects, investments, wealth etc.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, 2 mos.

ONSET, Gradual or Sudden, gradual.

(Question concerning Insanity, Consanguinity, Epilepsy, HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead - Brights.

Paternal Relatives, no history of insanity.

Mother, dead - Consumption.

Maternal Relatives, no history of insanity.

Brothers and Sisters, Well. 2 children - Well.

(especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).

Syphilis - Lumbago(?) Oedema of extremities

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS, No.

OCCUPATION, Healthy or not, Hotel keeper

Detail Date, Duration, and Character of Previous Attack, if any,

no.

Sleep, good Appetite, good Bowels, regular

The Contented Line
ST. PAUL DISPATCH.

C. A. Rysdale Attempts Suicide and Is Committed to Rochester.

ORDERED TO ASYLUM.

Charles Rysdale Committed — Attempted Suicide in Jail.

Charles A. Rysdale was today examined for insanity and committed to Rochester. Rysdale is 51 years of age, and the former proprietor of the Hotel Fey, East Seventh street.

For the past few days Rysdale has been very violent at the county jail, and it was deemed best not to attempt to bring him into court during the examination. Yesterday he cut lose with a spittoon, which he hurled at the head of the turnkey. Luckily his aim was bad. Later he tried to choke himself, but was caught in the act. Rysdale has since worn irons on his wrists and ankles.

He has a delusion that he is immensely wealthy, the provoking cause being a blood disorder of long standing.

WIFE CANNOT FIND HIM

St Paul Pioneer Press Mar 11/1901

HUSBAND RETURNS TO ST. PAUL.

C. A. Risdale Released From Rochester Hospital—Suit Involving His Property to Be Instituted.

Charles A. Risdale, the former proprietor of the Fey hotel at Cedar and Seventh streets, was released on parole by Dr. Kilbourne from the Rochester hospital last Wednesday, and his wife is at a loss to know what has become of him. Mrs. Risdale, who has been in charge of the hotel, says that she has not seen her husband and is anxious to find out where he is.

W. H. McDonald, who is Risdale's guardian, says that he obtained the parole. He asserts that his ward's interest in the hotel has been transferred since he was sent to the asylum. William Louis Kelly, Jr., has been retained to look after the interest of Mr. Risdale. Both lawyers say that Mr. Risdale is capable of taking care of his own business.

The case, it is claimed, will present some interesting features when it is taken into the court.

Friends of Mr. Risdale vouch for the statement that he is in the city; that he is in good health and that proceedings will be commenced in court Wednesday.

...cal History of

PHYSICAL CHARACTERISTICS.

...NT WEIGHT, 181 lbs USUAL WEIGHT, NUTRITION, fairly well nourished

...e veins on right leg. Condition of Skin, anaemic

...ovement, Coated - sluggish.

Size, Normal Response to Light, normal Accommodation, fair.

...ilis, or other troubles,

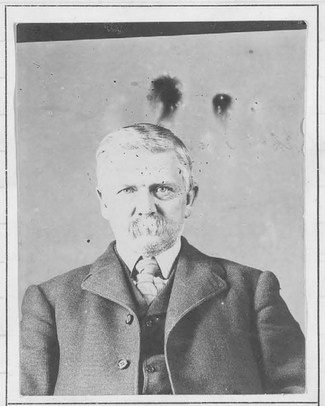
...incoordination Legs, ds. Grasp,

Tongue, Facial Muscles, General,

..., slight - exaggerated. Other Reflexes,

...rred, Hesitating, Slow,

...N, Sensibility, normal.



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

...egular

...eakened

...al

...al.

...oted

...metrical

Expansion fair

Breath sounds normal.

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very talkative. Has grandiose ideas; is continually talking about great undertakings he is about to go into. Shows speech + other motor disturbances indicative of General Paresis.

Physical condition good excepting varicose veins of legs.

Personal and Medical History of Chas. A. Rysdale

Whole No. 5589

Residence, St. Paul. Minn

Resident of State + County at least ten yrs.

Date Admission, June 11th, 1900

Admitted by Dr. C. E. Chapple hour, 7 pm

How Sent, Henry Gallick Court from Ramsey Co.

Sex, male Age, 51

Civil Condition, married

Children, Two Age Youngest Child,

Occupation, Hotel keeper

Degree Education, Is educated

Profession of Religion, —

Habits, Not known as to intemperance

Nativity, Canada. Parents also

Physicians Committing, John J. Rogers + C. Eugene Riggs

Correspondents, Mrs C.A. Rysdale Hotel Ivy, 33 E 7th St. St Paul

3/27/1901 Wm J. McMurran, St Paul appt Guardian (wife)
pg of p in place of Mr McDonald resgd

No. for Year, 219

Insane Relatives, not known

Cause Exciting, Syphilis

Cause Predisposing,

Form, Syphilitic Insanity

Accompanying Bodily Disorder, Syphilis

Suicidal or not, not Suicidal

Date of this Attack, 2 mos. (about)

Duration, 2 mos.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 51 yrs

Time of Leaving, Mar 6

Time in Hospital, 8 mos

Result, Discharged Improved

Examination on Admission by Dr. Wasson Date o

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quick + confused.

MEMORY, Past Events, fair

Recent Events, Special Subjects, do.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, fair.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted.

DELUSIONS, Systematized, grandiose Transitory,

Special Subjects, investments, wealth etc.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORI

LENGTH INVASION, 2 mo

ONSET, Gradual or Sudden, gradual.

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead - Brights.

Paternal Relatives, no history of insanity.

Mother, dead - Consumption.

Maternal Relatives, no history of insanity.

Brothers and Sisters, Well. 2 children - Well

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

Syphilis - Lumbago(?) Oedema of extremities

HABITS, Drinking and Smoking,

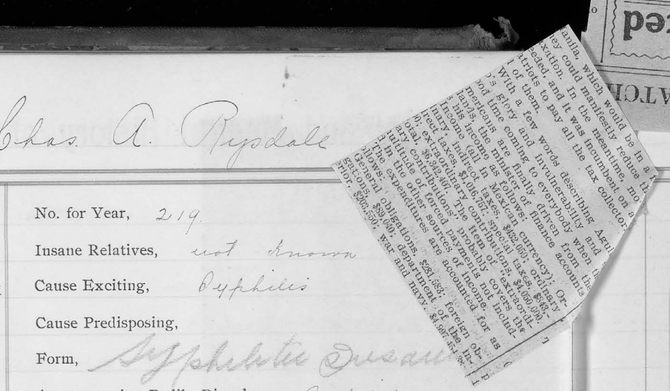
HEADACHES, VERTIGO, OR CONVULSIONS, No.

OCCUPATION, Healthy or not, Hotel keeper

Detail Date, Duration, and Character of Previous Attack, if any,

no.

Sleep, good Appetite, good Bowels, regular



ST. PAUL DISPATCH

The Contented

NT.

C. A. Rysdale Attempts Suicide and Is Committed to Rochester.

Charles A. Rysdale was committed to the state hospital for the insane at Rochester yesterday by the probate court. Mr. Rysdale is fifty-one years old and for several years has been the proprietor of the Hotel Fey on Seventh street. A few days ago he became violent and Sunday he was taken to the county jail. During the afternoon he made an attack on Jailer Herges. He was placed in a cell after a sharp struggle in which the jailer was considerably bruised.

An hour later the jailer was attracted by a choking sound and found that Rysdale had attempted suicide by hanging. He had improvised a cord from the lining of his clothing and was nearly lifeless when discovered. He was closely watched during the night.

Yesterday morning he was so violent it was deemed unsafe to take him into the probate court. The examining physicians, C. E. Riggs and John T. Rogers, were taken to the jail. He was taken to Rochester yesterday afternoon. Rysdale's delusion is that he is possessed of untold wealth which he restrained by his enemies from using.

fill him with bad whisky.—Chicago Times-Herald.

GEN. GREENE'S TOMB.

Recollections Awakened by the Recent Discovery in Georgia.

As the telegraph has already announced, the last resting place of the remains of Gen. Nathaniel Greene, one of the great heroes of the Revolution, has at last been discovered. For many long years the location of the grave of the general has been a deep mystery, to solve which there has been more or less continuous effort for several decades. For over a century the mystery apparently could not be penetrated, but a few days ago, it is claimed, a vault was opened in Savannah, Ga., and indisputable evidence found that if contained the remains of the illustrious soldier and great friend of George Washington.

The find was made through the efforts of the Rhode Island society of the Cincinnati. Dispatches from Savannah state for a week Col. Asa Bird Gardiner of New York and a local committee were at work in Colonial Park, formerly used as a cemetery, searching for some trace of the remains of the famous fighter. There were many who thought the remains would never be found, as tradition had it they had been spirited away after a public interment in 1786. However, a vault was opened which contained a plate bearing the name of Gen. Greene, and there were also found three buttons of the colonial period that are supposed to have been on the uniform of Gen. Greene when buried.

This is one of the most important discoveries of its kind made in the United

cal History of

PHYSICAL CHARACTERISTICS.

NT WEIGHT, 181# USUAL WEIGHT, NUTRITION, fairly well nourished

re veins on right leg. Condition of Skin, anaemic

ovement, Coated - sluggish.

Size, Normal Response to Light, normal Accommodation, fair.

re

ilis, or other troubles,

ire-ordination Legs, do. Grasp,

Tongue, Facial Muscles, General,

PATELLAR REFLEX, slight - exaggerated. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, normal.

HEART, Regularity, regular

Strength, Sounds, weakened

Size, normal

Apex Beat, normal.

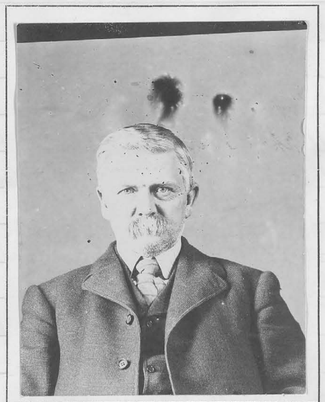
Murmurs, None noted

ARTERIES,

flabby.

LUNGS,

Chest symmetrical
Expansion fair
Breath sounds normal.



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very talkative. Has grandiose ideas; is continually talking about great undertakings he is about to go into. Shows speech + other motor disturbances indicative of General Paresis.
Physical condition good excepting varicose veins of legs.

Personal and Medical History of Chas. A. Rypdale

Whole No. 5589

Residence, St. Paul. Minn

Resident of State + County at least two yrs.

Date Admission, June 11th, 1900

Admitted by Dr. C. L. Coapple hour, 7 pm

How Sent, Henry Gallick Court from Ramsey Co.

Sex, male Age, 51

Civil Condition, married

Children, Two Age Youngest Child,

Occupation, Hotel keeper

Degree Education, Is reduced

Profession of Religion, —

Habits, Not known as to intemperance

Nativity, Canada. Parents also

Physicians Committing, John J. Rogers + C. Eugene Riggs

Correspondents, Mrs C. Rypdale Hotel Ivy, 33 6th St. St Paul

3/27/1901 Wm J. McMurran, St Paul apptd Guardian (wife)
pg 94 in place of Wm McDonald resgd.

No. for Year, 219

Insane Relatives, not known

Cause Exciting, Syphilis

Cause Predisposing,

Form, Asyphelitic Dement

Accompanying Bodily Disorder, Syphilis

Suicidal or not, not Suicidal

Date of this Attack, about

Duration,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving,

Time in Hospital,

Result, Improved

Examination on Admission by Dr. Watsons

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quick + confused.

MEMORY, Past Events, poor

Recent Events, Special Subjects, do.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted.

DELUSIONS, Systematized, grandiose Transitory,

Special Subjects, investments, wealth etc.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

LENGTH INVAS

ONSET, Gradual (

(Quick or Slow, Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead - Brights.

Paternal Relatives, no history of insanity.

Mother, dead - Consumption.

Maternal Relatives, no history of insanity.

Brothers and Sisters, Well. 2 children - Well.

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

Syphilis - Lumbago(?) Oedema of extremities

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS, No.

OCCUPATION, Healthy or not, Hotel keeper

Detail Date, Duration, and Character of Previous Attack, if any,

N.D.

Sleep, good Appetite, good Bowels, regular

fill him with bad whisky.—Chicago Times-Herald.

GEN. GREENE'S TOMB.

Recollections Awakened by the Recent Discovery in Georgia.

As the telegraph has already announced, the last resting place of the remains of Gen. Nathaniel Greene, one of the great heroes of the Revolution, has at last been discovered. For many long years the location of the grave of the general has been a deep mystery, to solve which there has been more or less continuous effort for several decades. For over a century the mystery apparently could not be penetrated, but a few days ago, it is claimed, a vault was opened in Savannah, Ga., and indisputable evidence found that if contained the remains of the illustrious soldier and great friend of George Washington.

The find was made through the efforts of the Rhode Island society of the Cincinnati. Dispatches from Savannah state for a week Col. Asa Bird Gardiner of New York and a local committee were at work in Colonial Park, formerly used as a cemetery, searching for some trace of the remains of the famous fighter. There were many who thought the remains would never be found, as tradition had it they had been spirited away after a public interment in 1786. However, a vault was opened which contained a plate bearing the name of Gen. Greene, and there were also found three buttons of the colonial period that are supposed to have been on the uniform of Gen. Greene when buried.

This is one of the most important discoveries of its kind made in the United

...nd Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft PRESENT WEIGHT, 181 # USUAL WEIGHT, NUTRITION, fairly well nourished

WOUNDS, Abnormalities, Varicose veins on right leg. Condition of Skin, anaemic

TONGUE, Coatings, Promptness of Movement, Coated - sluggish.

PUPILS, Equality, Equal Size, Normal Response to Light, normal Accommodation, fair.

SIGHT, distant vision

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good.

COORDINATION, Arms, Slight incoordination Legs, do. Grasp,

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, slight - exaggerated. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, normal.

HEART, Regularity, regular

Strength, Sounds, weakened

Size, normal

Apex Beat, normal.

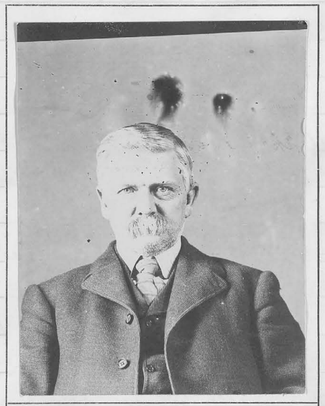
Murmurs, None noted

ARTERIES,

flabby.

LUNGS,

Chest symmetrical
Expansion fair
Breath sounds normal.



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good.

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very talkative. Has grandiose ideas; is continually talking about great undertakings he is about to go into. Shows speech + other motor disturbances indicative of General Paresis.
Physical condition good excepting varicose veins of legs.

Personal and Medical History of Chas. A. Rysdale.

1906

This patient was brought here by Deputy Sheriff Hanson, attended by J. O'Riley, in good physical condition, with the following history:- Nothing known as to history of intemperance, consanguinity or heredity. First symptoms of insanity manifested about two months ago by grandiose delusions. Disease appears increasing; not periodic=ous rational intervals: derangement now manifested by delusions of great wealth: not suicidal: Is disposed to injure others & is filthy & destructive Habits: previous peculiarity- became easily angry: Has syphilis: was confined three weeks in St. Luke's Hospital & received anti syphilitic treatment: Supposed cause of disease is Syphilis: On personal examination: nothing further obtained: On admission put upon C' East (P.P.N. Pt.) Complexion light: hair light brown: eyes blue: condition of skin good: Vaccination mark on right arm: 2 on front side of right thigh 2½ in. long: 2 small scars on front of lower right leg: enlarged veins on lower right leg: clean: Has six teeth in lower jaw: none in upper jaw. Behavior good:—

June 11 Examined by F.B. Allen. June 11. Received on C'. Patient is destructive to bed-clothing -
13 has delusions of wealth - June 13. Picks up rocks, while out doors & carries them in clothing
14 Concealed horse-shoe & club under clothing, while out for exercise. June 15. Visited by wife.
16/17 June 16. Barred door of room - June 19. Writes letters & sends telegrams for large sums of money -
24 Is pugnacious: very destructive. June 28. Attempted to escape: causes a great deal of trouble.
29 Conspires with other patients to do harm to nurses. July 1. Received discoloration of eye in
July 1 scuffle with patient Knight. July 13. Again barred his door - July 20. Again barred door;
13/20 placed bed against door & squeezed himself between bed & radiator: Sings and whistles, at
21 night. July 22 Barred door, several times, through the day: noticed to be lame: Examined by physician and found badly bruised both on back & chest (Chest were black & blue) - was
Aug 1 transferred to IW. Aug 1. Expectorates bloody Sputum: T 100. P 80. R 30: has sore on neck: put in
1/13 muff, to prevent his scratching. Aug 2. Visited by wife. Aug 13. Out of muff, to-day. -
Still slight fever. Is on regular diet. Patient gotten up: still coughs & expectorates a little.
14/21 Transferred to C'. Aug 31. Is very troublesome and violent at times: very ill-tempered: has
Sep 30 delusions of great wealth & is incoherent in Speech. Sep 30. Very little change during month.
Oct 10/31 Conceals two large rocks in his clothing. Oct 31. Still troublesome: very little change. —
Nov 1/10/30 Nov 2. Wt 156#. Nov 10. Visited by wife & friend - Nov 30. Still but little change: continues troublesome: purloins knives & spoons from dining-room: Eats from a tray: tries to elope-

1907 physical condition improved: Converses freely, but has delusions in regard to his wife. -
Jan 31 Condition about same. Still has enlarged ideas about making money. Is very anxious
Feb to go home. Behavior not quite so troublesome. Feb 28. Wt 178#. - Mar 6. Has been
Mar 6 very well-behaved of late: habits tidy: takes part in games. Talks sensibly on ordinary subjects. Does not appear normal, however: element of dementia present. Conversation also shows slight-
Exaltation. "Thinks he can make a great deal of money". Was sent home to-day.

Discharged

Personal and Medical History of

Personal and Medical History of Charles Olson #2

Whole No. 55-90

Residence, Weaver, Wabasha Co.

Resident of State & County forty years.

Date Admission, June 11-1900

Admitted by Dr. C. Z. Warren hour, 9 pm.

How Sent, Malcolm Kennedy, J. of P. Wabasha Co.

Sex, male Age, 71

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Can read & write

Profession of Religion, Christian Lutheran

Habits, not intemperate

Nativity, Norway - parents also

Physicians Committing, N. H. Lincoln & S. P. Jones.

Correspondents, Wm. Olson (nephew) Weaver, Minn. (on farm)

No. for Year, 220

Insane Relatives, Has insane relatives

Cause Exciting,

Cause Predisposing,

Form, Senile Dementia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not Suicidal

Date of this Attack, 5 years ago

Duration, 5 years.

No. of Attack, 2nd

No. of Admission, 1st

Age First Attack, 49

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Warren. *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Somewhat confused.

MEMORY, Past Events, Poor.

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive, poor.

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

exalted - indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, Patient very talkative on religious subjects.

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Nothing known.

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

no.

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, laborer.

Detail Date, Duration, and Character of Previous Attack, if any,

first attack.

Sleep, good Appetite, do Bowels, do

47/9

M Charles Olson

Copy of Order for Hearing Petition of William Olson

for appointment of

as guardian for

said Charles Olson insane; served and

service admitted August 29 1900.

(Papers filed with commitment papers.)

RACTERISTICS.

USUAL WEIGHT, NUTRITION, poor.

Condition of Skin, brought.

nse to Light, normal Accommodation, do.

HEARING, good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, slight Tongue, do. Facial Muscles, General,

PATELLAR REFLEX, sluggish. Other Reflexes,

ARTICULATION, Slurred, slurred Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal.

Strength, Sounds, "

Size, "

Apex Beat, "

Murmurs, None noted.

ARTERIES,

Normal

LUNGS,

Chest symmetrical.
Expansion good.
B. sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good.

BOWELS, Present Condition, Constipated.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is of low mental development. Has been living alone. is rather confused & shows loss of memory of both past & recent events. Is very religious. Condition has been present for the last eight years.

Personal and Medical History of Charles Ols

Whole No. 5590

Residence, Weaver, Wabasha Co.

Resident of State & County forty years.

Date Admission, June 11- 1900

Admitted by Dr. T. Z. Warnow hour, 9 p.m.

How Sent, Malcolm Kennedy, J. of P. Wabasha Co.

Sex, male Age, 71

Civil Condition, Single

Children, – Age Youngest Child, –

Occupation, Farmer

Degree Education, Can read & write

Profession of Religion, Christian Lutheran

Habits, not intemperate

Nativity, Norway - parents also

Physicians Committing, W. H. Lincoln & S.P. Jones.

Correspondents, Wm. Olson (nephew) Weaver, Minn. (on farm)

No. for Year, 220

Insane Relatives, Has mania

Cause Exciting,

Cause Predisposing,

Form, Senile Dementia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not suicidal

Date of this Attack, 5 years ago

Duration, 5 years.

No. of Attack, 2nd

No. of Admission, 1st

Age First Attack, 49

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Warnow *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Somewhat confused.

MEMORY, Past Events, poor

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive, poor.

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

exalted - indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, Patient very talkative on religious subjects.

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Nothing known.

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

no.

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, laborer.

Detail Date, Duration, and Character of Previous Attack, if any,

Past year.

Sleep, good Appetite, do Bowels, do

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 5½ PRESENT WEIGHT, 151½ USUAL WEIGHT, NUTRITION, poor.

WOUNDS, Abnormalities, none. Condition of Skin, brown.

TONGUE, Coatings, Promptness of Movement, Clear

PUPILS, Equality, Equal Size, normal Response to Light, normal Accommodation, do.

SIGHT, good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, slight Tongue, do. Facial Muscles, General,

PATELLAR REFLEX, sluggish. Other Reflexes,

ARTICULATION, Slurred, slurred Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal.

Strength, Sounds, "

Size, "

Apex Beat, "

Murmurs, none noted.

ARTERIES,

Normal

LUNGS,

Chest symmetrical.
Expansion good.
B. sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is of low mental development. Has been living alone. is rather confused & shows loss of memory of both past & recent events. Is very religious. Condition has been present for the last eight years.

Personal and Medical History of Charles Olson

1900

This patient was brought here by L. L. Dickman in poor physical condition, with the following history: nothing known as to consanguinity: no history of intemperance: has insane relatives: First symptoms of insanity manifested 22 years ago, while talking on religious subjects: manifested only during conversation: First symptoms of present attacks manifested five years ago on religious subjects: disease appears increasing: not variable: no rational intervals: derangement now manifested on no particular subject: not suicidal: Is disposed to injure others & is filthy and destructive habits: previous peculiarity, - religious impressions: no severe disease or injury to head: Supposed cause of disease is heredity: Has not been confined or restrained & has received no treatment: On personal examination, - appearance self evident. On admission put upon B³ E (6th R. Rpt. Complexion dark: hair brown, eyes blue: skin dirty: vac. mark on L. arm: scars on hands, big toes; & on legs: Eruption on left shoulder & R. wrist: Has eight snags in upper & eight in lower jaw: Behavior good: Exam. by Messrs Fahey & Howe.)

June 11/99 Received on B³. Appears somewhat indifferent & confused: June 17 Sits about in one place.
19 somewhat noisy: July 6 Wt 151#. Pg6. Transferred to B¹ E. July 30. Vaccinated. —
July 31 Nothing special to report in patient's condition. Still appears confused, at times. indifferent. —
Aug 1 Wt 149#. Sept 1. Transferred to Annex: appears considerably demented and confused: talks but little: actions peculiar: habits slouchy & filthy: frequently noisy at night: has been doing a little work lately, when: no special delusions noticed. Sep 10. Transferred to D³.
Sept 1 Works in mattress-Shop: talks considerable to himself: general health fairly good. —
10 Wt 162#. Nov 30. Patient's condition shows no special change: Still noisy, at times.
Oct 31 No change. Still works in mattress-Shop: very well-behaved, but noisy & surly, at times.
Nov 1/00 (Is a case of senility): has little to say: mind appears a blank. Feby 1. Wt 151#-
Jan 31/01 Wt 137#. July 31. Still works in mattress Shop: very demented: Quiet: habits are
Feby 1 filthy. Is surly at times. Aug 1. Wt 128#: Nov 1. Wt 128#: Jany 31/02 - no change:
May habits very untidy: Quiet: works in mattress-Shop.
July 31 Feb. 1/02 Wt. 128#. Aug 1/02 Wt. 127#. Dec. 22 Trans. to
1902 D.V.R. with Erysipelas of face. Jan. 5 Recovered &
Jany 31 transferred to Annex.

1903 Jan 31. No illness except as noted above; is very demented
stubborn; dirty in habits; sometimes fights;
worked regularly in mattress shop;

Personal and Medical History of

Personal and Medical History of Joseph Chmlek.

Whole No. 5597

Residence, Freeborn Co. Poorhouse.

Date Admission, June 12' 1900.

Admitted by Dr. C. L. Chapple hour, 7 P.M.

How Sent, H. Blackmer J.of P. Freeborn Co.

Sex, male Age, 94.

Civil Condition, widowed.

Children, — Age Youngest Child,

Occupation, Wagon-maker.

Degree Education, unknown.

Profession of Religion, Roman Catholic.

Habits, unknown.

Nativity, Bohemia (Parents also born there)

Physicians Committing, A.L. Wedge & G.W. Barth.

Correspondents, address Judge of Probate for correspondent. + oedema of lungs.

No. for Year, 2 2 2.

Insane Relatives, unknown.

Cause Exciting, unknown.

Cause Predisposing, unknown.

Form, Senile Dementia

Accompanying Bodily Disorder,

Suicidal or not, not

Date of this Attack, 3 yrs ago

Duration, 3 yrs.

No. of Attack, 1 st.

No. of Admission, 1st

Age First Attack, 91 yrs.

Time of Leaving, June 24, 1900

Time in Hospital, 12 d.

Result, Died - Chronic Bronchitis

Examination on Admission by Dr. Wanous *Date of* June 21/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused - sluggish.

MEMORY, Past Events, poor

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

Mental failure.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

nothing known.

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

None known.

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, at poor farm.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, disturbed Appetite, poor Bowels, irregular

ATTEMPTED MURDER

The Father of the Glenville Murderer Commits Assault.

An attempt was made by an insane pauper at the poor house in Albert Lea Monday night to murder Mrs. I. Hazelton, the wife of the superintendent of farm. Mrs. Hazelton awoke and found Joseph Chmlek, an inmate of the poor house, with a rocking chair uplifted ready to strike her.

Mrs. Hazelton called to her husband who was in an adjoining room and he immediately went to her rescue. He took the chair from the insane man and sent him to bed.

Tuesday afternoon Chmlek was taken before Judge Blackmer where he was adjudged insane by the examining physicians and the court sent him to the insane hospital at Rochester.

Chmlek is 92 years of age. He has a violent temper. He threw stones through the windows of the house and he run away into the fields where he was captured and returned. He is very fond of Supt. Hazleton, but he insisted that no woman should remain in a house at night.

Chmlek is father of a man who killed three of his relatives near Glenville a few years ago.

Austin June 19 '1900

...d Medical History of

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor

...ies, Condition of Skin, anaemic

...romptness of Movement, Coated

...qual Size, normal Response to Light, sluggish Accommodation, sluggish

...ied.

...aint, Arcus Senilis, or other troubles,

...ied

...ms, Confined to bed. Legs, do. Grasp,

...uarked. Tongue, Facial Muscles, General,

...k, lost Other Reflexes,

...rred, Hesitating, Slow,

...ON, Sensibility,

...ecak

Size, normal

Apex Beat, "

Murmurs, None noted

ARTERIES,

Sclerotic,

LUNGS,

Chest Symmetrical

Expansion poor

B. sounds - rales over R. lung

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Irregular

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very irritable & cross at times. Has lived on poor farm. (See slip pinned attached) Condition due to senility. a beginning dement. Physical condition poor. Has severe bronchitis. Expectorates a great deal.

Personal and Medical History of Joseph.

Whole No. 5597

Residence, Freeborn Co. Poorhouse.

Date Admission, June 12, 1900.

Admitted by Dr. C. L. Chapple hour, 7 P.M.

How Sent, H. Blackmer Jap. P. Freeborn Co.

Sex, male Age, 94.

Civil Condition, widowed.

Children, — Age Youngest Child,

Occupation, wagon-maker.

Degree Education, unknown.

Profession of Religion, Roman Catholic.

Habits, unknown.

Nativity, Bohemia (Parents also born there)

Physicians Committing, A.L. Wedge & G. M. Bartk.

Correspondents, address Judge of Probate for correspondent. + oedema of lungs.

Cau

Form,

Accomp order,

Suicidal o at

Date of this Attack, 3 yrs ago

Duration, 3 yrs.

No. of Attack, 1 st.

No. of Admission, 1st

Age First Attack, 91 yrs.

Time of Leaving, June 24 1900

Time in Hospital, 12 d.

Result, Died - Chronic Bronchitis

Silks.
Printed Foulard Silk only
Printed Foulard Silks reduced to
Wash Silks reduced to
cked so high that we are o
sell them, but this reductio
Wash Goods
s Reduced to
ced to
rcales
Childrens Jackets reduce
dies Spring Jackets for
Sailor Su

Examination on Admission by Dr. Wanous *Date of* June 21/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused - sluggish.

MEMORY, Past Events, poor

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

mental failure.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

nothing known.

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

None known.

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, at poor farm.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, disturbed Appetite, poor Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor

WOUNDS, Abnormalities, Condition of Skin, anaemic

TONGUE, Coatings, Promptness of Movement, Coated

PUPILS, Equality, equal Size, normal Response to Light, sluggish Accommodation, sluggish

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Impaired

COORDINATION, Arms, Confined to bed. Legs, do. Grasp,

TREMORS, Hands, marked. Tongue, Facial Muscles, General,

PATELLAR REFLEX, lost Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, weak

Size, normal

Apex Beat, "

Murmurs, None noted

ARTERIES,

Sclerotic,

LUNGS,

Chest Symmetrical

Expansion poor

B. sounds - rales over R. lung

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Irregular

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very irritable & cross at times. Has lived on poor farm. (See slip pinned attached) Condition due to senility. a beginning dement. Physical condition poor. Has severe bronchitis: expectorates a great deal.

Personal and Medical History of Joseph Chunlet.

1900

This patient was brought here by Sheriff E.H. Ellickson attended by Ira Hazelton in fair physical condition, with the following history:- Nothing known concerning consanguinity, heredity nor intemperance: First symptoms of insanity manifested three years ago: Disease appears increasing, is variable with rational intervals: Derangement manifested on many matters: Patient disposed to injure others: Habits filthy & destructive: It is said that for many years patient has been wrong but particulars cannot be learned: No severe diseases nor injuries to head: No confinement nor restraint employed: No treatment pursued.

On personal examination talks at random, is quite excited, has delusions: attempted to kill matron of county farm the night before on account of an insane delusion:

On admission sent upon Infirmary (G.H.N. Rpt. Complexion light: eyes blue: Skin in good condition: First finger gone at second joint others stiff: Large scar on left hand: scratch on forehead & nose: a number of scabs on back: small sore left hip: both knees discolored: Varicose veins: Bruises on R. hand & wrist: Is dirty: Teeth all gone: behavior good: is quite feeble: Exam. by T.R. Gilland)

June 12/13 Received on Ward & put to bed. Is very feeble: rapid respiration- June 13. fell in closet, causing cut over forehead. June 14. fell out of bed and received cut over right Eye: Seems 14 much weaker. June 17/18/19/20/21/22/23. Catheterized. June 24. Patient Continues failing - 17/24 respiration labored. In unconscious Condition all day. Expired at 7[15] P.M. -

Died.

Personal and Medical History of

Personal and Medical History of Franklin H. Ellerbe.

Whole No. 5593.
Residence, St. Paul, Minnesota

Date Admission, June 13. 1900.
Admitted by E. J. Watsons. hour, 7 P.M.
How Sent, E. W. Bazille & Co. of P. Ramsey Co.
Sex, male Age, 30 yrs.
Civil Condition, married.
Children, 3 Age Youngest Child,
Occupation, Optician.
Degree Education, university.
Profession of Religion, not a Church member.
Habits, not intemperate.
Nativity, United States.
Physicians Committing, A. B. Ancker & H. Snow.
Correspondents, Mrs. F. E. Eldridge (2) 235 Bourne Ave. St. Paul. (wife)

No. for Year, 2 & 3.
Insane Relatives, paternal cousin.
Cause Exciting, overwork & worry.
Cause Predisposing, ?
Form, ~~Subacute Mania~~
Accompanying Bodily Disorder, nervous prostration.
Suicidal or not, yes.
Date of this Attack, about 1 yr. ago
Duration, 1 year.
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 29 yrs.
Time of Leaving, Aug 23. 1900
Time in Hospital, 2 mo. 10 d
Result, Discharged Nov. 6. 1900 Recovered.

Examination on Admission by Dr. Watsons *Date of*

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good.
Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct.

REASONING POWER, Ordinary Subjects, good.
Special Subjects,
Own Mental State, appreciates condition.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
normal.

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,
ILLUSIONS,
SUMMARY, Hysterical at times when he is confused & becomes violent.

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead. heart-trouble.
Paternal Relatives,
Mother, living - well.
Maternal Relatives,
~~Brothers~~ and Sisters, well. Children well.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Neurasthenia. appendicitis.

HABITS, Drinking and Smoking, Not to excess.
HEADACHES, VERTIGO, OR CONVULSIONS, no.
OCCUPATION, Healthy or not,
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft 3 PRESENT WEIGHT, 171# USUAL WEIGHT, NUTRITION, Poor
WOUNDS, Abnormalities, Condition of Skin, clear - reddish.
TONGUE, Coatings, Promptness of Movement, Coated.
PUPILS, Equality, equal Size, small. Response to Light, normal Accommodation, do.
SIGHT, defective - wears glasses.
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING,
COORDINATION, Arms, normal Legs, normal. Grasp,
TREMORS, Hands, Tongue, slight. Facial Muscles, General,
PATELLAR REFLEX, delayed. Other Reflexes,
ARTICULATION, Slurred, normal. Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Irregular
Strength, Sounds, weakened
Size, enlarged.
Apex Beat, down to right
Murmurs, none
ARTERIES, normal - pulse weak.
LUNGS,
Chest symmetrical
Expansion good.
B. sounds normal.

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Insomnia -
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient has a bad heredity. Comes from a family that intermarried several times both sides gives a history of insanity. Patient has suffered from neurasthenia for several years. When examined appeared quite irrational. Condition is variable.

Personal and Medical History of Franklin H. Ellerbe.

1900

This patient was brought here by Deputy Sheriff Hanson attended by A. L. Phillips in poor physical condition with the following history:- Father's family intermarried for three generations: one cousin insane: No intemperance known. First symptoms manifested about a year ago by nervous prostration: Disease appears stationary, is variable. Derangement now manifested by depression; desire to die: suspicion of friends: insomnia: Not disposed to injure anyone: Suicide attempted by starvation; swallowed 9 grs. of morphine 3 weeks ago: Neither filthy nor destructive in habits: Has been irritable & easily angered for over a year: Has had nervous prostration: Has been in C & C. Hospital since June 4 1900. & was at St. Marys for two weeks before that. Has been given rest, baths & narcotics (for information address Dr C.M. Cannon St. Auth. Park.) On personal examination is depressed, is at present perfectly rational. On admission put upon B3 E. (Gt. H. Rpt. — Complexion dark: hair black: eyes dark brown: Skin in good condition: Has a red blotch on right cheek: varicose veins on R. leg. Scars on R. cheek & left leg. Blotch on R. leg. Is clean: Two teeth gone from upper & two from lower jaw: Behavior good: Exam. by M.F. Fahey)

June 13/18 Received on B3. Apparently, a little weak, physically: talks rationally - June 18. Agreeable and
23/20 sociable: does some work on ward. June 23. Visited by relatives — June 30. Has improved June.
July 6/20 Wt 173# Pg 6. July 20 Vaccinated. July 27. Went out Camping, at Oronoco. July 31. Phy-
27/31 sical condition good: mind clear. Is rational: habits very neat & clean. Is agreeable —
Aug 10 Returned from Camp. Is on parole. Seems quite well both mentally & physically.
23 Max sent home, today.

Discharged

Personal and Medical History of

Personal and Medical History of Peter Russell.

Whole No. 5594
Residence, Washington Co, Minn.

Date Admission, June 13th 1900.
Admitted by Dr. E. J. Wamous hour, 7 P.M.
How Sent, J. J. Nelson J. of P. Washington Co.
Sex, male Age, 63 yrs.
Civil Condition, married
Children, Two Age Youngest Child,
Occupation, Carpenter.
Degree Education, Common school.
Profession of Religion, Methodist.
Habits, Nat intemperate.
Nativity, Canada. (Parents born in Scotland)
Physicians Committing, J. C. Clark + E.O.B. Freligh.
Correspondents,

No. for Year, 224.
Insane Relatives, none.
Cause Exciting, Lack of work.
Cause Predisposing, unknown.
Form, ac. Melancholia.
Accompanying Bodily Disorder, none mentioned.
Suicidal or not, yes.
Date of this Attack, unknown.
Duration, unknown.
No. of Attack, 2
No. of Admission, 1st
Age First Attack, 58 yrs.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. Wamous *Date of* June 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish.
MEMORY, Past Events, fair
Recent Events, " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.
REASONING POWER, Ordinary Subjects, poor
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
depressed
DELUSIONS, Systematized, Transitory,
Special Subjects, of persecution
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

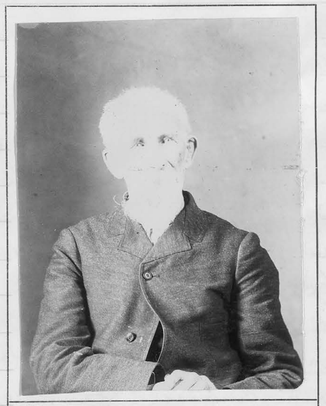
HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
(Question concerning Insanity, Consanguinity, Epilepsy, HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, dead.
Paternal Relatives, no history of insanity
Mother, dead
Maternal Relatives, no history of insanity
Brothers and Sisters, Well 2 Children Well
(especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).
None
HABITS, Drinking and Smoking, at one time.
HEADACHES, VERTIGO, OR CONVULSIONS, no.
OCCUPATION, Healthy or not, Carpenter
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, poor Appetite, poor Bowels, reg.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7¼ PRESENT WEIGHT, 176 lbs USUAL WEIGHT, NUTRITION, poor.
WOUNDS, Abnormalities, Condition of Skin, anaemic
TONGUE, Coatings, Promptness of Movement, badly coated. foul breath.
PUPILS, Equality, equal. Size, normal Response to Light, sluggish Accommodation, slow.
SIGHT, impaired.
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING,
COORDINATION, Arms, normal. Legs, normal. Grasp,
TREMORS, Hands, slight Tongue, do. Facial Muscles, General,
PATELLAR REFLEX, slow. Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, reg.
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, None noted.
ARTERIES,
LUNGS,
Chest symmetrical.
Expansion fair.
Breath sounds normal.



CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, insomnia.
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient much depressed + very melancholy Has been worrying about family affairs: Appears depressed + weak Physical condition anaemic feeble + generally sluggish.

Personal and Medical History of Peter Russell.

1900

This patient was brought here by sheriff's deputy J.H. Haines in poor physical condition, with the following history: No consanguinity nor heredity known: No history of intemperance: First symptoms noted about five years ago by melancholia: Disease appears increasing: is variable: Derangement manifested by worry; aimless movements incoherent talk: Talks continually to self: Not disposed to injure anyone: Has secreted poison & has expressed desire to take poison: No filthy nor destructive habits noted: Has always been an exceptionally kind husband & father but has worried over inability to get work: No severe diseases nor injuries to head: No confinement nor restraint employed: No treatment pursued: On personal examination talk confirmatory of melancholia: On admission put upon Infirmary E. Complexion light: Hair gray: eyes blue: several small scratches on body: Varicose veins on legs: scars on hands, top of head & back of neck: skin clean: 8 upper & 4 lower teeth: behavior good; is very nervous: Exam. by J.R. Spillane) ——— .. ———

June 13 Received on T.W.: Put to bed: Patient is nervous, confused: hesitates and stammers when answering
19 questions: complains of being ill-treated by wife. June 19. Given clothes and got up. —
26 Patient Electrical treatment - July 30. Treatment was continued for a month. July 31 No
July 30/31 important change to note in patient's condition. Aug 6. Very restless: followed nurse in operating
Aug 6 room; seized bottle of formaldehyde and attempted to drink contents. In taking bottle away,
it was broken and patient received slight scratch on face; also got some formaldehyde in his
Nov 1 eye: eye washed out with hot boracic acid solution. Nov 1. Wt 127#. P 86. Patient is agitated
Dec 1 and melancholy - Dec 1. Is now more confused - Jany 1/1901. Wt 128#. P 112. Jany 31. -
Jany 31 1901 No apparent change in mental condition. July 1. 131# P 72. May 31. Seems more quiet and
May 31 more rational: ascites no part. June 29. treated for eczema right leg. July 31. For past two
July 31 weeks, patient has been more disturbed. Aug 1 Has eczema of right leg: is somewhat
Aug 1 agitated & melancholy: at times, worse than others. Sep 29. Had a very "excited spell" &
Sep 29 was transferred to T.W: Oct 17. Is today, up and dressed: has quieted down, somewhat,
Oct 17/30 while in bed. Oct 30. To B3: mental state not very much changed. Jany 31/02. Patient
Jany 31 19 did still, at times, very nervous & agitated. Feb. 1/02 Wt. 131#. Apr. 30/02 Agitated
at times & excited, at others comparatively quiet. July 25/02 Patient has been recently very excited; dirty in habits; Confused: a few days on Inf. Jan. 1/03 Wt. 130#;
03 Jan 31 Occasionally has restless habit; but much more quiet than he used to be.

Personal and Medical History of

Personal and Medical History of Joseph Liebhaber.

Whole No. 5595

Residence, Town of Clark, Minn. (Faribault Co.)

Date Admission, June 16th 1900.

Admitted by Dr. E. Z Warnow hour, 7 P.M.

How Sent H. L. Bullis & asst. Faribault Co.

Sex, male Age, 45 yrs.

Civil Condition, married.

Children, seven Age Youngest Child,

Occupation, Farmer

Degree Education, Common school. (German)

Profession of Religion, Roman Catholic.

Habits, intemperate.

Nativity, Germany (Parents also born there.)

Physicians Committing, M. N. Leland. — C. E. Riggs

Correspondents, Mrs. Joseph Liebhaber. Owatonna, Minn (wife)

No. for Year, 225.

Insane Relatives, none.

Cause Exciting, unknown.

Cause Predisposing, unknown

Form, Agitated Melancholia. Chronic

Accompanying Bodily Disorder, about 3 yrs. ago troub hands, feet & face & complained of head

Suicidal or not, Not.

Date of this Attack, 2 years ago.

Duration, 2 years.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 43 yrs.

Time of Leaving, Oct 9 — 1900

Time in Hospital, 3 mos. 23 ds

Result, Improved — Discharged May 11 1901

Examination on Admission by Dr. Warnow *Date of* July — 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, fair

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects,

Patient very religious.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead.

Paternal Relatives, no history of ins.

Mother, dead

Maternal Relatives, no history of ins.

Brothers and Sisters, well. 7 children still.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Rheumatism - Sunstroke.

HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, no,

OCCUPATION, Healthy or not, farming.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 40 PRESENT WEIGHT, 5 ft 6½ USUAL WEIGHT, NUTRITION, poor

WOUNDS, Abnormalities, no. Condition of Skin, bronzed, sluggish

TONGUE, Coatings, Promptness of Movement, coated.

PUPILS, Equality, equal Size, normal Response to Light, normal Accommodation, normal.

SIGHT, impaired.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, none Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted.

ARTERIES,

LUNGS,

Chest symmetrical
Expansion good
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient walks about much depressed, agitated, fearful. Has been worrying over various things for sometime. In in poor physical condition Has had Rheumatism & Sunstroke.

Personal and Medical History of Joseph Leibhaber.

1900

This patient was brought here by sheriff D. MacDonald in fair physical condition with the following history:. No consanguinity, ½ heredity Patient intemperate: First symptoms of insanity manifested two years ago by brushing head: running up & down road & praying Continually: Disease increasing: not variable: Derangement now manifested on subject of religion: Will stay for hours exposed to cold. praying - in coldest weather: Patient not disposed to injure anyone: No filthy nor destruction habits: No previous peculiarities manifested: About three years ago froze hands, feet & face & complained of head: Has been closely watched at home the last two years: Has received no treatment:
On personal examination prays almost continually to be healed from something: scratches body until sores: Troubled with insomnia. On admission put upon B³ (G.H.N. Rpt. Complexion light: Hair light brown: eyes blue: Skin in good condition: vac. mark on L arm: 4 scars on back: Both knees bruised: 2 teeth gone from upper jaw: Behavior good: Exam. by M. F. Fahey.)

June 16 Received on B³. Speaks little English. Appears despondent & depressed: frequently found praying
20 and talking to himself. June 30. Patient's condition shows no special change. Still
July 10 seems much depressed. July 10. Appetite seems poor. July 31. Still melancholy & depressed.
Aug 8 Has been extremely restless through night, for several nights. Sept 6. Transferred to B² East. Sept 20. Was
Oct 9 visited by wife. Oct 9. Was sent home: somewhat improved.

Discharged

Personal and Medical History of

Personal and Medical History of George Mc Michael

Whole No. 5597

Residence, Frontenac, Minn.

Date Admission, June 19, 1900.

Admitted by E. J. Watsons hour, 7 PM.

How Sent, Acel Haller J. of P. Goodhue Co

Sex, male Age, 66

Civil Condition, married

Children, 6 - dead. Age Youngest Child,

Occupation, wheat buyer.

Degree Education, Common school.

Profession of Religion, not a church member.

Habits, not intemperate.

Nativity, Scotland - (Parents also born there)

Physicians Committing, Dr Watsons - J. V. Anderson.

Correspondents, Mrs Geo. McMichael, Frontenac, Minn.

No. for Year, 2597.

Insane Relatives, 2 sisters - 1 nephew.

Cause Exciting, unknown.

Cause Predisposing, "

Form, Intermittent Melancholia

Accompanying Bodily Disorder, Heavily coated tongue, tremor, foul breath - evaginated reflexes

Suicidal or not, attempted on R.R. track.

Date of this Attack, March, 1900.

Duration, 3 mos.

No. of Attack, 4th

No. of Admission, 4th

Age First Attack, 57 yrs.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Watsons *Date of* 7 PM.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Rather sluggish.

MEMORY, Past Events, good.

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull.

REASONING POWER, Ordinary Subjects, Impaired.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects,

No

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

2 sisters insane

One brother died of consumption.

Father, died - brain fever.

Paternal Relatives, no history of insanity.

Mother, dead.

Maternal Relatives, no history of insanity

Brothers and Sisters, 2 sisters insane 1 bro. d. consump.

PROMINENT DISEASES, Head Injuries and Surgical Operations). (especially Typhoid Fever, Sunstroke,

Rheumatism.

HABITS, Drinking and Smoking, None.

HEADACHES, VERTIGO, OR CONVULSIONS, Vertigo

OCCUPATION, Healthy or not, Wheat buyer.

Detail Date, Duration, and Character of Previous Attack, if any,

several.

Sleep, good Appetite, poor Bowels, Constipated.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION, fair.

WOUNDS, Abnormalities, Contraction of 2 fingers on L. & 3 on R. hand from injury Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, Coated.

PUPILS, Equality, equal Size, normal. Response to Light, slow. Accommodation, slow.

SIGHT, fair

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, nor. Legs, nor. Grasp,

TREMORS, Hands, slight. Tongue, do. Facial Muscles, General,

PATELLAR REFLEX, slow, Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irritable.

Strength, Sounds, indistinct

Size, normal.

Apex Beat, "

Murmurs, None noted

ARTERIES,

hardened.

LUNGS,

Chest symmetrical

Expansion fair

B. Sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, irregular.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very restless & nervous - appears depressed & continually wishes to die. Says his condition comes from his stomach. His digestion is getting weaker &c. Wants to die. Says he has been troubled with his stomach for several years. Appears fairly well nourished. Contraction of fingers followed rheumatism.

Personal and Medical History of George Mc Michael

1900

This patient was brought here by sheriff Peter Longmire, in fair physical condition with the following history: No history of consanguinity, two sisters + a nephew insane. First attack occurred in 1891. second in 1893 3rd in 1896. (See Vols 17. Fol 25. No. 2744. + Vol. 25. Fol 293. No. 3389 + Vol 33. Fol 173 No. 4396) First symptoms of present attack manifested last March. Disease appears increasing: no rational intervals. Patient now very nervous, constantly worrying + down cast: wishes to die: talks of suicide: Not disposed to injure anyone: Attempted suicide on R.R. track: No peculiarities previously manifested: No severe diseases nor injuries to head: No confinement nor restraint employed: Has been treated by family physician: On personal examination tongue heavily coated: tremor: breath foul: reflexes exaguated. Finds his health is so poor that he cannot get well.
On admission put upon Inf. E. (Gen. Rpt. Complexion dark: hair brown eyes blue: Skin in good condition: Three fingers on R. hand stiff + two on L. hand: Vac. mark on L. arm: So clean: 2 Teeth gone from upper: 2 from lower: on gold crown: rest in poor condition: Behavior good. Exam. by J. R. Spillane)

June 19 Received on T.W. + put to bed: Says "he ought to have jumped into river and killed himself". Is
30 very depressed + restless: "Wants to kill himself" — June 30. No special change in his condition —
July 3/9 Patient continues despondent and depressed: "asks for poison": July 9. Is somewhat im-
10/14/25 proved. July 10. Wt 153#. July 14. Seven days — July 25. Is well-behaved + not so depressed.
31 Habits neat + clean. Transferred to B3. July 31. Vaccinated, unsuccessfully. —
Aug 10 Well behaved; Sociable: Complains of vertigo. Is chronically constipated — Nov 6. Complains of
Nov 30 rheumatism: "pain throughout limbs — Nov 30. Patients' condition shows no special change.
1901 Jan 31 No apparent change in patients' condition. Seems quite well, both mentally + physically.
July 1 Wt 169#. Pleasant — Is agreeable; well-behaved; rational: Says "he is not well enough to go home".
Mar 10 Transferred to A2. July 11. Complains of swelling on elbow: treated + improved. July 31 — No
July 11/31 Special change to report in condition. Aug 1. Wt 166#. Jany 31/02. Patient is a thorough-
1902 Jany 31 going hypochondriac in delusions, always: rarely is without some Complaint.
Habits in apparent fair physical condition. Had parole, but it was taken away
from him, (a charge of indecent exposure). Always answers lightly + talks intelligently
Feb. 1/02 - 163½#. July 1/02 Is not quite so well. Always hypochon-
driacal. Will not bathe unless watched. Recently exposed his body
while at the pavilion + was transfred to T3. Jan. 1/03 - 162#.
July 31 03 Does not seem quite so bright as a year ago.

Personal and Medical History of

Personal and Medical History of Frank Haffner.

Whole No. 5599
Residence, Winona Co. Minn.

Date Admission, June 21 1900
Admitted by Dr. C. L. Chapple hour, 7 P.M.
How Sent, H. L. Buck J. of P. Winona Co.
Sex, male Age, 23 yrs.
Civil Condition, single.
Children, – Age Youngest Child, –
Occupation, farm-hand.
Degree Education, can read & write.
Profession of Religion, Lutheran.
Habits, has used intoxicants.
Nativity, Germany (Parents also born there.)
Physicians Committing, H. Lichtenstein & D.G. Stewart
Correspondents, Julia Schultz (sister) Bauderheim Alta, Canada.

No. for Year, 229.
Insane Relatives, unknown
Cause Exciting,
Cause Predisposing,
Form, Ac. Melancholia –
Accompanying Bodily Disorder, none mentioned.
Suicidal or not, attempted by drowning, shooting, getting under train.
Date of this Attack, a few days ago.
Duration, a few days.
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 23 yrs.
Time of Leaving, Febry 21 – 1901
Time in Hospital, 8 mos. –
Result, Recovered. Discharged 2/30/1901

Examination on Admission by Dr. Wanous *Date of* 6/22/1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish.
MEMORY, Past Events, Good
Recent Events, " Special Subjects, do.
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull.
REASONING POWER, Ordinary Subjects, fair.
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed.
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS, of hearing
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, living - well.
Paternal Relatives, no history of insanity.
Mother, dead.
Maternal Relatives, no history of insanity.
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
None
HABITS, Drinking and Smoking, to excess.
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, laborer
Detail Date, Duration, and Character of Previous Attack, if any,
No
Sleep, insomnia Appetite, poor Bowels, irreg.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6½ PRESENT WEIGHT, 136½ USUAL WEIGHT, NUTRITION, Poor.
WOUNDS, Abnormalities, R. index finger amputated Condition of Skin, sluggish brownish
TONGUE, Coatings, Promptness of Movement, slight coating.
PUPILS, Equality, Equal Size, large Response to Light, slow Accommodation, slow
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good
COORDINATION, Arms, Normal Legs, normal Grasp,
TREMORS, Hands, slight Tongue, slight Facial Muscles, General,
PATELLAR REFLEX, sluggish. Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow, slow.
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, irritable.
Strength, Sounds, clear
Size, normal
Apex Beat,
Murmurs, None noted
ARTERIES,
full.
LUNGS,
Chest symmetrical
Expansion good.
R. sounds normal.

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Insomnia
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient depressed & despondent. Has attempted suicide by going in front of train. Says 'voices' tell him to kill himself. Condition brought on by excessive drink & worry over lack of work. Has worked for several people but no one would keep him. Physically is poorly nourished. Has not been able to sleep for weeks. Bowels constipated.

Personal and Medical History of Frank Happer.

1900

This patient was brought here by Sheriff A.W. Fuhrmann in fair physical condition, with the following history: No history of consanguinity or senility given: patient has used intoxicants: First symptoms of insanity manifested a few days ago by attempts at suicide: Disease appears stationary: Is variable: No filthy nor destructive habits: not inclined to injure anyone but has attempted to drown + shoot himself + to get under moving train: No information given concerning previous peculiarities severe diseases nor injuries to head. Never confined nor restrained until last night: No treatment pursued. On personal examination is despondent, melancholy + very reserved. On admission put upon B.3 E. G.S.N. Rpt. (Complexion dark: hair light brown: eyes brown: Skin in fair condition: R. shoulder discolored: two fingers R. hand gone to second joint. Small scar L. thigh + R. upper arm: In dirty: 1 tooth gone from R. upper jaw. Behavior good: Exam. by L.B. Page)

June 21/ Received on B.3. somewhat depressed: no delusions noted. June 30. Has improved some. —
July 1/30 Patient seems quite clear + improved physically. July 20. Vaccinated unsuccessfully. July 31. Gutmis & improve
Aug. 31 Well-behaved + agreeable: Physical condition good: Nov 30. No special change to note. —
1901 Jan 31 In bed all day: Complains of headache: put on treatment and improved — Feb 15 - Patient is
Feb 15 much improved, both mentally + physically. Sent home today.

Discharged

Personal and Medical History of

Personal and Medical History of August C Turner.

Whole No. 5603

Residence, Winona. Minn.

Date Admission, June. 23. 1900.

Admitted by Dr. A. F. Kilbourne hour, 7 P.M.

How Sent, H.L. Buck J. of P. Winona Co.

Sex, male Age, 58 yrs.

Civil Condition, Mdomd

Children, — Age Youngest Child, —

Occupation, Farmer.

Degree Education, Reads print only.

Profession of Religion, not a church member.

Habits, not intemperate.

Nativity, Germany (Parents also born there)

Physicians Committing, H.F. McGaughey + J.B. McGaughey.

Correspondents,

No. for Year, 733.

Insane Relatives, says father had trouble with stitches

Cause Exciting, environment +

Cause Predisposing, heredity

Form, ~~Chronic Mania~~

Accompanying Bodily Disorder, none mentioned

Suicidal or not, Not,

Date of this Attack, 1½ yrs. ago.

Duration, 1½ yrs.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 56 yrs.

Time of Leaving, July 20. 1900

Time in Hospital, 27 d.

Result, Disc. Nov. 6. 1900 Recovered

Examination on Admission by Dr. Wanous. *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear.

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Illusive.

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

?

DELUSIONS, Systematized, Transitory,

Special Subjects, regarding a woman who disturbs him at night. says she is a witch.

HALLUCINATIONS, hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead. - kicked by horse.

Paternal Relatives, no history of insanity.

Mother, dead.

Maternal Relatives, no history of insanity.

Brothers and Sisters, Well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

None

HABITS, Drinking and Smoking, yes.

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, farmer.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, fair Appetite, fair Bowels, Regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9 3/4 PRESENT WEIGHT, 183 lbs USUAL WEIGHT, NUTRITION, good.

WOUNDS, Abnormalities, Contracture of left hand. Condition of Skin, good.

TONGUE, Coatings, Promptness of Movement, none.

PUPILS, Equality, equal. Size, normal Response to Light, normal Accommodation, normal.

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, normal Legs, do Grasp,

TREMORS, Hands, ? Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irritable.

Strength, Sounds, normal.

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

LUNGS,

Chest symmetrical.
Expansion good.
B. sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is of low mentality. Has delusions regarding his neighbors wife, whom he says comes as a witch to disturb him at night. Says she wants to get his land. Hears her about his buildings at night rapping on doors & roof. He never has had any trouble with anyone.
Physically is well nourished.

Personal and Medical History of *August C. Turner.*

1900

This patient was brought here by Sheriff Fuhrmann in good physical condition with the following history: No history of consanguinity: says father was troubled by Switches: No history of intemperance in patient nor in parents: First symptoms of insanity manifested 1½ yrs. ago by belief that neighbor's wife had bewitched his stock: Disease stationary: not variable but rational on other subjects: Derangement now manifested by same delusions, has some anti-witch remedy from old country: Has made threats against family of the witch but has injured no one: No filthy nor destructive habits: No severe disease nor injuries to head: No confinement nor restraint employed, no treatment pursued: On personal examination appears perfectly rational on all subjects but witchcraft but it is feared that he will harm alleged witch. On admission put upon B³ E(G.H.N. Rpt Complexion fair: Hair dark brown: eyes gray: skin in good condition: 4 vac. scars on right + two on left arm: 3 small scars on L. fore arm. 1 large one on palm: 3 on back of hand + fingers cramped + stiff. Small scar on R leg: several warts on back: Slight bruise + scratch on L. leg: So dirty: 7 teeth gone from upper + 2 from lower jaw: rest in poor condition: Behavior good: Exam. by M. Fahey)

June 23 Received on B³. Speak little English. Is well behaved. "Believes in Witches". June 30. Still shows
July 6 30 Delusions. July 6. Wt 182 lbs. Prior. Says "a certain woman is a witch; used to come around his
10 house and bother him"; "Does not trouble him here". July 10. Patient has made improvement
20 Sent home.

Discharged

Personal and Medical History of

Personal and Medical History of Ole Christianson #2

Whole No. 5604
Residence, Lansboro, Minn.
Resident of Fillmore Co for 96 yrs.
Date Admission, June 23. 1900
Admitted by Dr. C. L. Chapp hour, 7 P.M.
How Sent, Ed. Farrington J. of P. Fillmore Co.
Sex, male Age, 82 yrs.
Civil Condition, widowed.
Children, - 3 - Age Youngest Child, -
Occupation, Farmer.
Degree Education, Can read.
Profession of Religion, Methodist E.
Habits, Not intemperate.
Nativity, Norway (Parents also born there)
Physicians Committing, J.H. Phillips + G.A. Love.
Correspondents, Anton Christianson (Son) Lansboro, Minn.

No. for Year, 234
Insane Relatives, None
Cause Exciting, unknown
Cause Predisposing, "
Form, Simple Melancholia
Accompanying Bodily Disorder, none mentioned.
Suicidal or not, Cut wrist - 2 wks. later cut hand off.
Date of this Attack, 6 mos ago
Duration, 6 mos,
No. of Attack, first
No. of Admission, first
Age First Attack, 82 yrs.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. Watrous *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused.
MEMORY, Past Events, Impaired.
Recent Events, Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, fair.
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
depressed.

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead.
Paternal Relatives,
Mother, dead.
Maternal Relatives,
Brothers and Sisters, 4 children - well.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
None.

HABITS, Drinking and Smoking, No.
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, farmer
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, Constipated

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, good.
WOUNDS, Abnormalities, left hand amputated. Condition of Skin, good.
TONGUE, Coatings, Promptness of Movement, clean.
PUPILS, Equality, equal. Size, normal. Response to Light, no Accommodation, slow.
SIGHT, Impaired.
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, opacity of left.
HEARING, Good.
COORDINATION, Arms, none Legs, none. Grasp,
TREMORS, Hands, Tongue, Facial Muscles, General,
PATELLAR REFLEX, normal. Other Reflexes,
ARTICULATION, Slurred, . normal. Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, regular
Strength, Sounds, normal
Size,
Apex Beat,
Murmurs, none noted
ARTERIES,
full - compressible
LUNGS,
Chest symmetrical.

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, disturbed.
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient has been worrying about domestic affairs - thinks his family have forsaken him. About 8 weeks ago attempted suicide by cutting wrist. Two weeks ago made second attempt after which it was necessary to amputate hand. Is very much depressed + cries when telling history. Physical condition good.

Personal and Medical History of Ole Christianson #2

1900

This patient was brought here by sheriff E.K. Blexrud in fair physical condition with the following history: No history of consanguinity, heredity not intemperance: First symptoms of insanity manifested six weeks ago when he attempted suicide by cutting wrist + two weeks later cut off hand: Disease appears stationary: Is variable: Derangement now manifested by desire to commit suicide on account of passion for a woman: regrets that he did not kill her: No filthy nor destructive habits noted: No peculiarities previously manifested: No severe diseases nor injuries to head: No confinement nor restraint employed: No treatment pursued. On personal examination no appearance of insanity excepting delusions in regard to above named woman:
On admission put upon Infirmary Diet. (T.H.N. Rpt. Complexion light: hair gray eyes blue: skin in good condition: Is blind in Left eye: left hand off: Several small scars on chest: Is clean: Has only 4 teeth on lower jaw: Behavior good.
June 23 Exam. by J.R. Spillane.) Received on TW, and put to bed: left hand amputated above wrist: is not entirely healed: (Caused by attempting suicide with axe). Is very much depressed and agitated.
25/30 Given clothes and up on ward. June 30. No change noticeable in patients' condition.
July 6/31 Patient Continues very much agitated and depressed. July 31. No change noted. (Condition due to senility)
Aug 5/8 Aug 5. Is agitated and melancholy. Aug 8. Transferred to B3.
13/16 Transferred to A1. Aug 16. Visited by Daughter. Patient is troubled with Chronic Constipation
Nov 20 and takes pills for same. Nov 20. Suffering with tooth ache. Two teeth extracted.
Dec 5 Took knife out of dining-room and hid it in room: said "he wanted to kill himself".
1901 No change to note in either mental or physical condition. Feby 1. Wt 163#. Ast. May 31. Is a
May 31 case of senile melancholia (agitated): Is very troublesome: troubled with Chronic Constipation
July 3 (Many visited by friend). Patient is suicidal. July 3. Receiving treatment for hemorrhoids.
31 No special change to report. Aug 1. Wt 156#: at times, has trouble with haemorrhoids.
Aug 10 Visited by Daughter. Oct 20. Transferred to TW: is noted as rather weak, but no prominent
Nov 4/6 Symptoms. Nov 4. Up + on ward. Nov 6. To a.m.
1902 Jany 31/02. Is somewhat melancholy, but, otherwise, no special change. Feb. 1/02 142#. Mar. 30/02 Patient
July 31 quite old, bent & feeble; untidy in habits & quite demented.
Apr. 20 Continually complaining of bodily ailments, especially
constipation. Sept. 15/02 Patient left for home with his friends.
He has been about the same in every way, altho' had had some
trouble with hemorrhoids during latter part of his stay.

Personal and Medical History of

Personal and Medical History of James McCabe.

Whole No. 5607

Residence, Chicago, Illinois.

Date Admission, June 29th 1900.

Admitted by Dr. C. L. Chapple hour, 6.45 PM.

How Sent, E.W. Bazin J. of P. Ramsey Co.

Sex, male. Age, 38 yrs.

Civil Condition, single.

Children, — Age Youngest Child,

Occupation, Bridge-builder.

Degree Education, Common school.

Profession of Religion, unknown.

Habits, Intemperate.

Nativity, Iowa (Parents born in Ireland

Physicians Committing, H.G. Johnson + Talbot Jones.

Correspondents,

No. for Year, 237.

Insane Relatives, None known.

Cause Exciting, unknown

Cause Predisposing, unknown.

Form, Acute Alcoholism

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, Not.

Date of this Attack, One week ago.

Duration, 1 week,

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 38 yrs.

Time of Leaving, July 9. 1900

Time in Hospital, 10 d

Result, Discharged Aug 8. 1900 Here

Unimproved

Examination on Admission by Dr. Wanous. *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

much confused.

MEMORY, Past Events, poor

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

exalted.

DELUSIONS, Systematized, Transitory, yes.

Special Subjects,

HALLUCINATIONS, yes.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living

Paternal Relatives,

Mother, living

Maternal Relatives,

Brothers and Sisters, 2

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Injury to head 8 yrs. ago.

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Appetite, Bowels,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7½ PRESENT WEIGHT, 149# USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, Condition of Skin,

TONGUE, Coatings, Promptness of Movement, Coated.

PUPILS, Equality, Equal. Size, normal Response to Light, normal Accommodation, normal.

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, not obtainable Legs, do Grasp,

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, somewhat Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Regular.

Strength, Sounds, normal

Size,

Apex Beat,

Murmurs, none noted

ARTERIES,

LUNGS,

Chest symmetrical.
Expansion good.
Breath sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, insomnia

BOWELS, Present Condition, Costive

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very much confused, very talkative + exalted. Cannot remember past occurrences. Has been an excessive drinker which is probable cause of his present condition. Statements cannot be relied upon as he exaggerates + answers in affirmation all questions. Shows an occasional speech defect in talking.

Personal and Medical History of James McCabe.

1900

This patient was brought here by Deputy Sheriff Hanson attended by Alex Jacque, in fair physical condition, with the following history:- Consanguinity & heredity unknown: patient intemperate: First symptoms of insanity manifested one week ago by various hallucinations, jumped through window: Disease appears increasing: not variable: Derangement now manifested by the various hallucinations of acute mania: Is disposed to injure others: Habits filthy & destructive: Previous peculiarities unknown: Received injury to head 8 yrs. ago. Has been confined in County Jail for past six days: No treatment pursued. On personal examination excitable & very garrulous. On admission put upon B3E. (Y.H.N.Rpt. Complexion dark: hair dark brown eyes blue: skin in good condition: Thumb & fingers of left hand stiff: Vaccination scar on left arm: small scar on left knee: Is dirty: One tooth gone from left upper jaw: behavior good: Exam. by W. Fahey.

June 24/ July 3/9 Received on B3. Is very restless and talkative: irrational & incoherent. June 30. very maniacal, through the day. July 3. Transferred to C. July 9. Very noisy - Taken home by relatives, this morning, and out of the State.

Discharged

Personal and Medical History of

Personal and Medical History of Andrew Nelson. #2

Whole No. 5608

Residence, St. Paul. Minn.

Date Admission, June 29' 1900.

Admitted by Dr E.J. Wanous hour, 7 P.M.

How Sent, E.W. Bazille J of P Ramsey Co.

Sex, male Age, 34 yrs.

Civil Condition, widower.

Children, two. Age Youngest Child,

Occupation, Laborer.

Degree Education, Common school.

Profession of Religion, Lutheran.

Habits, Intemperate.

Nativity, Sweden (Parents also born there)

Physicians Committing, F.B. Weinck + A.W. Miller.

Correspondents, Jennie Nelson (?) Ada, Minn.

No. for Year, 937

Insane Relatives, unknown.

Cause Exciting, Alcoholism.

Cause Predisposing, unknown.

Form, ~~Melancholia a Potatu~~

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, Not.

Date of this Attack, June 25' 1900.

Duration, 4 days

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 34 yrs.

Time of Leaving, Oct 9 - 1900

Time in Hospital, 3 mos - 10 Dy.

Result, Recovered. Disch Apl 30 - 1901

Examination on Admission by Dr. Wanous *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused.

MEMORY, Past Events, much impaired -

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull -

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

indifferent

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living.

Paternal Relatives,

Mother, living

Maternal Relatives,

Brothers and Sisters, 2 Children.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

syphilis - two years ago.

HABITS, Drinking and Smoking, excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Laborer.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, insomnia Appetite, poor Bowels, Constipated

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 1/4 PRESENT WEIGHT, 133 USUAL WEIGHT, NUTRITION, Anaemic

WOUNDS, Abnormalities, Condition of Skin, Sluggish.

TONGUE, Coatings, Promptness of Movement,

PUPILS, Equality, equal. Size, normal. Response to Light, Slow Accommodation, slow

SIGHT, good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, some incoord. Legs, Grasp,

TREMORS, Hands, marked. Tongue, Facial Muscles, General,

PATELLAR REFLEX, Exaggerated. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irritable. rapid.

Strength, Sounds, weak.

Size, enlarged.

Apex Beat, down.

Murmurs, none noted.

ARTERIES,

LUNGS,

Chest symmetry.
Expansion good.
B. sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very much confused. frequently looks about as tho looking for someone & answers imaginary questions. Has been a hard drinker also states that he was treated for pox 3 yrs. ago, tho there are no evidences at present. Case is one of alcoholic Dementia. Has had incontinence also involuntary bowel movement. Is very rambling in speech + ideas.

Personal and Medical History of Andrew Nelson.

1900

June 29 / July 11 / 13/25 / 17/31 / Aug 31 / Oct 9

This patient was brought here by sheriffs deputy C. C. Rice, in poor physical condition, with the following history:- Nothing known concerning consanguinity nor heredity: Patient a heavy drinker: First symptoms of insanity manifested June 25th 1900 by delusions: Disease appears increasing: not variable: Derangement now manifested by delusions: Not disposed to harm anyone: Habits filthy & destructive: No information concerning previous peculiarities: No severe diseases nor injuries to head: Has been in jail four days: No treatment pursued: On personal examination talks incessantly & incoherently has incontinence of urine &c. On admission put upon D.W.C. (G.H.N. Rpt. Complexion dark: hair brown: eyes blue: skin in fair condition: Vac. scar on R. arm: several small scratches on back: Is clean: one tooth gone from upper & one from lower jaw: Is restless & pugnacious. Exam. by Dr. Spitland.) June 29. Received on D.W. & put to bed. Patient is confused & restless. talks of hanging himself". Is destructive, at night. July 11. Given clothes and kept in "Bay" - Shows some improvement. July 24. Works on ward. July 25. Transferred to W3. — Was vaccinated July 31. Is well-behaved: converses readily: quite rational: Assists on ward. Well-behaved: Habits neat & clean. Oct 9. Seem about his normal condition. —

Sent home.

Discharged

Personal and Medical History of

Personal and Medical History of Dr. Warren B. Robb.

Whole No. 5609
Residence, Grove City, Minn.

Date Admission, June 29 1900.
Admitted by Dr. E.J. Warnous hour, 7 P.M.
How Sent, E.W. Bazille J. aft. Ramsey Co.
Sex, male Age, 48 yrs.
Civil Condition, married
Children, none Age Youngest Child,
Occupation, Physician & surgeon.
Degree Education, Professional
Profession of Religion, Baptist.
Habits, Temperate.
Nativity, Indiana. (Father Indiana Mother, Mass.)
Physicians Committing, A.W. Dunning & Daniel Taab.
Correspondents, Mr. W.B. Robb. 244 E 10th St. St Paul. (wife)
Miss Emma S Robb. 341 Nelson Ave. St Paul. Sister.

No. for Year, 239.
Insane Relatives, None.
Cause Exciting, Organic brain disease.
Cause Predisposing, unknown
Form, Organic Dementia
Accompanying Bodily Disorder, unknown.
Suicidal or not, Not.
Date of this Attack, 3 mos. ago.
Duration, 3 mos.
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 48 yrs.
Time of Leaving, 23 June 1901.
Time in Hospital, 11 mos - 25 - 27
Result, Died: paresis: Status Epilepticus

Examination on Admission by Dr. Warnous *Date of* 6/30/1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused - & sluggish.
MEMORY, Past Events, poor.
Recent Events, " Special Subjects, do.
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull - correct.
REASONING POWER, Ordinary Subjects, poor
Special Subjects, "
Own Mental State, appreciates it.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather depressed.

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,
ILLUSIONS,
SUMMARY,
marked loss of memory.

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead - typhoid fever.
Paternal Relatives, no history of insanity.
Mother, living - poor health.
Maternal Relatives, several cases of insanity
Brothers and Sisters, well - No children
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Typhoid fever - gonorrhoea.

HABITS, Drinking and Smoking, yes.
HEADACHES, VERTIGO, OR CONVULSIONS, Vertigo
OCCUPATION, Healthy or not, physician
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Insomnia Appetite, poor Bowels, irreg.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, —— PRESENT WEIGHT, —— USUAL WEIGHT, NUTRITION, fair.
WOUNDS, Abnormalities, Condition of Skin, sluggish.
TONGUE, Coatings, Promptness of Movement, coated
PUPILS, Equality, equal. Size, large Response to Light, sluggish Accommodation,
SIGHT, Impaired
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good.
COORDINATION, Arms, Incoord. Legs, do. Grasp,
TREMORS, Hands, slight Tongue, slight Facial Muscles, General,
PATELLAR REFLEX, lost. Other Reflexes,
ARTICULATION, Slurred, Hesitating, & impeded. Slow,
FACIAL EXPRESSION, Sensibility, normal.
HEART, Regularity,
Strength, Sounds, weak
Size, normal
Apex Beat, "
Murmurs, None noted
ARTERIES,
Hardened.
LUNGS,
Chest symmetrical
Expansion good.
B. sounds normal.

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Insomnia
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient shows marked loss of memory is confused & very dull. All reflexes are sluggish - shows motor disturbances & speech defect. Condition perhaps one of paresis. Physical condition good except marked sclerosis.

Personal and Medical History of Dr. Warren B. Robb.

1900

This patient was brought here by Dep. Sheriff E. Reglesberger attended by wife in fair physical condition, with the following history:- No history of consanguinity, heredity nor intemperance in patient nor parents: First symptoms of insanity manifested three months ago: Disease appears increasing in variable: Derangement now manifested by delusions; insomnia & irritability: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: No severe diseases nor injuries to head. No confinement nor restraint employed. No treatment pursued. No further facts noted on personal examination.
On admission put upon S.W.E. (Gen. Rpt. Complexion light: hair gray: eyes blue: Skin in good condition: Vac. mark on L. arm: Scars over R eye & on L. knee: Bruise back of L. hip. Is clean: one tooth gone from upper & one from lower jaw: Behavior good: very unsteady on feet.
Exam. by J. R. Spillane)

June 29 Received in Ward: given bath & put to bed: is very unsteady & confused. J. Normal P 96.
July 1/6 Extremely restless: comes out in hall, constantly. July 5/6. Visited by wife. July 6. Given clothes.
11 Dressed: Attempted to elope, through the window: became pugnacious, when asked to undress. —
18 Visited by wife. Aug 1. Wt 174#. Reads a great deal: habits clean. Sept 18. Patient seems stupid.
Sept 18/20-30 "thinks some one is going to harm him". Sept 20. Required catheterization. Sep 21-30. Catheterized.
Oct 1 Visited by relative & taken home. - Jany 17/1901. Returned to the hospital. Neat & clean in habits:
Jany 1901 incoherent at times - Jany 22. Patient had convulsion - Jany 31. Is up and around:
31 Feb 1/2 seems quite well, both mentally & physically: habits are neat & clean. Reads a good deal.
Feby 1/19 Is well-behaved: neat & tidy. Feb 19. Attempted to elope, through window - Feb 26. Eloped: was
Mar 17 returned & put on D2. Mar 17. Visited by wife - Apl 1. To TW. (from B2.) - Apl 8. Patient up
Apl 8/6 on ward & dressed. Is frequently visited by wife. Apl 11. To B2. Apl 22. Had sinking spell:
May 1 put to bed on TW. May 1. Seems improved. June 23. Had convulsion, while out walking.
June 23 brought in on stretcher: convulsions continued all afternoon. (had 44 of them) - Failing
rapidly. — Continued to fail rapidly and died at 5 P.M.

Died

Personal and Medical History of

Personal and Medical History of Matt. Kienzle

Whole No. 5610

Residence, Labrosse, Wisconsin.

(Sent here by State Board C. & C.) see telegram

Date Admission, June 30 1900

Admitted by Dr. E. Z. Warnow hour, 10:30 A.M.

How Sent, S. S. Washburn J. of P. Mower Co.

Sex, male Age, 34.

Civil Condition, widowed.

Children, none. Age Youngest Child, –

Occupation, Brick-layer

Degree Education, Common school (10 yrs)

Profession of Religion, Catholic.

Habits, Intemperate.

Nativity, Wisconsin. (Parents born in Germany.

Physicians Committing, H.P. Pierson & J.P. Trustee.

Correspondents,

No. for Year, 240.

Insane Relatives, None.

Cause Exciting, Unknown.

Cause Predisposing, "

Form, A. Acute Alcoholism

Accompanying Bodily Disorder, none mentioned

Suicidal or not, Not.

Date of this Attack,

Duration, First seen on June 28 1900.

No. of Attack, Probably 1st

No. of Admission, 1 hre.

Age First Attack, 34

Time of Leaving, July 4 1900

Time in Hospital, 4 d.

Result, Discharged Nov. 6. 1900 Recovered

Examination on Admission by Dr. Warnow. *Date of* July 5

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired.

Recent Events, poor. Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Illusive

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Exalted.

DELUSIONS, Systematized, Transitory,

Special Subjects, of persecution

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

none.

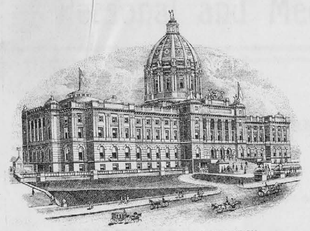
HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, bricklayer.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor. Appetite, impaired Bowels, irregular



NEW STATE CAPITOL IN COURSE OF CONSTRUCTION

State of Minnesota

BOARD OF

CORRECTIONS AND CHARITIES.

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JAS. F. JACKSON, Secretary } St. Paul
W. A. GATES, Agent

St. Paul June 29th, 1900.

Hon. S. S. Washburn, Probate Judge,

Austin, Minn.

Dear Sir:-

You are hereby authorized to commit Matt Kienzle alleged to be a resident of La Crosse, Wisconsin, in case he is found to be insane upon examination in your Court to the State Hospital at Rochester. This action is taken upon the direction of a member of this Board, that under the decision of the Supreme Court of the State vs. Billings, 57, N. W. R. 794, it is illegal for an officer of this Board to deport a person to another State without his consent and until the case should be officially investigated and determined by the Board or its representative.

Respectfully yours,

W. A. Gates

State Agent.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient had delusions of persecution - much excited & was continually hearing voices. Had been drinking hard which was probable cause of trouble. Physical condition good. Bowels constipated & has been troubled with insomnia for some time past.

Personal

Whole

Re

(A

Ph

Correspo.

1900

Examination on *ate of* July 5

MENTAL ACTIVITY, Clear or Co.

Confused.

MEMORY, Past Events, Impaired.

Recent Events, poor. Special Subje.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Illusive

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted.

DELUSIONS, Systematized, Transitory,

Special Subjects, of persecution

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

ASION,

dual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy, ITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

none.

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS, no,

OCCUPATION, Healthy or not, bricklayer.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor. Appetite, impaired Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6½ PRESENT WEIGHT, 169½ USUAL WEIGHT, NUTRITION, good.

WOUNDS, Abnormalities, Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, Coated.

PUPILS, Equality, Equal. Size, normal. Response to Light, +. Accommodation, +.

SIGHT, good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, nor, Legs, nor, Grasp,

TREMORS, Hands, marked Tongue, marked. Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular.

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, none noted.

ARTERIES,

LUNGS,

Chest symmetrical.

Expansion good.

B. sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, insomnia.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient had delusions of persecution - much excited & was continually hearing voices. Had been drinking hard which was probable cause of trouble. Physical condition good. Bowels constipated & has been troubled with insomnia for some time past.

Personal and Medical History of Matt Kunzle

1900

This patient was brought here by Dep. Sheriff Jno C. Johnson Jr. in good physical condition with the following history: No history of consanguinity hereditty nor intemperance in parents - patient intemperate: This is first attack so far as known: has been affected since spring: Brought in laboring under hallucinations on June 28th 1901. Disease appears stationary is variable with semi-rational periods: Derangement now manifested by thinking he has family trouble, is chased by imaginary objects. Not disposed to injure anyone. No filthy nor destructive habits: No previous peculiarities manifested: No severe diseases nor injuries to head: Nothing known of confinement or restraint employed as of treatment received. On personal examination talk incoherent: labors under several delusions about family troubles. On admission put upon B3 E(G4W Rpt. Complexion — hair dark brown: eyes brown: skin in good condition Vac. marks on both arms: 3 small scars on R. thigh. Is clean. 3 teeth gone from lower + one from upper jaw: Behavior good.

June 30 Exam by Nurse Fahey) — June 30. Received on B3. Is sociable and agreeable - Habits clean.

July 25 Visited by wife and sister and taken home.

Discharged

Personal and Medical History of

Personal and Medical History of Ole A. Paulson.

Whole No. 5613
Residence, ?
No. for Year, 243
Insane Relatives, None.
Cause Exciting, Unknown.
Cause Predisposing, "
Form, Maniacal Form.
Accompanying Bodily Disorder, None mentioned.
Suicidal or not, Not.
Date of this Attack, 2 months ago.
Duration, 2 months.
No. of Attack, 2nd
No. of Admission, 2nd
Age First Attack, 35 yrs.
Time of Leaving, Oct 12 - 1900
Time in Hospital, 3 months 10 Days
Result, Recovered - Discharged Apl 30/901 -

Date Admission, July 5' 1900.
Admitted by Dr. C. L. Chapple hour, 7 P.M.
How Sent, D. J. Hunt Jap. Dodge Co.
Sex, male Age, 39 yrs.
Civil Condition, single
Children, — Age Youngest Child,
Occupation, Farmer.
Degree Education, Common school.
Profession of Religion, Lutheran.
Habits, Not intemperate.
Nativity, Norway. (Parents also born there)
Physicians Committing, J. Bedmut + J. H. Vanderlow.
Correspondents, Nels a Boe (Bro) Hayfield, Minn. (1 mile out of town)
John Skrovud (Guardian) Kasson. Minn.

Examination on Admission by Dr. C. Chapple *Date of* July 5' 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear - quick.
MEMORY, Past Events, good
Recent Events, " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert Correct.
REASONING POWER, Ordinary Subjects,
Special Subjects,
Own Mental State, good.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
normal.
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION, May 17.
ONSET, Gradual or Sudden, Sudden
(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
mother + sister consumption (?)
Father, dead - dropped dead.
Paternal Relatives,
Mother, died consumption
Maternal Relatives,
Brothers and Sisters, all well.
(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
no
HABITS, Drinking and ~~Smoking~~, both to excess
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Farmer
Detail Date, Duration, and Character of Previous Attack, if any,
Here before - see history
Sleep, not good Appetite, fair Bowels, regular.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10 PRESENT WEIGHT, 147. USUAL WEIGHT, NUTRITION, fairly good
WOUNDS, Abnormalities, several old scars on chest. Condition of Skin, leathery pale - healthy.
TONGUE, Coatings, Promptness of Movement, clean - prompt.
PUPILS, Equality, equal - Size, n. Response to Light, yes Accommodation, yes.
SIGHT, good.
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good.
COORDINATION, Arms, good Legs, do. Grasp,
TREMORS, Hands, slight Tongue, do Facial Muscles, none General, none
PATELLAR REFLEX, normal. Other Reflexes, n
ARTICULATION, Slurred, normal. Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, reg. but neurasthenic
Strength, Sounds, fairly good.
Size, normal.
Apex Beat, 5
Murmurs, none
ARTERIES,
LUNGS,
Chest symmetrical
Expansion fair
Breath sounds normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, fairly good -
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Talks rationally - no delusions etc. noted. Evidently naturally not very bright - Says that 17 yrs ago Went swimming while very hot. Was sick for two weeks + out of head. Since then has had trouble with his heart at intervals - says it beats hard + he cannot lie on L. side. 4 yrs. ago was here from Jan 20 '96 to Apr 3 '96. Has not been well since - Thinks his mind has been all right - Was working hard dragging May 17 + had a spell - got weak + felt badly in region of heart - said he had been drinking root beer with whiskey in it. Was taken to the doctor - since then has not been working - but running about - Just before dinner has a "spell" feels badly about heart

Personal and Medical History of Ole A. Paulson.

1900

This patient was brought here by Sheriff Joel Tucker attended by John Stuvrud, in fair physical condition, with the following history:- No consanguinity, heredity nor intemperance known: Patient had first attack of insanity in 1896 + was confined in this hospital from Jan 20 to Apr 3 '96. (See Vol. 33 - Fol. 37 - No. 4305.) First symptoms of insanity, (present attack) manifested about two months ago. Disease appears increasing, is variable: Derangement manifested by nervous debility: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: No severe diseases nor injuries to head: Not confined since leaving this hospital. No information concerning treatment. No further facts noted on personal examination: On admission put upon B3 E. (4th Ret. Complexion light: hair light brown: eyes blue: Skin in fair condition: lear 2's in + some small ones on left breast. Is dirty. Two teeth gone from L. lower jaw. only four left in upper jaw: Behavior good. Exam. by L.D. Page

July 7 Received on B3. Agreeable, but dull in understanding. Assists on ward. July 15. Seems to have
20 improved some. July 20. Vaccinated, unsuccessfully. July 31. Well, physically: mind still dull.
Aug 10 Is well-behaved: works in dining-room: seems quite well, mentally. Sept 1. Transferred to A!
Sept 8 Had tooth extracted. Oct 10. Visited by friend.
Oct 12 Taken home by friend.

Discharged

Personal and Medical History of

Personal and Medical History of Frederick Douglas. (colored)

Whole No. 5614

Residence, ?

Brought here from State Prison Stillwater.

Date Admission, July 2nd 1900.

Admitted by Dr. C. L. Chapple hour, 7 PM

How Sent, F. D. Wilson J. of P. Wash. Co.

Sex, male Age, 74 yrs.

Civil Condition, married.

Children, none. Age Youngest Child,

Occupation, Hostler.

Degree Education, Can read + write.

Profession of Religion, Baptist.

Habits, ?

Nativity, Indiana. (Parents also born there.)

Physicians Committing, H. Rhodes + E. S. Boleyn.

Correspondents,

No. for Year, 744.

Insane Relatives, unknown.

Cause Exciting, "

Cause Predisposing, "

Form, Sub. Ac Man Paralitica

Accompanying Bodily Disorder, unknown.

Suicidal or not, not.

Date of this Attack, ?

Duration, ?

No. of Attack, ?

No. of Admission, 1 here.

Age First Attack, unknown

Time of Leaving, 13th July 1901 (to State Prison)

Time in Hospital, 1 year 11 days

Result, Discharged: Recovered: Nov 27/1901.

Examination on Admission by Dr. Wanous. *Date of* June 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear

MEMORY, Past Events, good.

Recent Events, Special Subjects, do.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

alert.

REASONING POWER, Ordinary Subjects, fair

Special Subjects, "

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather exalted.

DELUSIONS, Systematized, — Transitory,

Special Subjects, —

HALLUCINATIONS, yes.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead.

Paternal Relatives, no history of ins.

Mother, living.

Maternal Relatives, no history of ins.

Brothers and Sisters, no.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Syphilis 2 yrs ago.

HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Insomnia Appetite, good Bowels, regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9½ PRESENT WEIGHT, 149# USUAL WEIGHT, NUTRITION, good.

WOUNDS, Abnormalities, Scar on R. wrist. Condition of Skin, good.

TONGUE, Coatings, Promptness of Movement, Clear

PUPILS, Equality, Equal Size, N. Response to Light, N. Accommodation, N.

SIGHT, Wears glasses

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Chronic Conjunctivitis

HEARING, ? good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, almost lost. Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, strong.

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

normal

LUNGS,

Chest symmetrical

Expansion good.

Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, Good

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient at present quite rational, has had delusions regarding people of Stillwater. Thinks they wanted to poison him by putting things in food. Says he is among friends now + feels all right. Is rather on the alert however + somewhat grandiose in ideas. Gives history of specific trouble. at present has some eruption over body perhaps specific Says he has several diamonds which he has secreted. which he was sent up for.

Personal and Medical History of Fred. Douglas.

1900

This patient was brought here by Sheriff's Deputy Dr J P Chance attended by Dr W.G. Withrow, in good physical condition with the following history.- No history of consanguinity, heredity nor intemperance known. First symptoms manifested by irrational talk & by delusions that he was disturbed at night. Disease appears increasing: not variable. Derangement manifested by delusions of persecution: Has threatened but never attempted to injure anyone: No filthy nor destructive habits noted: No previous peculiarities known: Has been confined in Prison crank cell: & has had hospital treatment. On personal examination is excited, voluble on subject of troubles in prison.

Note Patient sentenced to State Prison Apr 23' 98 for crime of Grand Larceny in 2nd degree: for a term of five years.

On admission put upon B3 E (Gth n Rft. Complexion black: hair black: eyes dark brown: skin in good condition: Vaccination marks on left arm: wart on back of neck: scars about hands: Eruption on legs & arms: Is clean: Teeth good: behavior good: Exam. by J Howe & L.D Page.) —

July 7 Received on B3 - Is very talkative; apparently quite rational - July 5. Says: Prison officials were against him" - "Thinks they were under the impression he was on a salary & official duty" -
17 Is troubled with conjunctivitis - Eyes treated and improved. July 17. Vaccinated unsuccessfully
31 July 31. Patient is neat and clean in habits. Health is good. Helps some in the ward.
Aug 31 Well-behaved: works on ward: clean and neat. Nov 1. Wt 143#. P100. Res 28. Temperature 6!
Dec 3/31 Transferred to B3 - Dec 31. Condition shows no special change. Habits neat & clean. -
1901 Jan 23 Complains of being disturbed at night by noises above him: "Thinks people do it on purpose to scare him into convulsions". Jany 31. No change to report —
Feb 1 Wt 147#. P88. Patient is quiet: manifests no delusions. May 31. Condition about same.
May 31 Neat & clean in habits: helps with the work: attends amusements. Is quite pleasant
Sept 10 in manners. No delusions shown. Sep 10. Patient's Condition shows no change -
13 Was taken back to State-Prison Today. —

Discharged

Personal and Medical History of

Personal and Medical History of John Hale.

Whole No. 5615

Residence, Stearns Co. Minn.
From State Prison. Stillwater.

Date Admission, July 2' 1900

Admitted by Dr. C L. Chapple hour, 7 PM.

How Sent, F. I. Wilson Jail. Wash. Co.

Sex, Male Age, 44 yrs.

Civil Condition, married

Children, 3 Age Youngest Child,

Occupation, Farmer.

Degree Education, none

Profession of Religion, Catholic

Habits, Intemperate.

Nativity, Holland - (Parents also born there)

Physicians Committing, W.G. Waight & J.A. Haines

Correspondents,

No. for Year, 1405.

Insane Relatives, ?

Cause Exciting, Probably always was.

Cause Predisposing, unknown.

Form, Chr. Melancholia

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, 3 yrs. ago threw himself from Gallery.

Date of this Attack, Over 2 yrs. ago.

Duration, Over 2 yrs

No. of Attack, unknown.

No. of Admission, 1 here.

Age First Attack, unknown

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Waugaman *Date of* July - 1900

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, poor

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Illusive

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather indifferent

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS, hearing

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Fathers was perhaps demented

Father, dead.

Paternal Relatives, no

Mother, dead.

Maternal Relatives, No history of insanity

5 Brothers and 5 Sisters, well. 3 children well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Suppurating glands.

HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, farmer.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 6ft. 1½ PRESENT WEIGHT, 180 lbs USUAL WEIGHT, NUTRITION, fair.

WOUNDS, Abnormalities, suppurating glands - scar on R. side of neck. Condition of Skin, eruption.

TONGUE, Coatings, Promptness of Movement, reddish, clear.

PUPILS, Equality, Equal - Size, normal Response to Light, normal. Accommodation, slow.

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, Legs, Grasp,

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, normal

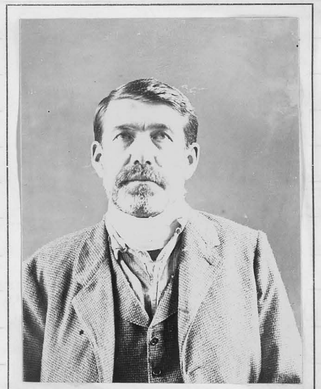
Size, "

Apex Beat, "

Murmurs, none noted.

ARTERIES,

LUNGS,
Chest symmetrical
Expansion fair
B. sounds normal



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Irregular.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient was committed here from prison with delusions of poisoning & hallucinations. Says people "had it in for him" & wanted to do away with him. Has cervical glands on both sides suppurating also axillary glands on R. side involved.

Personal and Medical History of John Hale.

1900

This patient was brought here from State Prison, Stillwater by Deputy Sheriff Dr J.P. Chance attended by Dr. M.E. Withrow, in fair physical condition with the following history- No information concerning consanguinity, heredity nor previous history beyond fact that patient was intemperate & probably always weak mentally. First symptoms of insanity manifested over two years ago by continual praying & incoherent talk & mumbling to himself: Disease appears increasing: Not variable: Not disposed to injure anyone: Three years ago threw himself from gallery attempting suicide. Propensity not now active. Habits filthy & destructive: No confinement nor restraint employed; refuses treatment. No further facts noted on personal examination

*Note. Patient sentenced to State Prison, Stillwater May 31' 98 for a term of twenty years. On admission put upon B 3 E (Gen Rpt. Complexion dark: hair dark brown: eyes gray: Skin in fair condition: Large bunch under R. arm: & warts on L. hand: scars on either side of neck extending down to breast bone: Eruption on legs & arms: So clean: 4 teeth gone from upper & one from lower jaw: behavior good: Exam by J Howe & L.D Page,

July 7 Received in B 3. Is well-behaved. Mentally, quite clear. Patient has suppurating wound in neck, which discharges continually - July 7. Transferred to I.W. and put to bed: neck dressed with bi-chloride dressing - July 25. Patient seems improving - July 31. Condition about the same neck dressed by Dr Wanous. Aug 6. Patient is dressed and up on ward. Aug 10. Stitches removed from neck. Aug 14. Transferred to B 3. Sep 30. Works on ward: is neat & clean in appearance Wt 182#. Became very angry, because he could not go home. Still works some on ward.

Dec 1 1901 Jan 31 Is quite disturbed, by spells. Condition remains about the same. Habits clean.

Feb 1 Wt 181# P 88. May 31. Is quiet: occasionally, gets the idea he should go home. Works on ward.

May 31 "thinks there is something in his ears". Sept 31 No change to report in patients condition

Sept 1 1901 Still becomes disturbed, by spells - Aug 1. Wt 181#. Jan 31/01. During period, no

Jan 31 notable change: talks to himself: usually neat: has hallucinations: Works some -

Feb. 1/02. 187#. Walks the floor; is restless; talks to himself. makes motions; hears voices; occasionally excited usually well-behaved. Jan. 1/03 Weight 184#.

03 Jan. 31. Has been invariably the same during the whole year - Works some - Well behaved.

Personal and Medical History of

Personal and Medical History of Daniel Blue. (Half breed Indian)

Whole No. 5616

Residence, Grant Co, Minn.

From State Prison Stillwater.

Date Admission, July 21 1900.

Admitted by C. L. Chapple hour, 7 P.M.

How Sent, F. D. Wilson Dep. Wash. Co.

Sex, male Age, 24 yrs.

Civil Condition, Single.

Children, — Age Youngest Child, —

Occupation, Shoemaker.

Degree Education, Can read & write.

Profession of Religion, Not a church member.

Habits, not intemperate.

Nativity, Minnesota (Parents also born There)

Physicians Committing, H. Rhodes & E. S. Bolyn.

Correspondents,

No. for Year, 946

Insane Relatives, ?

Cause Exciting, ?

Cause Predisposing, ?

Form, Epileptic Insanity

Accompanying Bodily Disorder, Epileptic fits.

Suicidal or not, ?

Date of this Attack, ?

Duration, ?

No. of Attack, First.

No. of Admission, 1 here

Age First Attack, unknown

Time of Leaving, July 26 - 1902

Time in Hospital, 2 yrs - 24 Ds.

Result, Improved. Dispd. Nov 8 - 1902 by Bd of C.

Examination on Admission by Dr. Watson. *Date of* June 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear

MEMORY, Past Events, good

Recent Events, " Special Subjects, do

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

rather alert.

REASONING POWER, Ordinary Subjects, fair

Special Subjects, "

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed.

DELUSIONS, Systematized, None Transitory,

Special Subjects,

HALLUCINATIONS, Yes.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Nothing known.

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Indigestion.

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, from Prison

Detail Date, Duration, and Character of Previous Attack, if any,

Has had several spells of uncontrollable passion

Sleep, disturbed Appetite, good. Bowels, regular.

STILLWATER.

Two Prisoners Adjudged Insane and Will Go to Rochester.

Stillwater, Special, June 28.—Daniel Blue, a half-breed Indian, serving a life sentence at the prison for murder committed in Grant county, and Fred Douglas, a colored convict, who is serving five years for grand larceny, committed in Hennepin county, were adjudged insane yesterday and will be taken to Rochester to-morrow.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

Temp. PRESENT WEIGHT, 148½ USUAL WEIGHT, NUTRITION, Good.

Peculiarities, Scar on L. side of nose from explosion Condition of Skin, Clear. reddish.

TONGUE, Coatings, Promptness of Movement, Slightly coated. prompt response.

PUPILS, Equality, Equal. Size, normal. Response to Light, non, Accommodation, non,

SIGHT, slightly impaired.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, slight ptosis of R. eye.

HEARING, Good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, slight Tongue, slight. Facial Muscles, General,

PATELLAR REFLEX, exaggerated. Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irritable.

Strength, Sounds, normal.

Size, "

Apex Beat, "

Murmurs, none noted.

ARTERIES,

Normal.

LUNGS,

Chest symmetrical

Expansion good.

B. sounds "

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

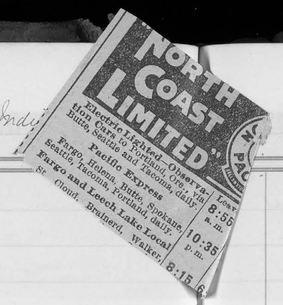
SLEEP, Present Amount and Character, Good.

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems rational, talks freely on reform & is quite religious. Says that at times he cannot refrain from saying things he does not want to say. Admits his crime. Did it without provocation. "Believes" poison was put in his food, tho he dont want to accuse anyone of it. Was always afraid he would be poisoned in prison. Physical condition good.

Personal and Medical History of David Blue. (Half breed Indian)



Whole No. 5616

Residence, Grant Co, Minn. From State Prison Stillwater.

Date Admission, July 2 1900.

Admitted by C. L. Chapple hour, 7 P.M.

How Sent, F. J. Wilson Dep. Wash. Co.

Sex, male Age, 24 yrs.

Civil Condition, Single.

Children, — Age Youngest Child, —

Occupation, Shoemaker.

Degree Education, Can read & write.

Profession of Religion, Not a church member.

Habits, not intemperate.

Nativity, Minnesota (Parents also born There)

Physicians Committing, H. Rhodes & E. S. Bolyn.

Correspondents,

No. for Year, 346

Insane Relatives, ?

Cause Exciting, ?

Cause Predisposing, ?

Form, Epileptic Insanity

Accompanying Bodily Disorder, Epileptic fits.

Suicidal or not, ?

Date of this Attack, ?

Duration, ?

No. of Attack, First.

No. of Admission, 1 here

Age First Attack, unknown.

Time of Leaving, July 26 - 1902

Time in Hospital, 2 yrs - 24 Ds.

Result, Improved. Dism'd. Nov 8 - 1902 by Bd of C.

Examination on Admission by Dr. Watson. *Date of* June. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear

MEMORY, Past Events, good

Recent Events, " Special Subjects, do

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Rather alert.

REASONING POWER, Ordinary Subjects, fair

Special Subjects, "

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed.

DELUSIONS, Systematized, None Transitory,

Special Subjects,

HALLUCINATIONS, None.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father,

Paternal Relatives, Nothing known.

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Indigestion.

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, from prison

Detail Date, Duration, and Character of Previous Attack, if any,

Has had several spells of uncontrollable passion

Sleep, disturbed Appetite, good Bowels, regular.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 7 in. PRESENT WEIGHT, 148½ USUAL WEIGHT, NUTRITION, good.

WOUNDS, Abnormalities, Scar on L. side of nose from explosion Condition of Skin, Clear. reddish.

TONGUE, Coatings, Promptness of Movement, Slightly coated. prompt response.

PUPILS, Equality, Equal. Size, normal. Response to Light, non, Accommodation, non,

SIGHT, slightly impaired.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, slight ptosis of R. eye.

HEARING, good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, slight Tongue, slight. Facial Muscles, General,

PATELLAR REFLEX, exaggerated. Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irritable.

Strength, Sounds, normal.

Size, "

Apex Beat, "

Murmurs, none noted.

ARTERIES,

Normal.

LUNGS,

Chest symmetrical Expansion good. B. sounds "

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good.

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems rational, talks freely on reform & is quite religious. Says that at times he cannot refrain from saying things he does not want to say. Admits his crime. Did it without provocation. "Believes" poison was put in his food, tho he don't want to accuse anyone of it. Was always afraid he would be poisoned in prison. Physical condition good.

Personal and Medical History of Daniel Blue.

1900

This patient was brought here from State Prison* Stillwater, by Dep. Sheriff Dr J.P. Chance + Dr W.R. Withrow, in good physical condition, with the following history:- No information given concerning previous history; Patient has epileptic fits. Derangement manifested by fancies, queer actions, violent paroxisms. Has been confined in crank cell in Prison hospital. Commitment based mainly on opinion of prison physician B.J. Merrill.

*Note: Patient sentenced to State Prison for life on - June 29'98 - for crime of murder in second degree.

On admission put upon B3E (Gen. N. Rpt. Complexion fair: hair black: eyes brown. Skin in good condition: Birth-mark on R. side of neck: Scars on nose: Is clean: One tooth gone - upper jaw: Behavior good: Exam. by J Howe + L.D. Page) —

July 17 Received on B3. Is quite well-behaved; assists on ward. Is somewhat despondent. July 17. Was
31 vaccinated unsuccessfully - July 31. No special change to note, in patients' condition —
Aug 31 Well-behaved: works on ward: is rather simple-minded. Oct 12. Dropped heavily on floor, and
Oct 12 performed actions which indicated convulsion. P. and Temp. were normal — Nov 1. Wt 167#.
Nov 1 Patient is frequently seen laughing to himself: at times, is very much depressed, because
Jany 30 1901 of his "life sentence" - Jany 30/1901. Struck nurse Rode, in face, without provocation —
July 1 Wt 171#. P.R. May 31. Still laughs to himself and sometimes feels very much depressed
May 31 and is found crying. Does no work. July 26. Struck patient J.W. Porter, in right eye —
July 31 No change in patients condition. Still gets in trouble with patients + nurses + strikes them
Aug 1 Wt 178#: Nov. Wt 184#: Jany 31 1901. But little change noticed, during 6 months: Excellent
Jan 31 1901 health: goes outside with crowd to work: also works some, on ward: habits tidy. -
plays games + attends amusements. Talks pleasantly, as a rule, but shows a
mild incoherence. Is doubtless, rather weak-minded. At times, argues about his
condition, and his punishment &c. Is very quick-tempered. At times, teases other
patients, and, when molested, becomes extremely violent, frequently having fights
with other patients.

Feb 1/02 Wt 174#. May 2 Wt. 162#. May 14 Transferred to B1 - constantly getting into trouble with C1 patients; quarrelsome + ugly to other patients; delusional; but talks quite sensibly about ordinary matters; works some on ward. July 26 No special change in condition; continues treacherous; fights; To day escaped into cornfield; disappeared.

Personal and Medical History of

Personal and Medical History of Charles Kasak

Whole No. 5617
Residence, Austin Minn.

Date Admission, July 3' 1900.
Admitted by Dr E. E. Wanous. hour, 11 Am
How Sent, A. S. Washburn Supt. Mower Co.
Sex, male, Age, 24 yrs.
Civil Condition, Single.
Children, — Age Youngest Child,
Occupation, Harness-maker.
Degree Education, Common school.
Profession of Religion, Catholic.
Habits, intemperate.
Nativity, Bohemia. (Parents also born there.)
Physicians Committing, E. S. Washburn & A. W. Allen.
Correspondents, Frank Kasak 304 River St. Austin, Minn.

No. for Year, 247.
Insane Relatives, None.
Cause Exciting, unknown.
Cause Predisposing, unknown.
Form, Epileptic Insanity
Accompanying Bodily Disorder, Epilepsy.
Suicidal or not, attempted with razor.
Date of this Attack, 1893.
Duration, 7 yrs.
No. of Attack, 1st Continuous.
No. of Admission, 1st
Age First Attack, 17 yrs.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. Wanous. *Date of* July - 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear. Confused for day or two after spell.
MEMORY, Past Events, good
Recent Events, " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct.
REASONING POWER, Ordinary Subjects,
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
no history in family,
Father, died - Brain fever.
Paternal Relatives, no history of insanity.
Mother, living. well.
Maternal Relatives, no history of insanity
Brothers and Sisters, Well.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Began having epileptic fits at 18 - Cause not known.
HABITS, Drinking and Smoking, yes.
HEADACHES, VERTIGO, OR CONVULSIONS, Convulsions
OCCUPATION, Healthy or not, leather-worker.
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, fair Appetite, good Bowels, regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 1/4 PRESENT WEIGHT, 157# USUAL WEIGHT, NUTRITION, well-nourished
WOUNDS, Abnormalities, Condition of Skin, Clear - reddish
TONGUE, Coatings, Promptness of Movement, Clear.
PUPILS, Equality, equal Size, normal Response to Light, normal Accommodation,
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good
COORDINATION, Arms, normal Legs, do. Grasp,
TREMORS, Hands, Tongue, Facial Muscles, General,
PATELLAR REFLEX, slow. Other Reflexes,
ARTICULATION, Slurred, normal. Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, regular
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES, fuge.
LUNGS, Chest full, symmetrical
Expansion good.
Breath sounds normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, good.
BOWELS, Present Condition, diarrhea

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient of low mentality. Began having fits at age of 18. Cause not known. They are more frequent now. When spells are coming on becomes badly confused & very much disturbed & very destructive. Physically well nourished, in good condition.

Personal and Medical History of Charles Kasak.

1900

This patient was brought here by Sheriff Jas Johnson Jr. - in fair physical condition, with the following history:- No history of consanguinity nor: heredity: Was drunk 3 or years: First symptoms of insanity manifested at age of 17 yrs. by epileptic convulsions: Disease has increased ever since: is variable: Now manifested by violence & attempts at suicide three days after attack: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: No confinement nor restraint employed: Has been treated by different doctors, without effect.

On personal examination appears fairly well & talks well.

On admission put upon B³ (G.H. R. Rpt. Complexion fair: hair light brown: eyes blue: skin in good condition: Has birthmark on L. hand. Vac. scar on R. arm - scar 1/4 in. over L. Eye: one on R. side of abdomen also on lower part of back: is clean: Teeth good: Behavior good: Exam. by M. Fahey

July 3/ 19 30 Received on B³. Patient is quite rational, but appears dull - Is subject to Epilepsy. July 9. Had a convulsion: was much confused afterwards. July 30. Vaccinated successfully: has Convulsions, averaging 2 or 3 a week. Physical health (apart from Convulsions) Seems good.

Aug 31 Is an epileptic: Condition comes on irregularly: is much confused after Convulsion

Oct 30 1901 No change to note specially: is still subject to Convulsions and has confused spells:

Jany 15 Is very much confused: Said "he had a dream that he died a month ago and was

31 still dead" - Jany 31. Condition remains about the same: Convulsions continue.

Feby 1 Still has Convulsions at irregular intervals; becomes very incoherent by spells. Apl 18. Has

Apl 18 visited by a friend. July 31. Patient somewhat demented & mind is failing -

July 31 1902 Physical health seems good. Aug 1. Wt 166# - Jany 31/02. Patient an Epileptic:

Jany 31 rather dull & confused, at times, from this cause. Convulsions are quite frequent.

T Feb. 1/02, 162# Works none. Has convulsions, averaging 2 or 3 daily

Sat times confused; always dull and inactive.

03 Jan 31. Has remained about the same as noted in preceding, during the past year. Is occasionally violent after having a convulsion.

Personal and Medical History of

Personal and Medical History of Henry Gripp

Whole No. 5620

Residence, Wasioja Tp. Dodge Co. Minn

Date Admission, July 5 1900

Admitted by Dr. C. L. Chapple hour, 7 P.M.

How Sent, J. P. Hunt J. of P. Dodge Co.

Sex, male Age, 22 yrs.

Civil Condition, single

Children, – Age Youngest Child, –

Occupation, Farm laborer.

Degree Education, Common school.

Profession of Religion, Lutheran.

Habits, Temperate.

Nativity, Germany. (Parents also born there)

Physicians Committing, G. H. Ransom & C. I. Brown.

Correspondents, Joe Gripp (uncle) Dodge Center - 2 mi. out. No. Telephone

No. for Year, 250

Insane Relatives, None.

Cause Exciting, unknown.

Cause Predisposing,

Form, Simple Melancholia

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, Threatened.

Date of this Attack, 4 mos ago.

Duration, 4 mos.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 22 yrs.

Time of Leaving, July 31. 1900 Died

Time in Hospital, 26 d

Result, Discharged Aug. 8. 1900 Recovered

Examination on Admission by Dr. Warnow. *Date of*

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, poor

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive, dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, of persecution Transitory,

Special Subjects,

HALLUCINATIONS, of hearing

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living - well.

Paternal Relatives, no history of ins.

Mother, living well.

Maternal Relatives, no history of ins.

Brothers and Sisters, well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

none

HABITS, Drinking and Smoking, none

HEADACHES, VERTIGO, OR CONVULSIONS, none

OCCUPATION, Healthy or not, farm

Detail Date, Duration, and Character of Previous Attack, if any,

no

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, none. Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, normal

PUPILS, Equality, Equal Size, normal Response to Light, slow Accommodation, slow

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, In bed. Legs, Grasp,

TREMORS, Hands, none Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, Refuses to talk Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, weak

Size, normal

Apex Beat, "

Murmurs, none

ARTERIES,

LUNGS,

Chest symmetrical

Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Uncle says patient was much disturbed, incoherent - had hallucinations. has been here but a short time (in this country) French people were after him who wanted to harm him - ran away from home - when brought here was confused, stupid & would not talk - eyes fixed & staring - muscles rigid.

Personal and Medical History of Henry Gripp.

1900

This patient was brought here by Sheriff Joel Tucker attended by John Gripp in fair physical condition with the following history: No consanguinity heredity nor intemperance in patient nor parents stated: First symptoms of insanity manifested four weeks ago by delusions of fear of bodily injury: Disease appears increasing: is variable: Derangement now manifested by insomnia, delusions of sound & smell: fear of personal injury: Not disposed to injure anyone: but has threatened to hang himself: No filthy nor destructive habits: No peculiarities previously shown: No severe diseases nor injuries to head: No confinement nor restraint employed: No treatment pursued: On personal examination noted that he came over from Germany about April 15' 1900 & began to manifest peculiarities immediately.

On admission put upon Infirmary Diet (G.H.N. Rpt. Complexion light: hair light eyes gray: Skin in good condition: Vac. mark on L. arm: Several small scars on hands: scar on L. knee: Is clean: Teeth all good: Behavior good: Exam. by H. Poapst) ——

July 5 Received on I.W: Appears frightened & confused: Is very dull: At night became very
9 restless and ran out on hall - July 9. Circumcised by Dr. - July 10. Appears somewhat brighter
10 Semp and Dressed - July 23. Visited by brother - July 27. Transferred to B[3] - Seems improved -
18 23 27
31 Visited by uncle & Taken Home.

Discharged

Personal and Medical History of

Personal and Medical History of Stephen Halpin

Whole No. 5621

Residence, St. Paul, Minn. Born there.

Date Admission, July 6' 1900

Admitted by Dr. C. L. Chapple hour, 7 P.M.

How Sent, Ed. Bazille & Co. of P. Ramsey Co.

Sex, male Age, 33 yrs.

Civil Condition, married

Children, none Age Youngest Child, —

Occupation, Grocery Clerk.

Degree Education, Common school.

Profession of Religion, Catholic.

Habits, morphine habit.

Nativity, Minnesota

Physicians Committing, Arthur Sweeney & F. A. Hunter.

Correspondents, Mrs. Mary E. Halpin (mother) 29 Garfield St. St. Paul, Minn.

No. for Year, 751

Insane Relatives, Father here.

Cause Exciting, morphine

Cause Predisposing, heredity.

Form, Morphine Insanity

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not.

Date of this Attack, Oct. '98 Commenced to use morphine again

Duration, 1 yrs. 8 mos.

No. of Attack, 2nd

No. of Admission, 2nd here (at St. Lukes hospital - St Paul)

Age First Attack, abt 27 yrs.

Time of Leaving, Aug. 14. 1900

Time in Hospital, 1 mo. 8 d.

Result, Disc. Nov. 6. 1900 Recovered

Examination on Admission by Dr. Jos. Eg. Wanous *Date of* July 6' 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused - sluggish.

MEMORY, Past Events, poor.

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull,

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

depressed -

DELUSIONS, Systematized, Transitory,

Special Subjects, of persecution.

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living - insane

Paternal Relatives, no history of insanity

Mother, living - well

Maternal Relatives, no history of insanity

Brothers and Sisters, all well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Morphinism.

HABITS, Drinking and Smoking, yes.

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, Clerk.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, fair Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION, poor.

WOUNDS, Abnormalities, Condition of Skin, sallow

TONGUE, Coatings, Promptness of Movement, coated. slow

PUPILS, Equality, equal Size, large Response to Light, slow Accommodation, slow

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, Very unsteady + Legs, uncertain - confined Grasp, in bed.

TREMORS, Hands, marked Tongue, marked. Facial Muscles, General,

PATELLAR REFLEX, lost Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, weakened

Size, normal

Apex Beat,

Murmurs, none noted

ARTERIES,

LUNGS,

Chest symmetrical
Expansion fair
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very restless tosses about in bed. Has been using morphine says 10 gr. a day. Appears confused - rather incoherent & cannot be relied upon. Physical condition much emaciated & anaemic.

Personal and Medical History of Stephen Halpin

1900

This patient was brought here by Court Commissioner Hedrick, in poor physical condition, with the following history:- No consanguinity, father in this Hospital (Timothy Halpin). Patient addicted to use of morphine. First attack of insanity occurred several years ago. Was in this Hospital from May 20'98 until July 30'98 (Vol 39. Pat. 241 No. 5046) two months after leaving here again commenced taking morphine. Disease appears increasing: is variable. Now has hallucinations & delusions that people are chasing him: uses morphine. Not disposed to injure anyone. No filthy nor destructive habits. No peculiarities previously manifested. No severe diseases nor injuries to head. Not under confinement, restraint nor medical treatment since leaving this hospital. On personal examination patient very nervous, has delusions. ——

On admission put upon T.W. (G.H.N. R'ph. Complexion dark: hair black & bald: eyes blue; condition of skin fair. Has several small scars on lower limbs & several on arms and a large one on left fore-arm: small scar on back of neck. Is clean. Has no good teeth: a few old roots. His behavior is good, but quite nervous. Examined by Harry Poapst) ——

July 6 Received on T.W. & put to bed. Is very restless and nervous: has been taking morphine to excess:
11 Has abscess on left arm: same dressed with hi. chloride. Patient put on treatment. July 11.-
20/24 Complained of cramp in Stomach. July 20. Shows improvement. July 24. Vaccinated unsuc-
30 cessfully. July 30 Patient well-behaved. Transferred to A'. medicine discontinued.
31 Sent out to Camp. at Oronoco. Patient clean & tidy. Is still quite nervous, at times
Aug 1/4/13 absent Camping. Augt. Returned from Camp. Aug 13. Seems quite rational: has parole:
14 Sent home.

Discharged

Personal and Medical History of

Personal and Medical History of Gust af Knutson.

Whole No. 562 3

Residence, New Richland, Minn.

Became resident of State & Co. in March 1865.

Date Admission, July 11 1900

Admitted by Dr. L. A. Linton hour, 3½ PM

How Sent, G.A. Wilson Jap P. Waseca Co.

Sex, male Age, 35

Civil Condition, Single.

Children, – Age Youngest Child,

Occupation, Farming

Degree Education, Common school

Profession of Religion, Lutheran

Habits, Temperate.

Nativity, Minn. (Parents born in Norway)

Physicians Committing, D.E. Cummings & E.A. Swartwood.

Correspondents, Mrs. Knutson. (Mother) Richland. (2) Minn.

No. for Year, 253

Insane Relatives, one sister. – father intemperate.

Cause Exciting, unknown.

Cause Predisposing, "

Form, Acute Melancholia

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, Not.

Date of this Attack, one year ago

Duration, 1 year.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 34 yrs.

Time of Leaving, November 9 - 1901

Time in Hospital, 1 Yr 3 mo 29 ds

Result, Improved: Discharged by B of C July 9 - 1902

Examination on Admission by Dr. Chapple *Date of* July 12 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear - sluggish

MEMORY, Past Events, fairly good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull - correct.

REASONING POWER, Ordinary Subjects, fair

Special Subjects, poor

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

depressed

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, Slow & dull - in mental operations - weak will

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

1 bro. 1 sister died consumption -
1 sister 1 uncle insane 1 uncle died "

Father, died consumption.

Paternal Relatives,

Mother, living well.

Maternal Relatives,

Brothers and Sisters, 1 sister has consumption

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

slight injury to head.

HABITS, Drinking and Smoking, both - not drunk for yrs.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, Regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 11 in. PRESENT WEIGHT, 172# USUAL WEIGHT, NUTRITION, good.

WOUNDS, Abnormalities, Scar on head. Condition of Skin, Some acne. on face

TONGUE, Coatings, Promptness of Movement, slight Coat. prompt.

PUPILS, Equality, Equal Size, dilated Response to Light, ½0 Accommodation, ½0.

SIGHT, good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, good. Legs, Grasp,

TREMORS, Hands, none Tongue, Facial Muscles, General,

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Regular

Strength, Sounds, fair

Size, nor.

Apex Beat, 5

Murmurs, None

ARTERIES,

LUNGS,

Chest symmetrical
Expansion fair -
B. Sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sound.

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Physical condition fairly good. Well nourished but skin anaemic & perspires freely. Evidently a neurasthenic condition some acne. Heart sounds not strong & more rapid than normal. Mentality evidently of rather low grade - education very limited. Facial expression weak lacking in will & energy. Eyes watery & evasive. Voice rarely raise voice so as to be heard. answers in indefinite evasive manner. Denies masturbation says has a girl & wants to get married - Has not seen nor heard from her for four years. Has worried about her a good deal - Expresses no definite delusions nor hallucinations but they are probably present. Says people have told him to do things but he has not seen them. Condition seems to be a mild melancholia. probably brought on by masturbation & brooding over his girl.

Personal and Medical History of Gustof Knutson.

1900

This patient was brought hre by Sheriff Frank Collins attended by Knut Rotsgard in fair physical condition, with the following history:- No history of consanguinity, one sister insane, father intemperate: First symptoms of insanity manifested one year ago. began acting strangely: Disease appears increasing, not variable: Derangement now manifested by extreme reticence & delusions that he is surrounded by many people who wish to capture him: Has of late shown disposition to injure others: No previous peculiarities manifested: No severe diseases nor injuries to head: No confinement nor restraint employed: No treatment pursued: On personal examination was exceedingly reticent, sitting with eyelids closed, presented a very melancholic appearance.

July 11 On admission put upon B3E (G.H.N. Rpt. Complexion dark: hair dark brown: eyes blue: Skin in good condition: mole on back of neck: 3 small scars on abdomen: four on left knee & three on right: 4½ in. scar on back of head: Slight eruption: Is clean: One tooth gone from either side of upper jaw also from lower. Exam by L.D. Page & J Hawe)

Aug 1/3 Wt 173#. P106. Anger. Stands about on hall; eyes closed & head bent forward; will not talk.
Nov 1 Inclined to be pugnacious, when disturbed. Nov 1. Will answer a few questions. Says "he is all
Dec 31 right". Dec 31. Condition about the same: Jany 31/901. No apparent change in patients
1901 condition: Seems melancholy & depressed. Stands about on hall. Yrs. Wt 162 lbs
Jany 31
Mar 1 Has been given daily electrical treatment, during month: no improvement: very stupid and seldom speaks, unless addressed & then only in undertone: habits cleanly: does no work. Usually stands about, against the wall. Apl 4. 20D's. Apl 7. Went to work on farm. May 1. 164#
Apl 4/7 visited by mother and sister. July 31. Still working on farm; is very quiet: rather slouchy,
July 6 but appears slightly brighter, mentally. Augs. Wt 156#. Oct 30 Still works on farm.
31
Nov 9 Has been working regularly on farm, and shows some mental improvement: talks more readily and shows more interest in things. Health good.
Taken home, today, by Cousin -

Discharged

Personal and Medical History of

Personal and Medical History of Harry J. Farrell.

Whole No. 5674

Residence, St. Paul, Minnesota.
Born in St Paul.

Date Admission, July 11 1900.

Admitted by Dr. E.J. Warnous hour, 7 P.M.

How Sent, Exr. Bazille J. of P. Ramsey Co,

Sex, male Age, 39 yrs.

Civil Condition, married

Children, Two Age Youngest Child, –

Occupation, Commercial clerk.

Degree Education, Commercial education

Profession of Religion, Catholic.

Habits, Has used Morphine since 1894.

Nativity, St Paul, Minn. (Father born in Ireland, Mother Canada)

Physicians Committing, Arthur Brenny & C. Werth.

Correspondents, M.B. Farrell. 817 Dayton Ave, St Paul, Minn.

No. for Year, 254

Insane Relatives, None.

Cause Exciting, Morphine?

Cause Predisposing, –

Form, Simple melancholia

Accompanying Bodily Disorder, Unknown.

Suicidal or not, not,

Date of this Attack, 1894 began using

Duration, 6 yrs,

No. of Attack, 1st continuous.

No. of Admission, 1 hre (at Hudson Sanitorium)

Age First Attack, 33 yrs.

Time of Leaving, Aug. 28. 1900

Time in Hospital, 1 mo. 17 d.

Result, Dsc. Nov. 6. 1900 Recovered

Examination on Admission by Dr. Warnous. *Date of* July 1900.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, fair.
Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.

REASONING POWER, Ordinary Subjects, good.
Special Subjects,
Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
depressed

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,
Melancholia

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living. Well.

Paternal Relatives, no history of ins.

Mother, living. Well

Maternal Relatives, no history of ins.

2 Brothers and 3 Sisters, well. 2 children well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Gall stones. Indigestion.
Morphinism.

HABITS, Drinking and Smoking, yes.

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, Travelling Salesman

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Insomnia Appetite, good Bowels, Constipated

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor.

WOUNDS, Abnormalities, Scars from Gallstone operation. Condition of Skin, Anaemic.

TONGUE, Coatings, Promptness of Movement, Coated.

PUPILS, Equality, Equal. Size, normal. Response to Light, slow Accommodation, slow.

SIGHT, wears glasses.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, normal Legs, normal Grasp,

TREMORS, Hands, none. Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

LUNGS,
Chest symmetrical.
Expansion good.
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient depressed & melancholic. Worries about his family. Feels tired & weak. Has not been able to sleep for some time & cannot Eat because of "stomach trouble." Has been using morphine to get quit. Has been troubled with indigestion. Condition Simple melancholia.

Personal and Medical History of Harry J. Farrell.

1900

This patient was brought here by Sheriff's deputy W.B. Farrell, in fair physical condition, with the following history:- No history of consanguinity or heredity: Addicted to use of morphine: had syphilis fifteen years ago: First used morphine in 1894 after operation for gall stones: Disease appears increasing: is variable: At once very depressed & absorbed in melancholic reflections: inattentive to business: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested Had syphilis fifteen years ago: No confinement nor restraint employed: Has received treatment in Sanitarium at Hudson & at Keely Institute in Minneapolis (1894-99.) On personal examination is listless, inattentive: moody, forgetful, absorbed in depressed thoughts & unable to sleep.
On admission put upon Inf. East (G. Wm. Rpt. Complexion light: hair dark brown: eyes blue: Skin in good condition: Scars on abdomen & L. middle finger. So clean: Several teeth filled but none gone: Behavior good: Exam by E. Moore.) ——

July 11/12 Received on T.W: put to bed - Patient vomited several times, through night - July 12. Visited by father - Patient put on treatment: hypodermics of Strychnia: also Spinal electricity - Vomits
23 frequently after meals - Stomach is washed, 3 hours after meal - July 23. Given clothes & got up.
30/31 Has parole. July 31. Patient is still quite nervous and neurasthenic - Habits are clean.
Aug 1/15 Is paroled. Goes out for exercise. Complains of severe pain in Stomach. Augt. Seems
28 much improved: Still has parole. Aug 28. Went home, with wife.

Discharged

Personal and Medical History of

Personal and Medical History of Frederick Dufour.

Whole No. 5675

Residence, St. Paul, Minnesota
Born in St. Paul.

Date Admission, July 11 1900.

Admitted by E. J. Warnow hour, 7 P.M.

How Sent, H. Gallick Ct. Com. Ramsey Co.

Sex, male Age, 42

Civil Condition, married.

Children, none, Age Youngest Child,

Occupation, Teamster.

Degree Education, None.

Profession of Religion, Catholic.

Habits, moderate drinker

Nativity, Minn. (Parents born in Canada)

Physicians Committing, A.W. Miller + J. J. Baker.

Correspondents, John Dufour. No. 6 Engine House. Cor Dales + Clinton Aves. St. Paul

No. for Year, 255.

Insane Relatives, None.

Cause Exciting, unknown,

Cause Predisposing,

Form, Primary Dementia

Accompanying Bodily Disorder, None mentioned

Suicidal or not, Not.

Date of this Attack, Jan. 1900

Duration, 7 mos.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 42 yrs.

Time of Leaving, May 29 — 1901.

Time in Hospital, 10 Mos 18 Days.

Result, Died: Cardiac

Examination on Admission by Dr. Warnow. *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish + confused.

MEMORY, Past Events, Impaired

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, Is very slow to comprehend + shows loss of will power

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, no

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, laborer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft-5½ PRESENT WEIGHT, 139 USUAL WEIGHT, NUTRITION, poor

WOUNDS, Abnormalities, Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, furred

PUPILS, Equality, eq. Size, large Response to Light, none Accommodation, slow

SIGHT,

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Impaired

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, marked Tongue, do. Facial Muscles, do. ~~General,~~

PATELLAR REFLEX, sluggish Other Reflexes, do.

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, heart lesion.

Strength, Sounds,

Size,

Apex Beat,

Murmurs,

ARTERIES,

LUNGS,
Chest symmetrical
Expansion good
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, loose

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is very dull of comprehension. Confused + incoherent. Is indifferent to his surroundings. Very nervous + has loss of will power. Condition is one following neurasthenia. Physically poorly nourished. Shows impediment in speech. Has a marked heart lesion - Mitral Stenosis - Aortic regurgitation.

Personal and Medical History of Frederick Dufour.

1900

This patient was brought here by Sheriff's deputy John Dufour, in poor physical condition, with the following history:- No history of consanguinity nor heredity: is a moderate drinker. First symptoms of insanity manifested in January 1900 by hallucinations & delusions Disease appears stationary, is variable: Derangement now manifested by loss of memory & incoherent talk: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: Received injury to head from fall: No confinement nor restraint employed: Medical treatment unknown:
On personal examination appears mentally weak: staring, laughing. On admission put upon B^{3} E. (G.H.N. Rpt. Complexion dark: hair black: eyes brown: skin in good condition: Vac. marks on R. arm. 2 Scars on R. thigh: 4 on R. knee: 2 on L. knee: So clean: 5 teeth gone from upper: only 5 & one stump left in lower jaw. Behavior good. Exam. M. Fahey)

July 11 Received in B^{3} - Appears dull, confused & weak: July 13. Transferred to T.W. and put to bed.
13 Severe, sluggish & incoordinate. July 17. Vaccinated successfully. July 31. No special Change -
Aug 15 Patient is restless and talkative. Sept 6. Visited by friends. Was transferred to B^{3} -
Sept 16 Seems very unsteady, and has involuntary passage of urine. Transferred to T.W,
Oct 4 and put to bed: requires catheterization. Oct 1. Wt 124# - Oct 15. Patient up on ward.
31 Transferred to Inf. - Jany 1901. Wt 136#. P 88. Patient seems to be failing -
1901
Jany 31 Is slowly failing, both mentally and physically. - Is also filthy in his habits. -
Feb 16 Wt 140# P 76. Is quiet: untidy. Feb 6. Appears to be failing. Feb 11. Visited by relatives -
16 Feb 26. Transferred to T.W. Feb 28. Patient is in bed: no apparent change. Mar 4. Is
Mar 4 gradually failing: very unsteady on feet & scarcely able to hold anything in his hands. Catarrhal.
19 Has several bedsores. Mar 25. Still failing: usually restless at night. Mar 31. Still restless
31 and failing gradually. Apl 1. Continues in bed: is gradually failing: very much demented.
Apl 1 Does not appreciate condition. Apl 30. Patient continues to fail. May 10. Is still
May 11 failing. May 29. Failed rapidly & died at 12^{05} PM.

Died

Personal and Medical History of

Personal and Medical History of Yip Oon (or Wan) Kim.

Whole No. 5697

Residence, Wabasha Co. Minn. Came here one year ago.

Date Admission, June 13, 1900.

Admitted by Dr. E. J. Warnes. hour, 7 P.M.

How Sent, M. Kennedy J. of P. Wabasha Co.

Sex, male Age, 35 yrs.

Civil Condition, Single.

Children, — Age Youngest Child,

Occupation, Laundryman.

Degree Education, ?

Profession of Religion, ?

Habits, Temperate.

Nativity, China (Parents also born there)

Physicians Committing, J.D.A. Low & W.F. Milligan.

Correspondents,

No. for Year, 257

Insane Relatives, unknown.

Cause Exciting, "

Cause Predisposing, "

Form, Acute Melancholia with Delusions

Accompanying Bodily Disorder, weak & nervous.

Suicidal or not, Cut throat.

Date of this Attack, About 7 wks. ago.

Duration, 7 weeks.

No. of Attack, 1st

No. of Admission, 1st (Has been in confinement 4 wks)

Age First Attack, 35 yrs.

Time of Leaving, July 23. 1900

Time in Hospital, 1 mo 10 da.

Result, Disc. Nov. 6. 1900 Recovered

Examination on Admission by Dr. Warnes *Date of* July 14 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Rather sluggish

MEMORY, Past Events,

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Nothing Known

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
None

HABITS, Drinking No and Smoking Yes.

HEADACHES, VERTIGO, OR CONVULSIONS, No.

OCCUPATION, Healthy or not, Laundryman

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Appetite, Bowels,
Normal.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6½ PRESENT WEIGHT, 175 USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, Cut over throat. Condition of Skin, Anaemic

TONGUE, Coatings, Promptness of Movement, Coated.

PUPILS, Equality, Equal. Size, Normal Response to Light, Normal Accommodation, Normal.

SIGHT, Good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good.

COORDINATION, Arms, Normal Legs, do. Grasp,

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

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, Weakened.

Size, Normal

Apex Beat,

Murmurs, None noted

ARTERIES,
Normal.

LUNGS,
Chest symmetrical
Expansion good -
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, Regular.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient has been worrying in regard to his work - says he has no worker no rates no money. Became despondent & attempted suicide - since in hospital he says he feels much better because County pays expenses - Case was perhaps one of acute melancholia - physical condition emaciated - has open wound on throat from attempts at suicide.

Personal and Medical History of Yip Don Kim.

1900

This patient was brought here by Sheriff G. G. Dredman in poor physical condition with the following history: Nothing known concerning previous history. Came to this country one year ago. First symptoms of present attack manifested about seven weeks ago. Disease appears stationary. Patient cannot sleep; thinks he ought to have money; is afraid that chinamen will kill him. Attempted to cut throat. Was confined in Plainview two weeks & in Wabasha two weeks. Has been given Sodae Bromide. On personal examination is very weak & nervous. On admission put upon B3 E (G.H.N. Rpt) Complexion dark: hair black: eyes brown: skin fairly clear: Blotches, apparently birth-mark, entire length of spine. Scar behind L. ear: on back of head (Trau.) & on R. knee. Throat cut - wound 4 in. long. Two teeth gone front upper jaw - replaced by false ones. Behavior good: Exam. by M. F. Fahey)

June 13 Received on B3. Has a partly healed laceration of the throat, caused by attempted suicide -
30 Is depressed and agitated - June 30 Patient still seems much depressed. Is anxious to get away.
July 17/23 Visited by Cousin. July 23. Visited by friends and Taken out.

Discharged

Personal and Medical History of

Personal and Medical History of William Mann.

Whole No. 5628

Residence, Spring Valley, Minn.

No. for Year, 238.

Insane Relatives, Father was insane - brother committed suicide.

Cause Exciting, Unknown

Cause Predisposing, "

Date Admission, July 1st 1900

Admitted by Dr. C. L. Chapple hour, 7 P.M.

How Sent, C.V. Farrington J. of P. Fillmore Co.

Form, Acute Melancholia

Accompanying Bodily Disorder, none mentioned.

Sex, male Age, 30

Suicidal or not, Not.

Civil Condition, married.

Date of this Attack, Feb. 1900.

Children, Two Age Youngest Child,

Duration, 5 mos.

Occupation, Farmer.

No. of Attack, 1st

Degree Education, Common school.

No. of Admission, 1st

Profession of Religion, Not a church member.

Age First Attack, 30 yrs

Habits, Not intemperate

Time of Leaving,

Nativity, Minn. (Parents born in America)

Time in Hospital,

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

Result,

Correspondents, Kate Mann (wife) Spring Valley Minn. 3 mi. out.
Chas Byers (father-in-law) Spring Valley.

Examination on Admission by Dr. Mahoney *Date of* July 14' 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish - Confused.

MEMORY, Past Events, Impaired -

Recent Events, " Special Subjects, do.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull - Illusive.

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State, Appreciates condition.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory,

Special Subjects, On religious subjects.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, Thinks the catholics & protestants are going to quarrel & he don't know which side to join.

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead - Insane.

Paternal Relatives, no other history of ins.

Mother, living well.

Maternal Relatives, no history of ins.

Brothers and Sisters, living & 1 bro committed suicide
& children living & well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Stomach trouble.

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Farmer.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Insomnia Appetite, poor Bowels, Constipated

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 11 in. PRESENT WEIGHT, 150 lbs USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, Condition of Skin, sluggish.

TONGUE, Coatings, Promptness of Movement, slow - coated.

PUPILS, Equality, Equal - Size, normal Response to Light, slow Accommodation, slow.

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, Normal Legs, do - Grasp,

TREMORS, Hands, None. Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, Chest walls thick.

Size, Normal

Apex Beat,

Murmurs, None noted.

ARTERIES, full.

LUNGS, Chest symmetrical
Expansion good.
Breath sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, irregular.

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is confused & depressed. Is delusional on various subjects. Believes his stomach will not digest food. Also says he has been chosen to go out to preach the Bible altho he does not believe in it.
Physical condition good.

Personal and Medical History of William Mann.

1900

This patient was brought here by Sheriff E. K. Blexrud attended by N.B. Nelson, in fair physical condition with the following history: No consanguinity: father was insane once & one brother committed suicide. No intemperance in patient nor parents: First symptoms of attack manifested in Feb. 1900 by delusions: Disease appears increasing: Is variable with irregular rational intervals: Derangement now manifested by delusions on various subjects: Not disposed to injure anyone: No filthy nor destructive habits: Patient had convulsions when a boy: No confinement nor restraint employed: No treatment pursued. On personal examination has delusions on various subjects. Talks incoherently.
On admission put upon B3 E/ G.H.N.Rpt. Complexion dark: hair dark brown: eyes gray: skin in good condition. Little finger of L. hand crooked: 2 scars on L. thumb & 1 on Rt thumb. Is rather dirty. 1 tooth out upper jaw & 3 snags. Behavior good. Exam. Dr. Fahey & (John Howe). July 14. Received on B3. Is confused, virational & incoherent. July 19. Is extremely restless: barricaded door at night. July 25. Patient more confused & failing physically. July 27. Transferred to I.W. July 31. Condition shows no special change. Is still on B3.
Aug 3. When received on ward, given bath & put to bed. T 101. P 76. R 30. was put on treatment. Refused medicine & food Aug 4. Is extremely restless. Aug 16. Was restless through night. Visited by friends — Aug 20. Visited by friends. Is removed from Hospital contrary to advice of medical Superintendent. Augus. Returned from home: very much confused and excited. Aug 29. Transferred to I.W: put to bed: has to be fed by nurse. Sept 10. Is up and dressed. Oct 21. Transferred to B1 E. Oct 31. Is quite indifferent and stubborn must be urged to his meals. Nov 1. 150#. Dec 1 visited by wife & brother. Dec 9. Attacks nurses while outside. Dec 20. Visited by friends. Jany 31/1901. Physical condition very good. — Considerable improvement: also some improvement mentally. Still very sluggish: has to be urged to go to Dining-room or to do any work. Goes out for exercise. Manner sullen & stubborn. Is quite incoherent at times. Has had static electricity during the month. — Wt 175#. Mar 29. Visited by friend. Mar 29. Has been receiving static electrical treatment during past 2 months & has shown some improvement: Works some on ward: still very dull & confused, at times. Health good. Transferred to B2. Apl 30. Little change, since last note: inclined to be troublesome towards other patients: is, at times, confused: conversation irrational. May 1 175#. Health good. July 31. very little change can be noticed: is rather restless: does very little. Inclined to walk away from crowd: takes no interest in anything. Is slightly demented.
Transferred to C1. (was violent): Nov 2. Wt 165#. Jany 31/02. Behavior has been somewhat variable: at times, confused & violent; and, at other times, quiet: doing some work on ward: and talking quite rationally: but, in general, has shown no improvement: habits quite big: shows little interest in surroundings: indifferent about going home.

Personal and Medical History of

Feb. 1/02 Wt. 176#; Apr. 5 Visited by friend. June 6 Visited by friend. June 30 Visited by friend. July 4 Visited by friend. Aug. 1/02 153#. Sept 4 Visited by father-in-law. Dec. 6 Visited by brother. Is gradually becoming demented; confused; slow in answering questions; quiet & peaceable; but may become violent without warning; does very little & is untidy; health good.

Personal and Medical History of Isaac Seeley.

Whole No. 5629

Residence, Morristown, Rice Co. Minn.

Date Admission, July 14 1900.

Admitted by Dr. E. L. Chapple hour, 4 Pm

How Sent, James Hunter Supt. Rice Co.

Sex, male Age, 78

Civil Condition, married

Children, five Age Youngest Child, —

Occupation, Lecturer & preacher.

Degree Education, High School.

Profession of Religion, Christian.

Habits, Not intemperate.

Nativity, Newyork. Father Conn. Mother N. J.

Physicians Committing, R. N. Jackson & P. M. Rose.

Correspondents, Dr J. S. Seeley (Son) Faribault Minn.

No. for Year, 239.

Insane Relatives, None.

Cause Exciting, La Grippe

Cause Predisposing, -unknown.

Form, Acute Dementia

Accompanying Bodily Disorder, La Grippe 8 yrs ago. a few epileptic fits years ago

Suicidal or not, Threatened.

Date of this Attack, 8 yrs ago.

Duration, 8 yrs.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 70 yrs.

Time of Leaving, Dept. 22. 1900 Hrs

Time in Hospital, 2 m. 8 d.

Result, Died. Senile dementia

Examination on Admission by Dr. Wasson *Date of* July 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear, sluggish at times.

MEMORY, Past Events, Impaired

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State, Is very fearful.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

depressed. - more by spells.

DELUSIONS, Systematized, Transitory,

Special Subjects, of persecution,

HALLUCINATIONS, Hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead.

Paternal Relatives, no history of insanity.

Mother, dead.

Maternal Relatives, no history of insanity

Brothers and Sisters, 9 all well. 5 Children well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

none.

HABITS, Drinking and Smoking, none.

HEADACHES, VERTIGO, OR CONVULSIONS, none.

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION, fairly normal

WOUNDS, Abnormalities, none Condition of Skin, clear,

TONGUE, Coatings, Promptness of Movement, grayish coating.

PUPILS, Equality, Equal. Size, normal Response to Light, normal Accommodation, normal

SIGHT, fair

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, somewhat impaired.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, Slight. Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow, yes.

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

Slight sclerosis

LUNGS,

Chest symmetrical

Expansion good.

Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is depressed & frequently began crying during examination fearing he says something will happen to him & his children. Calls for Flora (his daughter) when ever any one passes his door. Talks to himself. Hears voices he says & answers their questions. Condition due to senility.

Personal and Medical History of Isaac Seely.

1900

This patient was brought here by Sheriff J.B. Thompson attended by H.A. Dorn, in poor physical condition, with the following history No consanguinity, heredity nor intemperance in patient nor parents. First symptoms of insanity manifested eight years ago; had La grippe & since has been failing mentally & physically: Disease appears increasing: is variable: is better at times but never regains his mental & intellectual grasp: Derangement now manifested by suspicion of everybody: Talks about & to people who are absent or dead: Swears at wife & is abusive & violent at times: Has threatened suicide: No filthy nor destructive Habits: No peculiarities previously mentioned: Had a few epileptic fits years ago: No treatment pursued. No confinement nor restraint employed. On personal examination shows loss of memory: perversion of facts: hallucinations: Entire change of demeanor from years ago. On admission put upon M. E. C. H. N. Rpt Complexion light: hair light gray eyes blue: Skin in fair condition Lump on L. side nose: Scars on back of L. hand: sores on thigh & calf of L. leg. Is rather dirty Teeth false. Behavior good. Is very feeble & helpless.

July 14 Received on T.W. and put to bed - Limbs badly swollen: weak physically and is hardly able to get around: scarcely knows where he is - At times, calls out to imaginary persons. —
31 Condition Continues the same - Aug 8. Appears to be failing, both mentally & physically -
Aug 30/3 Restless, all night - Sep 11. Refused nourishment - Continues to fail -
Sep 11 Continues to fail and died at 5 53 Pm.

Dec

Personal and Medical History of

Personal and Medical History of Hans A. Hanson

Whole No. 5637

Residence, Faribault Co. Minn

Date Admission, July 22 1900

Admitted by Dr. C. L. Chapple hour, 7th Pm.

How Sent, L.L. Bullis Sheriff Faribault Co.

Sex, Male Age, 19.

Civil Condition, Single

Children, Age Youngest Child,

Occupation, Farming

Degree Education, Common school.

Profession of Religion, Nor. Lutheran.

Habits, Temperate.

Nativity, Norway (Parents also born there)

Physicians Committing, F.E. Cooper & A.J. Franklin.

Correspondents, J.O. Hanson (bro) Wells, Minn. (in town)

No. for Year, 1st.

Insane Relatives, None.

Cause Exciting, Became overheated.

Cause Predisposing, unknown.

Form, Acute Melancholia

Accompanying Bodily Disorder, Pulse rapid - Low fever. pain in head - appears sick

Suicidal or not, Not.

Date of this Attack, About May 1 1900.

Duration, Nearly 3 mos.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 19 yrs.

Time of Leaving, July 22 1900 (Deported to Norway)

Time in Hospital, 1 yr, 6 mos 19 ds

Result, Unimproved: Disch May 10/1902 Pm

By Bof C.

Examination on Admission by Dr. Wanous *Date of* July 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused - sluggish

MEMORY, Past Events, Impaired

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull. alert.

REASONING POWER, Ordinary Subjects, poor,

Special Subjects, "

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects, of fear.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Died - accident

Paternal Relatives,

Mother, living - well.

Maternal Relatives,

3 Brothers and ~~Sisters~~, all well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Sunstroke - masturbation

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, Headache.

OCCUPATION, Healthy or not, farmer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Impaired Appetite, Bowels,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, ——— PRESENT WEIGHT, ——— USUAL WEIGHT, NUTRITION, Anaemic

WOUNDS, Abnormalities, none - Condition of Skin, sallow

TONGUE, Coatings, Promptness of Movement, Coated

PUPILS, Equality, equal Size, large Response to Light, slow Accommodation, normal.

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good

COORDINATION, Arms, normal Legs, do Grasp,

TREMORS, Hands, ~~yes~~ none Tongue, Facial Muscles, General,

PATELLAR REFLEX, slow Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irritable.

Strength, Sounds, none

Size, normal

Apex Beat, normal

Murmurs, none noted

ARTERIES,

flabby

LUNGS,

Chest symmetrical

Expansion good.

B. sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Appears fearful - Confused - depressed - Has delusions of people being after him to do him harm. Is a masterbator & very neurasthenic which has caused present condition of melancholia.

Personal and Medical History of Hans A. Hanson.

1900

This patient was brought here by Sheriff Sandy McDonald in fair physical condition, with the following history. No history of consanguinity, heredity nor intemperance in patient nor his parents: First symptoms of insanity manifested about May 1st 1900. Acts strangely, talks incoherently: Disease appears increasing, is variable: Derangement now manifested by fear that someone is after her. Not disposed to injure anyone. Not filthy but is careless about his dress. Before accession of disease was quick-tempered. No severe diseases nor injuries to head except two recent convulsions: Has had to be watched & has been treated by physicians - no benefit. On personal examination will not answer questions readily: pulse rapid. Temp. high. Complains of pain in head. appears sick.

On admission put upon Infirmary & G.H.R. Rpt. Complexion light: eyes blue: hair light: skin in good condition: vac. marks on R. arm. 2 small scars on L. Breast. Is clean: Teeth all good. Behavior good.

1900 Exam. by H. Knapstad. M.D.

July 25/ 26 Put on I.W. Given Salts 1 oz: answers questions rationally but is dull & despondent. July 25 Salts 1 oz: med. T.i.D. T.P.R. are normal. Is very restless: appetite good. July 26 Still very restless: asks 27/ 28 for his clothes. July 27 More quiet: habits neat. July 28 Constipated: given Salts: is quite despondent: 29 wants to go back home. July 29 Up, & ward. Augs. 2 to B2. Aug 3 very stubborn: had to be taken out Aug 6 by force. Aug 6 Appears brighter: more cheerful: plays checkers &c: wants to go out doors. — 7 (14 day record up) - Physical condition somewhat improved. Is on tonic T.I.D. Inclined to be 16 about on beds, during day: does nothing: stubborn: talks quite rationally. Aug 16 Tried to escape from Grove. Sept 1. Wt 135# - Sept 12 visited by uncle. Oct 31 Very little change: has little Sept 1/ Oct 31/ 1901 ambition: tries to run away: sullen & stubborn. Nov 1. 138# - Dec 1. 144# (had to be weighed Jan 11/ 21 (by force). Jan 11/1901 Exchanged blows with Jos. Sutton over a game of cards. Jan 21 Attempted to run away, while outside. Jan 31. Plays cards & billiards, a good deal of the time. Is stubborn and Feby 1 surly: does no work: very little change to be noted. Feby. Wt 146# April. Attempts to escape, April 1/ by running into tunnel. April 8. Jabed. T 100 4/10 P 90 R 20. Transferred to I.W. Complains of 13 headache, & is excited & melancholy: put on liquid diet. April 13. Constipated: given Enema. 15/ 29/ On medicine. 2 Teaspoonfuls T.i.D. April 20. Up, & ward. April 22. Transferred to B2 - 30 Scarcely any mental change: is surly & abusive in language: laughs & talks irrationally. "Thinks nothing is the matter with him" and "wants to be sent home": slouchy in habits. May 1 Constantly walking about ward, aimlessly - May 1. 144 1/2 lbs. June 15. Fainted, while in June 15 dining-room. Transferred to I.W. Temp. normal: given brandy (1 oz) - Medicine T.i.D. 16/ 20 Appears as usual: eats well: bowels regular. June 20. 2 to B2. July 31 - No change - July 31 Watches every opportunity to escape: very irrational & abusive. Aug 11. Transferred to C! Aug 11 (of late, has been more than usually noisy, destructive & confused. Nov 2. Wt 131#. - Dec 28/ 29 Eloped, today. Dec 29. Was returned by farmer. (has tried to escape, frequently) —

Personal and Medical History of Hans. A. Hanson

1901

Jan 31 Still noisy & extremely irrational: slovenly in habits: does no work. Still tries to get away.

Feb 1/ 12 Feb 1/02 Transfered to D.V.E. Refuses to eat. very delusional; confused; tries to elope; fed by tube; Feb 11 Visited by brother; improving physically; eats well; little improvd mentally; Feb 12 Taken home by brother to be deported to Norway by instruction of State Agent Gates.

Personal and Medical History of Jacob Eichhorn.

Whole No. 5634

Residence, St. Paul, Minn.

Date Admission, July 26 1900.

Admitted by Dr. C. L. Chapple hour, 7 P.M.

How Sent, by Gallick Ct Com. Ramsey Co.

Sex, male Age, 43 yrs.

Civil Condition, married.

Children, nine Age Youngest Child,

Occupation, Cooper.

Degree Education, Common school.

Profession of Religion, not a church member.

Habits, not intemperate.

Nativity, U.S.A. (Parents born in Germany)

Physicians Committing, A.B. Aucker + Haldor Sivers.

Correspondents, Mrs. M. L. (Jacob) Eichhorn. 173 S. Wabasha St. St. Paul.

No. for Year, 244.

Insane Relatives, Unknown.

Cause Exciting, unknown

Cause Predisposing,

Form, Organic Brain Disease

Accompanying Bodily Disorder, Paresis of limbs especially Right Difficulty in speech.

Suicidal or not, not.

Date of this Attack, 11 mos. ago.

Duration, 11 mos.

No. of Attack, 1st.

No. of Admission, 1st.

Age First Attack, 42 yrs.

Time of Leaving, Feb. 7 1901.

Time in Hospital, 6 mo. 12 da.

Result, Died. Paresis.

Examination on Admission by Dr. Wanous *Date of* 7/— 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

sluggish.

MEMORY, Past Events, Impaired.

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, fair.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

Patient responds very slowly, delayed reflexes

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead. alcoholism

Paternal Relatives, no history of insanity

Mother, living - well.

Maternal Relatives, no history of insanity

Brothers and Sisters, 3 Children nine - 1 bro dead - others well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

None.

HABITS, Drinking and Smoking, None

HEADACHES, VERTIGO, OR CONVULSIONS, headache.

OCCUPATION, Healthy or not, Cooper.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Insomnia Appetite, good Bowels, Constipated.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, —— PRESENT WEIGHT, —— USUAL WEIGHT, NUTRITION, poor.

WOUNDS, Abnormalities, no Condition of Skin, bronzed.

TONGUE, Coatings, Promptness of Movement, coated - slow.

PUPILS, Equality, Equal. Size, large Response to Light, none Accommodation, none

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, incoord. Legs, normal Grasp,

TREMORS, Hands, present Tongue, does. Facial Muscles, General,

PATELLAR REFLEX, delayed. Other Reflexes,

ARTICULATION, Slurred, yes. ~~Hesitating~~ do Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irregular.

Strength, Sounds, Clear.

Size, normal

Apex Beat, normal

Murmurs, none noted.

ARTERIES,

LUNGS,

Chest symmetrical
Expansion fair
Breath sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, poor.

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems very dull to comprehend. is very unstable + incoordinate. shows motor impairment + has genral symptoms of paresis - Physical condition poor. has incontinence + involuntary movement of bowels

Personal and Medical History of Jacob Eichhorn

1900

This patient was brought here by Sheriff's Dep. Hanson attended by J. N. Boucher, + Mrs Eichhorn + Mr Poor physical condition with the following history:- Consanguinity + heredity unknown: No history of intemperance in patient nor parents: First symptoms of insanity manifested eleven months ago. by difficulties in speech + locomotion: patient has been in City + Co Hospital St. Paul: Disease appears increasing: Is variable: with irregular rational intervals: Derangement now manifested by dementia: Not disposed to injure anyone: Habits untidy in bed: No peculiarities previously manifested: No severe diseases nor injuries to head: Has been confined in room: has been given Hot baths + rest. On personal examination has paresis of limbs, especially Right. difficulty in speech is demented. On admission put upon I.W. G.H.U. Rgt. Complexion dark: eyes gray: Skin dark: Vac. on L. arm: bruise on L. arm on both elbows, on R. lip. Hernia on L. side. Is clean: 12 teeth in upper jaw: 14 in lower: Behavior good: Exam by A. Poapst.

July 26 Received on ward 7:30 P.M. Given bath: put to bed: very weak + restless; confused + dull mentally: T 98. P84. R 22: speech hesitating— July 30. Manifests some twitching of extremities and face: (14 day record up): Aug 23. Must be fed by nurse: is frequently restless through the night Sept 5. Wt 152#. Sept 26. Refused both nourishment + medicine. Visited by wife - Oct 17. Patient had several Convulsions, for about 2 hours, losing Control of right arm. Nov 1. Wt 155#. Patient is suffering from dysentery. — Has twitching of muscles, occasionally: Often, has "laughing spells". Jany 31. Is growing weaker: has several bed sores. Febys. Patient seems very restless: is unable to speak: appears to be failing. Feb 6. Takes little nourishment. Feby 7. Unable to take any nourishment. Continued to fail and Died at 3:35 P.M.

Died

Personal and Medical History of

Personal and Medical History of Gustave Evrard

Whole No. 5635
Residence, Faribault Co, Minn.

No. for Year, 245
Insane Relatives, none.
Cause Exciting, no apparent cause
Cause Predisposing, previous attack.
Form, Alcoholism

Date Admission, July 30 1900
Admitted by Dr. E. Z. Wanous hour, 11:30 A.M.
How Sent, Hd. Bullis J. of P. Faribault Co.
Accompanying Bodily Disorder, none mentioned
Sex, male Age, 51 yrs
Suicidal or not, not.
Civil Condition, married
Date of this Attack, July 23 1900.
Children, 9. Age Youngest Child,
Duration, 7 days.
Occupation, farmer.
No. of Attack, several.
Degree Education, Can read & write.
No. of Admission, 1st
Profession of Religion, not a church member.
Age First Attack, 45-50
Habits, drinks
Time of Leaving, Oct 30/1900
Nativity, Germany (Parents born there)
Time in Hospital, 3 months.
Physicians Committing, H. Cooper & F. R. Hunt
Result, Recovd Discd Apl 30/1901.
Correspondents, Julia Evrard Blue Earth City Minn. (Mje) 8 mis. N.E. from city.

Examination on Admission by Dr. E. Wanous *Date of* 2 Aug 1900

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good
Recent Events, Special Subjects, do,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

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

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
exalted.

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, Patient is easily irritated - at which times he becomes maniacal

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead.
Paternal Relatives, no history of ins.
Mother, dead.
Maternal Relatives, no history of ins.
Brothers and Sisters, well. Children 9 well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
none.

HABITS, Drinking and Smoking, excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, farmer.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9½ PRESENT WEIGHT, 138 USUAL WEIGHT, NUTRITION, fairly nourished
WOUNDS, Abnormalities, slight ptosis of R. eye. Condition of Skin, sluggish.
TONGUE, Coatings, Promptness of Movement, clear
PUPILS, Equality, Equal. Size, normal Response to Light, none Accommodation, do.
SIGHT, Myopic.
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, Good.
COORDINATION, Arms, normal Legs, do. Grasp,
TREMORS, Hands, none. Tongue, Facial Muscles, General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, normal. Hesitating, Slow,
FACIAL EXPRESSION, Sensibility, normal.
HEART, Regularity, irregular.
Strength, Sounds, Clear
Size, enlarged.
Apex Beat, displaced down + forward sternum
Murmurs, Aortic present (+)
ARTERIES, full.
LUNGS, Chest symmetrical Expansion good. Breath sounds - none - Chest emphysematous.

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, irregular.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient rather exalted - very talkative - has had considerable trouble with his family. Is a hard drinker + while drunk threatens his family. Area of cardiac dullness is obliterated by emphysematous condition of lungs + peculiar shape of chest. Apex beat down + increased by hypertrophy of left ventr.

Personal and Medical History of Gustave Ecvend.

1900

This patient was brought here by Sheriff McDonald in fair physical condition with the following history: No consanguinity or heredity. Patient drinks to excess. First symptoms of insanity manifested several years ago: has had a number of attacks since lasting from one day to two weeks: First symptoms of present attack manifested July 23 1900. Threatened to kill his family: Disease appears increasing, is variable with irregular rational intervals. Derangement now manifested by thinking family are not obedient & threatens to kill them: Keeps a loaded gun in his possession: Is disposed to injure others: No filthy nor destructive habits: Has always been irritable, quick-tempered & easily frustrated. Received injury to head when 10 years old: In 1899 was put under bonds to keep peace: No treatment pursued. On personal examination has scar on head: is very talkative & excited: denies statements of all witnesses.

July 30 On admission put upon B³ E/ F. Att. Rpt. Complexion dark: hair black: eyes brown: skin in fair condition: Scar on left arm & at base of spine. Is clean: 2 teeth gone from upper & one from lower jaw: Behavior good: Exam L.B. Page)

" Received on Ward 11 30 Gwin bath. Aug 1. Shows no apparent mental defect. Is well-behaved.

Aug 1/12 physical condition good. Aug 12. (14 day record up). Sept 21. Transferred to A. —

Oct 7/26 Wt 158#. P 90. Oct 26. Works outside, with carpenter. Oct 30. Has made good improve-

30 - ment and was sent home.

Discharged

Personal and Medical History of

Personal and Medical History of Louis Torkelson Brua.

Whole No. 5636	No. for Year, 266
Residence, Freeman, Minn.	Insane Relatives, brother & sister.
	Cause Exciting, monotony of occupation.
Date Admission, July 30 1900	Cause Predisposing, heredity, probably.
Admitted by Dr. O.C. Heyerdale hour, 11 a.m.	Form, Acute Hallucinosis
How Sent, H. Blackmer J. of P. Freeborn Co.	Accompanying Bodily Disorder, none mentioned
Sex, male Age, 41	Suicidal or not, not.
Civil Condition, married.	Date of this Attack, April 1900
Children, 5 Age Youngest Child, —	Duration, 4 mos.
Occupation, Farmer.	No. of Attack, 1st
Degree Education, Common school	No. of Admission, 1st
Profession of Religion, Lutheran	Age First Attack, 41 yrs.
Habits, Not intemperate.	Time of Leaving, November 22nd 1901
Nativity, Iowa (Parents born in Norway)	Time in Hospital, 1 Yr. 3 mo 23 ds
Physicians Committing, O.A. Burton & H.H. Wilcox	Result, Improved. Died May 10 - 1902
Correspondents, H.O. Nilus Boys Silver Lake, Iowa.	(bro-in-law) By Bafe.

Examination on Admission by Dr. Lars Brua. *Date of* Aug. 1900

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, poor.
Recent Events, " Special Subjects, do.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull

REASONING POWER, Ordinary Subjects, poor
Special Subjects,
Own Mental State, says he is weak.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
indifferent.

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS, hearing (?)
ILLUSIONS,
SUMMARY, Inattentive - very dull.

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
(Question concerning Insanity, Consanguinity, Epilepsy, HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead.
Paternal Relatives,
Mother, living.
Maternal Relatives,
Brothers and Sisters, bro. died - sister in hospital.
(especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).
malaria.

HABITS, Drinking and Smoking, yes.
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, farming.
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, fair Appetite, fair Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 11¼ PRESENT WEIGHT, 158# USUAL WEIGHT, NUTRITION, Emaciated
WOUNDS, Abnormalities, Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, slow - coated.
PUPILS, Equality, Equal. Size, normal. Response to Light, normal. Accommodation, do.
SIGHT, good.
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, fair
COORDINATION, Arms, normal Legs, do. Grasp,
TREMORS, Hands, slight Tongue, do Facial Muscles, do. General,
PATELLAR REFLEX, lost. Other Reflexes,
ARTICULATION, Slurred, ? Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, irritable
Strength, Sounds, Clear.
Size, normal.
Apex Beat,
Murmurs, none noted.
ARTERIES,

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

LUNGS,
Chest symmetrical
Expansion good.
R. sounds normal -

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, fair
BOWELS, Present Condition,

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is of very low mentality, is indifferent & slow to respond. Thinks someone is trying to take away his property. Has refused to work on that account.
Physically is emaciated & generally sluggish

Personal and Medical History of Louis Torkelson Brua.

1900

This patient was brought here by sheriff M. Mitchell attended by K. O. Nihus in fair physical condition with the following history:- Parents very distantly related: one brother & one sister insane: Patient not intemperate: First symptoms of insanity manifested in April 1900 by fear of losing property: talked about people taking it & thought they had control of it: Disease appears increasing: not variable: Refuses to work because he thinks others control his property: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously noted: No severe diseases nor injuries to head sustained but had headaches 2 yrs. ago. Has never been under restraint nor medical treatment. On personal examination is apathetic in appearance, eyes staring, hands moving restlessly, indisposed to talk but answers questions.

July 30 On admission put upon B³ E (G.H.N.Rpt. Complexion dark: Hair & eyes brown. Mark on L. thumb: Scars - between shoulders: 1½ in. on L. breast: ½ in. on R. thigh - small on L. leg. Scar & bruise on R. hand. Scar on L. side face. Eruption on legs & arms: Dentity Teeth good: Exam by L.D. Page.)

" " Received in Ward: given bath T 100 P 80 R 20. Patient seems confused; talks irrationally and incoherently. Aug 1. Dull & incomprehensive. Walks about aimlessly - Aug 3. put on treatment; Aug 1/3 '7/12 Still very much confused - Aug 12. Still dull, confused: asks frequently to go home. Sept 1/10 (14 Day record up) - Sept 1. Wt 155 #. P 68. Sept 20. was visited by his relatives - 27 Is somewhat brighter. Taken home by relatives. Dec 21. Was returned. Is again much Dec 11/26 confused and very dull. Seems to fear that he will be hurt" - Dec 26. Attempts to walk Jany 31 1901 away from crowd. Jan 31/1901. Stands around on ward: depressed and seldom talks: Feby 1/22 Is given electrical treatment. Feby. Wt 151 # P 72. Feb 28. Seems somewhat brighter, April 17 but still delusional. Does no work. April 17. Has to be fed by tube, as he refused nourishment - May 1 Is very much confused - June 1. Seems somewhat better. July 31. Is taking nourishment July 31 regularly and is somewhat improved mentally - Aug 1. Wt 139 #. Oct 31. Has improved Oct 31 considerably: not so restless as he was & has better health: seems brighter also. (During Nov 1 August was fed several times, by a tube): still worries some. Nov 1. 165 #. Still 11 restlessly walking around & seems somewhat confused. Nov 11. Taken home on trial, by brother-in-law -

Discharged

Personal and Medical History of

Personal and Medical History of Jacob Goldstein

Whole No. 5641

Residence, St Paul. Ramsey Co.
Has been resident of State & County 25 yrs.

Date Admission, Aug. 10. 1900

Admitted by Dr. C. Z. Warnow hour, 7 p.m.

How Sent, Judge of Probate, Ramsey Co.

Sex, male Age, 66 years.

Civil Condition, Widower

Children, 7 Age Youngest Child,

Occupation, Jewish Rabbi

Degree Education, Liberal education.

Profession of Religion, Jewish

Habits, not intemperate.

Nativity, Russia. Parents also

Physicians Committing, M. Lessler & W. J. Hawkins.

Correspondents, Ethel Goldstein, 160 Oberlin Ave. St Paul. (daughter)

No. for Year, 4

Insane Relatives, none

Cause Exciting, unknown.

Cause Predisposing,

Form, Senile Dementia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not suicidal.

Date of this Attack, Six months ago

Duration, six mo.

No. of Attack, 1st

No. of Admission, 1st here.

Age First Attack, 66.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Warnow *Date of* July Aug 4/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused & sluggish.

MEMORY, Past Events, Impaired

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State, appreciates condition.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather exalted

DELUSIONS, Systematized, Transitory, ✓

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead.

Paternal Relatives, no history of insanity.

Mother, dead.

Maternal Relatives, no history of insanity.

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
pneumonia - rheumatism.

HABITS, Drinking (now) and Smoking, (to excess)

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 3½ in. PRESENT WEIGHT, 145 USUAL WEIGHT, NUTRITION, Good.

WOUNDS, Abnormalities, None Condition of Skin, Bronzed-sluggish

TONGUE, Coatings, Promptness of Movement, Badly coated.

PUPILS, Equality, Equal Size, normal Response to Light, slow - Accommodation, slow

SIGHT, impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, normal Legs, normal Grasp,

TREMORS, Hands, marked Tongue, marked - Facial Muscles, General,

PATELLAR REFLEX, diminished Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, normal.

HEART, Regularity, normal

Strength, Sounds, "

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES, full,

LUNGS, Chest symmetrical Expansion poor Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Irregular

BOWELS, Present Condition, Constipated.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is much confused & very talkative - says "he has been having considerable trouble but has been born again & has great powers - "Can cure every body" - delusions are transitory - talks continually about his "system" & "great power" - physical condition poor.

Personal and Medical History of Jacob Goldstein

1/00

This patient was brought here by W. L. Faunt in poor physical condition, with the following history: No history of consanguinity, heredity or intemperance in patient or parents: First symptoms of insanity manifested about six months ago by fears of persecution: patient was confined in Bethesda Hospital, St Paul. Improved for two months, then attack recurred: Disease appears increasing: variable, with irregular rational intervals: derangement now manifested on subject of religion: no disposition to injure others, not suicidal, filthy nor destructive: has shown previous peculiarities: has had no severe disease nor injury to head: has not been confined or restrained except as stated above: Cause of disease unknown: Has received usual treatment: On personal examination: Easily excited
Augo and talkative: On admission put upon B3 C. complex iron fair: hair dark brown + gray: eyes blue: condition of skin dirty: vaccination marks on both arms: a small brand resembling tumor on back: 1 scar over left eye. 1 on nose: Teeth: - 3 in upper jaw. 4 gone from left lower + 3 from right lower jaw: chest in poor condition: behavior good.
" " Received ward: given bath. T 100 P 80 R 20 - Is confused + has "grandoise delusions" -
17/03 Talks very little: does no work. Aug 23. (14 days recd up) - Patient has idea he can do anything he desires: goes about praying and preaching, at times. Oct 30. No
Oct 30 change specially noticeable: becomes excited at times: is occasionally troublesome.
Dec 30/ Complains of pain, in right side of abdomen - Dec 27. Complains of hernia. -
1901 Jany 1/9 Transferred to T.W. Jany 1/901. Wt 148#. - Visited by daughter. Jan 19. Gets excited,
22 at times: "Calling out, at the top of his voice, to his friends". Jan 22. Up, ward -
27 patient is very troublesome in hall. Jan 27. Transferred to B3 - Jan 31. Patient
31 appears somewhat better, physically - no change mentally: still has "exalted ideas"
Feby 1 Is sometimes found crying, and becomes angry + excited, at times. Says "Some one is
April 16 killing his children". Hernia is troublesome - April 16. Complained of being sick + vomited.
Sept 1/02 Sputum treatment + improved. July 15. Visited by daughters. - July 31. Seems some better mentally. —
Aug 1 Wt 194#. Jany 31/02. Has improved some, during the 6 months period. Was rather
July 31 confused + had prominent delusions, in early portion: at present, more quiet + his general talk more rational. Still, however, has some delusive ideas. Feb 1/02 - 207#. Feb 24/02. Visited by daughter. Aug. 30/02 Patient is quiet + well behaved. Answers rationally but has a great many "cranky" + unreasonable ideas; has been given parole. Sept. 27 Suffered from an attack of purpura; Oct. 7. Has been sick more or less from the purpura - had vague feeling. It as had a slight fever. Nov. 9/02 Patient has suffered more or less from purpura, since last

Personal and Medical History of Jacob Goldstein.

note. Attack seems to go away and come on again. At present is quite free. Dec. 21/02 Patient taken, near bed time with severe heart Dyspnoea + circulatory failure. Was relieved by ammonia preparation + hot foot baths. Dec. 26. Another attack - a recurrent relapse. Had nearly recovered from the former attack. Jan. 1/03 Was up and dressed.
03
Jan. 31. Is again comparatively free from trouble.

Personal and Medical History of William Johnson.

Whole No. 5647

Residence, Redwing, Minn.

Date Admission, August 11th 1900.

Admitted by Dr. Ed. Chapple hour, 7 P.M.

How Sent, Axel Hanes Dep. Goodhue Co.

Sex, male Age, 20 yrs.

Civil Condition, single

Children, — Age Youngest Child,

Occupation, Grocery clerk.

Degree Education, Common school.

Profession of Religion, English Lutheran.

Habits, not intemperate.

Nativity, Minn. (Parents born in Sweden)

Physicians Committing, W. Anderson & A.W. Jones.

Correspondents, Fred Johnson (Father) Grocer, Redwing, Minn.

No. for Year, 5.

Insane Relatives, None.

Cause Exciting, Dissipation.

Cause Predisposing, unknown.

Form, mania with delusions (acute)

Accompanying Bodily Disorder, None mentioned.

Suicidal or not, Not.

Date of this Attack, ?

Duration, ?

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, ?

Time of Leaving, 8th April 1901.

Time in Hospital, 7 mos. 28 ds.

Result, Recovered: Discharged Apr 28/1901.

Examination on Admission by Dr. Wilmons. *Date of* Aug. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quick - confused.

MEMORY, Past Events,

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, poor

Special Subjects, "

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS, of hearing

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

mother had consumption

Father, living

Paternal Relatives, history of insanity.

Mother, living

Maternal Relatives, No history of insanity.

3 Brothers and Sisters, all well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, none

OCCUPATION, Healthy or not, Clerk.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Good Appetite, Good Bowels, Regular.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6 PRESENT WEIGHT, 118 USUAL WEIGHT, NUTRITION, poor.

WOUNDS, Abnormalities, none. Condition of Skin, Anaemic

TONGUE, Coatings, Promptness of Movement, Coated

PUPILS, Equality, Equal Size, large Response to Light, normal Accommodation, do

SIGHT, Good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, none. Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish. Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, normal.

HEART, Regularity, irregular

Strength, Sounds, strong

Size, normal

Apex Beat,

Murmurs, none noted

ARTERIES,

normal

LUNGS,

Chest symmetrical

Expansion fair

Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is very incoherent & talkative. Has transitory delusions regarding hypnotism &c & also expresses hallucinations of sight & hearing. Condition due to dissipation. Physical condition weak, anaemic & very restless.

Personal and Medical History of William Johnson.

1900

This patient was brought here by Sheriff's ~~deputy~~ P.J. Lundquist in fair physical condition with the following History: No consanguinity heredity nor intemperance in patient nor his parents: First symptoms of insanity manifested by incoherence of ideas, hallucinations of hearing, restlessness & loquaciousness: Disease appears increasing: Not suicidal: Derangement now manifested by incoherence of thought & speech: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: Between age of five & six years had fits: No confinement nor restraint employed: No treatment pursued: On personal examination walks about & talks continually: says he must not talk because throat is sore: speech
Aug 11 incoherent. On admission put upon Hyrinary. (Gt. N. Rpt. Complexion light: hair light: eyes gray: Skin in good condition: Vaccination mark on left arm: Gunpowder mark on L. cheek: Eruption on L. leg: One tooth gone from L. upper & one from R. Right eye crossed. Is stubborn: Temp 101- P. 76 R. 26. Exam. by A.R. Spillane.

Personal and Medical History of

25 Is up on ward: appetite good & sleeps well. Sept. Transferred to B3. Sep 30. Much excited. talks ira-
Sep 30 - 1901 tionally, almost continually. Dec. Wt 128#. P80. Jany 25/1901. Complains of headache & soreness
Jany 25/ 31 in chest. Transferred to IW, and put on treatment. Jany 31. Patient improved: (had La grippe) -
Febs 1/ Patient is up, on ward: quiet: assists with hall work. Febs. Transferred to B3. Patient is neat and
April 8 clean and seems quite rational. April 8. Continues as above: Visited by father and Father Rowe.

Discharged

Personal and Medical History of Medorse Fontaine

Whole No. 5643

Residence, St. Paul, Minnesota.

Date Admission, August 13th 1900.

Admitted by Dr. E. Z. Warren hour, 7 A.M.

How Sent, Ch. Bazille Jo. P. Ramsey Co. Minn.

Sex, male Age, 47 yrs.

Civil Condition, married

Children, five. Age Youngest Child,

Occupation, Teamster.

Degree Education, Common school.

Profession of Religion, Roman Catholic.

Habits, hard drinker.

Nativity, Canada - (Parents also from there.

Physicians Committing, G.A. Reny + R. S. Bole

Correspondents, Mrs. M. Fontaine 165 E. Chicago Ave. St. Paul, Minn (wife)

No. for Year, 6

Insane Relatives, none.

Cause Exciting, alcohol

Cause Predisposing, not known.

Form, Paresis

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, not.

Date of this Attack, 3 yrs. ago.

Duration, 3 yrs.

No. of Attack, 1st

No. of Admission, 1st.

Age First Attack, 44 yrs.

Time of Leaving, June 2nd - 1901

Time in Hospital, 10 mos. 11 Ds.

Result, Died. Asphyxia

Examination on Admission by Dr. Warren *Date of* 8/15/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish - Confused.

MEMORY, Past Events, Impaired.

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State, does not appreciate it

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather indifferent.

DELUSIONS, Systematized, None Transitory,

Special Subjects, obtained

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living - well

Paternal Relatives, No history of insanity.

Mother, living - well

Maternal Relatives, no history of insanity

7 Brothers and 3 Sisters, well

Children - 4 dead.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

None

HABITS, Drinking and Smoking, Excessive drinker

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Teamster.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor.

WOUNDS, Abnormalities, Scar on forehead. Condition of Skin, Anaemic - sluggish

TONGUE, Coatings, Promptness of Movement, Moist - fibrillary.

PUPILS, Equality, Equal Size, large Response to Light, no Accommodation, slow.

SIGHT, blurred vision.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, Very unsteady Legs, do Grasp,

TREMORS, Hands, fibrillary Tongue, do Facial Muscles, General,

PATELLAR REFLEX, Lost Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, None noted.

ARTERIES,

full.

LUNGS,

Chest symmetrical

Expansion fair

Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair.

BOWELS, Present Condition, irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient gives a history of being a chronic alcoholic demented. Shows some motor disturbances which are indicative of paresis. Physical condition poor appetite good: bowels irregular

Personal and Medical History of Medoire Fontaine.

1900

Aug 13 This patient was brought here by Deputy Sheriff Hausen in poor physical condition with the following history:- No consanguinity nor heredity. Patient a hard drinker: First symptoms of insanity manifested three years ago by grand paralytic symptoms & delusions: Disease appears increasing, not variable: Derangement now manifested by grand delusions: Has struck wife. Habits filthy & destructive. No peculiarities previously noted: Patient received injury to head 15 years ago. No confinement nor restraint employed. No treatment pursued: No further facts learned on personal examination. On admission put upon Infirmary Gen. Rpt. Complexion light: hair gray: eyes gray: Skin in dirty condition. Scar R. side forehead & one on back of neck. 1 lower front tooth gone: behavior good. Exam by Nurse Bernard.

" 14 Received on ward: given bath & put to bed. Is filthy & sluggish: Speech is hesitating.-

16 Aug 16. Extremely restless, through the night - Aug 27. 14 Days reasonably up.

Sep 24 Visited by friends. Physical condition improved some. Sep 6. Transferred to A 4

Oct 1 Attempted to elope, while out with crowd & transferred to B 3. Oct 1 - Confused

13 and very stupid - filthy occasionally. Oct 13. Transferred to A 4 again. Oct 18. Attempts

Dec 18 to elope. Dec 20. Patient appears to have lost control of right side & limb. Has

1901 transferred to IW. & put to bed. Jan 31/1901. Remains in bed: demented: in the last

Jan 31 stages of Paresis. Feby 1. Sent & dressed. Mar 2. Transferred to A 4. Apl 1. Mind

Feby 1 seems to be failing: he wanders away from crowd - June 24. Has been failing very

Apl 1 much of late. While eating dinner, patient was asphyxiated with a piece of meat.

June 24 Resuscitation was attempted, but without effect. Died at 12 35 P.M.

Died

Personal and Medical History of

Personal and Medical History of Mathias Pawlins (or Pauline)

Whole No. 5646

Residence, California.

In Minnesota 40 days.

Date Admission, August 17. 1900.

Admitted by Dr. C. J. Warnow hour, 7 P.M.

How Sent, Ens Bagille Dept. Ramsey Co.

Sex, male Age, 34

Civil Condition, widowed

Children, One Age Youngest Child, –

Occupation, Laborer.

Degree Education, Common school

Profession of Religion, Catholic.

Habits, Unknown.

Nativity, Austria. (Parents also born there)

Physicians Committing, H. C. Wernick & J. B. Darling

Correspondents,

No. for Year, 9.

Insane Relatives, unknown.

Cause Exciting, unknown

Cause Predisposing, unknown.

Form, Alcoholic Insanity

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, not.

Date of this Attack, ? Found wandering on streets.

Duration, ?

No. of Attack, ?

No. of Admission, First.

Age First Attack, ?

Time of Leaving, August 8/02: Deported to California

Time in Hospital, 1 yr 1 mos 22 days 9 hr. Ans

Result, Improved: Disp. Oct 14 – 1902

by Boff

Examination on Admission by Dr. Warnow *Date of* Aug. 17 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused – quick.

MEMORY, Past Events, fair.

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State, Appreciates that he is sick.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted.

DELUSIONS, Systematized, Transitory, Grandiose

Special Subjects,

HALLUCINATIONS, of hearing

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Don't Know

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, laborer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Irregular Appetite, poor Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8½ PRESENT WEIGHT, 130 lb USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, Condition of Skin, Anaemic

TONGUE, Coatings, Promptness of Movement, Clear - prompt.

PUPILS, Equality, Equal Size, normal Response to Light, normal Accommodation, do.

SIGHT, Good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good - -

COORDINATION, Arms, normal – Legs, do, Grasp,

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds,

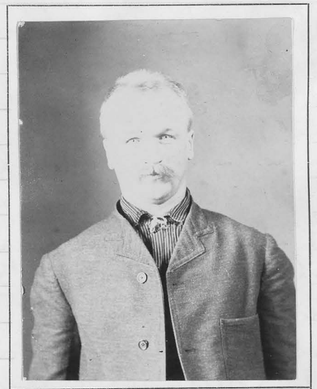
Size,

Apex Beat,

Murmurs,

ARTERIES,

LUNGS,



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character,

BOWELS, Present Condition,

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems excited, talkative & has delusions of grandeur. Which are of a transitory form. Says he owns the institution; that people here are standing for him. Seems rather confused. Has been a hard drinker. Physical condition good.

Personal and Medical History of Mathias Pawlins (or Paulins)

1900

This patient was brought here by Dep. Shriff Hansen in poor physical condition with the following history:- History of consanguinity, heredity & intemperance unknown: Nothing known concerning personal history as patient was found wandering about streets in St. Paul. & on examination was visionary on all subjects.

Aug 17 On admission put upon B3 E (G.H.M. Rpt. Complexion light: Hair light brown: eyes blue: Skin fair. L. 3rd & 4th fingers off at 2nd joint. Small bunch on L. thigh Scar. Scar on upper R. arm: vac. mark on L. arm: Is clean: 6 teeth Broken off & seven out. Exam. Mr. 7 Takey-

" " Received on Ward (B3). T101 P100 R20: very restless and much confused: manifests peculiar delusions. Aug 19. Restless & talkative, during night. Aug 20. Attacked nurse & had to be held on floor. Aug 28. Restless, through night. Aug 30. (14 Days record up)- Patient is confused: does not work: is stubborn: physical condition good. Oct 3. Wt. 165#. P96. Nov 1. Plays games: says "he is here, because some one connected with the Government telephoned around the World that he was crazy" and "that he could get no work". Jany 2/1901. Wt 159#. P98. Jan 31, No change in general condition noted.- Wt 153#. P96 Feb 28. Is well behaved: Is rather silly in manner. Will not work on ward. Made desperate effort to escape: Was returned to ward. July 31 - Seems much better. Is willing to do anything asked of him. Augt Wt 150#. Jany 31/02. Has improved little, a none. During the period: talk irrationally: laughs to himself, at times: has worked some, in the Kitchen & has various delusions. Feb. 1/02 148#. Patient is quiet & well behaved. Works some. Feb. 5/02 Seems quite unusually excited today- No cause known. Aug. 8/02 Was sent to California (that being his residence Has been unusually well behaved, altho has lacked at times as if some of the patients were trying to do him harm. Seems a little feeble in mind.

Oct 3
Nov 1
Jany 2/1901
Feb 1
Feb 28
July 31
Aug
Jany 31

Personal and Medical History of

Personal and Medical History of Frederick Ready.

Whole No. 5650

Residence, Temporarily in Olmsted Co. Minn.

Date Admission, August 7th 1900

Admitted by Drs. L. Chapple hour, 11 A.M.

How Sent, J.T. Leonard Sapt. Olmsted Co.

Sex, male Age, 27 yrs.

Civil Condition, single

Children, — Age Youngest Child,

Occupation, Stone cutter

Degree Education, Common School.

Profession of Religion, not a church member.

Habits, Has been intemperate.

Nativity, Iowa. (Parents born in Switzerland)

Physicians Committing, H.H. Witherstine & C.T. Granger,

Correspondents,

No. for Year, 13

Insane Relatives, unknown.

Cause Exciting, Intemperance.

Cause Predisposing, Previous attack,

Form, Alcoholic Insanity

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, not.

Date of this Attack, August 18 1900.

Duration, six days.

No. of Attack, unknown

No. of Admission, 1 hm. At Mendota, Wis.

Age First Attack, Unknown.

Time of Leaving, Sept. 6, 1900.

Time in Hospital, 13 d.

Result, Disc. Nov. 6. 1900 Recovered

Examination on Admission by Dr. Wallows. *Date of*

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good

Recent Events, Special Subjects, do

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct.

REASONING POWER, Ordinary Subjects, Good.

Special Subjects,

Own Mental State, appreciates it.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather indifferent.

DELUSIONS, Systematized, of persecution Transitory,

Special Subjects,

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead. Cause not known

Paternal Relatives, No history of insanity

Mother, dead. Cause not known

Maternal Relatives, no history of insanity

Brothers and Sisters, all well.

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
Gonorrhoea.

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, Stone cutter.

Detail Date, Duration, and Character of Previous Attack, if any,
April to July 1900.

Sleep, poor Appetite, fair Bowels, irregular

Miss Jessie Ready Fountain City Wis

Mrs John Shop Marion Iowa

Mr Nelson Ready Guttenberg Iowa

Mr Frank Ready Bagley Wis

Relatives of Frederick Ready

REDDY IS INSANE

Elkader, Iowa, Man Is Committed at Rochester.

Special to The Journal.

Rochester, Minn., Aug. 25.—Fred Reddy was taken before Judge Leonard yesterday and committed to the state hospital. There is no doubt as to his insanity. He was originally from Elkader, Iowa, but came to this city from Winona to lay stone pavements for which a Winona firm has several contracts. While at work an attack of insanity was induced by overindulgence in liquor and by the excessively hot weather.

PHYSICAL CHARACTERISTICS.

TION,

f Skin, brownish.

ion, normal.

Arms, normal Legs, do Grasp,

coarse Tongue, do. Facial Muscles, General,

, exaggerated. Other Reflexes,

rred, normal. Hesitating, Slow,

N, Sensibility,

Strength, Sounds, strong

Size, normal.

Apex Beat,

Murmurs, none noted

ARTERIES,
full.

LUNGS,
Chest symmetrical
Expansion good.
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is suffering from mania with delusions of persecution
Says, (misled) people tried to get at him to kill him in jail. - He hears them at times now. Has been in insane hospital at Mendota
Condition due to alcoholism.

Personal and Medical History of Frederi

Whole No. 5650

Residence, Temporarily in Olmsted Co. Minn.

Date Admission, August 7th 1900

Admitted by Drs. L. Chapple hour, 11 A.M.

How Sent, J.A. Leonard Supt. Olmsted Co.

Sex, male Age, 27 yrs.

Civil Condition, single

Children, — Age Youngest Child,

Occupation, Stone cutter

Degree Education, Common School.

Profession of Religion, not a church member.

Habits, Has been intemperate.

Nativity, Iowa. (Parents born in Switzerland)

Physicians Committing, F.H. Witherstine & C.T. Granger

Correspondents,

No. for Year, 13

Insane Relatives, Unknown

Cause Exciting, Intemperan

Cause Predisposing, Previous attack

Form, Alcoholic Insanity

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, not.

Date of this Attack, August 18, 1900.

Duration, six days,

No. of Attack, unknown

No. of Admission, 1 hos. At Mendota, Wis.

Age First Attack, Unknown.

Time of Leaving, Sept. 6, 1900.

Time in Hospital, 13 d.

Result, Disc. Nov. 6. 1900 Recovered

Examination on Admission by Dr. Wilcox. *Date of*

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good
Recent Events, " Special Subjects, do

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct.

REASONING POWER, Ordinary Subjects, Good.
Special Subjects,
Own Mental State, appreciates it.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather indifferent.

DELUSIONS, Systematized, of persecution Transitory,
Special Subjects,

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead. Cause not Known

Paternal Relatives, No history of insanity

Mother, dead. Cause not known

Maternal Relatives, no history of insanity

Brothers and Sisters, all well.

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

Gonorrhoea.

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, Stone cutter.

Detail Date, Duration, and Character of Previous Attack, if any,

April to July 1900.

Sleep, poor Appetite, fair Bowels, irregular

Johnson of Colfax, Cal. that death from old him him and weakness and drink. An old grave-rig and to eat. He took 15 pound can and morning. He has been seated to pound can seated ever was which mountains a long time. as for a reason for this. Is place, come and direct. He do, for a long time knowledge and organized over on hand, habit and memory and place. Where is there one living knowledge to select and bath living, healthful, rebuilding food.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, feet swollen. Condition of Skin, Bronzed.

TONGUE, Coatings, Promptness of Movement, Clear.

PUPILS, Equality, equal Size, large Response to Light, normal Accommodation, normal.

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, normal Legs, do Grasp,

TREMORS, Hands, coarse Tongue, do. Facial Muscles, General,

PATELLAR REFLEX, Exaggerated. Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, strong

Size, normal.

Apex Beat,

Murmurs, none noted

ARTERIES,
full.

LUNGS,
Chest symmetrical
Expansion good.
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is suffering from mania with delusions of persecution
Says, unknown people tried to get at him to kill him in jail. - He hears
them at times now. Has been in insane hospital at Mendota
Condition due to alcoholism.

Personal and Medical History of Frederick Ready.

Personal and Medical History of

Aug 19 00

This patient was brought here by Sheriff E.V. Price in fair physical condition with the following history:- No information concerning heredity or consanguinity. Patient intemperate. Has been confined at Mendota hospital. First symptoms of present attack manifested August 18' 1900. Disease appears increasing: not variable. Derangement now manifested by delusions: thinks he is going to be killed: is violent at times. Habits filthy & destructive. No information concerning previous peculiarities, severe diseases nor injuries to head. Has been confined in city jail. No treatment ensured. On personal examination was quiet. Aug 20 On admission put upon Infirmary (E.K.R. Rpt Complexion dark: hair black: eyes brown: legs & feet swollen: vac. mark on left arm: scar on L. side of neck: & bruises on back: is dirty: one tooth gone from upper jaw: behavior good: " " Exam - S.R. Spillane -) Received on TW, and put to bed: feet & legs are somewhat 25 swollen Aug 25. Seems somewhat improved. Aug 27 D/s and dressed, in ward; assists 30 with work. Aug 30 Appetite good. Sept 1 Patient is quiet in ward: willing to do Sept 7 anything - Sept 7. Visited by friends. Sept 6. Wt 174#. Rpr. Left today.

Discharged

Personal and Medical History of Even Nelson.

Whole No. 5651
Residence, St. Paul.

Date Admission, August 28 1900
Admitted by Dr. C. L. Chapple hour, 7 P.M.
How Sent, E.M. Bayliss & off. Ramsey Co.
Sex, male Age, 78 yrs.
Civil Condition, married.
Children, Three Age Youngest Child, –
Occupation, janitor
Degree Education, Can read & write.
Profession of Religion, Norwegian Dan. M.E.
Habits, not intemperate.
Nativity, Norway (Parents also born there)
Physicians Committing, Burnside Foster & E.M.
Correspondents,

No. for Year, 14.
Insane Relatives, none.
Cause Exciting, unknown
Cause Predisposing,
Form, Senile Dementia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not.
Date of this Attack, 3 mos. ago.
Duration, 3 mos.
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 78 yrs.
Time of Leaving, Sept. 18, 1900
Time in Hospital, 21 d.
Result, Died Cardiac dilation with pulmonary oedema

Examination on Admission by Dr. Mearns *Date of* Sept. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused.
MEMORY, Past Events, poor
Recent Events, Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.
REASONING POWER, Ordinary Subjects, poor.
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather indifferent.
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.
LENGTH INVASION, 3 mos. ago.
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father,
Paternal Relatives, Nothing attained.
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Pneumonia.
HABITS, Drinking and Smoking,
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, farmer,
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, Appetite, Bowels,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, ——— PRESENT WEIGHT, ——— USUAL WEIGHT, NUTRITION,
WOUNDS, Abnormalities, Condition of Skin, Sluggish.
TONGUE, Coatings, Promptness of Movement, Clean.
PUPILS, Equality, Size, Response to Light, Slow Accommodation, Slow.
SIGHT, Blurred.
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING,
COORDINATION, Arms, imp – Legs, imp. Grasp,
TREMORS, Hands, slight – Tongue, Facial Muscles, General,
PATELLAR REFLEX, Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Irregular
Strength, Sounds, strong
Size, Enlarged
Apex Beat, down
Murmurs, None noted
ARTERIES,
Sclerotic.
LUNGS,
Chest symmetrical
Expansion poor
B. Sounds roughened.
Chr. bronchitis.

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, good.
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very much confused, forgetful & cannot answer questions asked of him. Seems worried about something and talks to himself continually. Condition due to senility
In quite well physically except for bronchial trouble.

Personal and Medical History of *Evan Nelson.*

1900

This patient was brought here by Sheriff deputy John R. Moak. in fair physical condition; with the following history. No consanguinity heredity nor intemperance in family. First symptoms of insanity manifested three months ago by insomnia & being noisy at night. Disease appears increasing: is variable: Derangement now manifested by failing memory & incoherent talk: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: No severe diseases nor injuries to head: No confinement nor restraint employed: no treatment pursued. On personal examination is irrational & talks incoherently does not answer questions that are asked him.

Aug 28 On admission put upon Infirmary East (G.H.U. Rpt. Complexion light. hair gray- part bald- eyes brown: Skin in fair condition: Varicose veins on legs: scars on feet: Is clean: Has six teeth left in lower jaw & one in upper: behavior good. Exam. by J.R. Spillane.)

" " Patient received on IW: put to bed: very weak: unsteady in limbs: Pupils normal.

29 P 64. R 20. Aug 29. Was extremely restless all night: would not stay in bed.

Sep 1 (7) Wt 144#. Sep 2. Very restless through night. Sep 7. Refused breakfast. Sep 13. Is

(13/15/16) very destructive to clothing. Sep 15 Passes blood with urine. Sep 16. Has slight

17 abrasion on left arm: same dressed. Sep 17. Patient shows marked failure.- and Died at 10 P.M.

- Died -

Post mortem by Dr. Chaffee:

Body much emaciated: swelling on left elbow: slight adherence (old) over right lung, at base. Lung full of air: in quite normal condition: dense old adhesion over lateral surface of left lung. All of left lung, except apex and upper anterior border, dark, heavy and very oedematous. Pericardium healthy and normal quantity of fluid. Heart large, dilated, flabby: rather fatty. Ventricle mixed clot in right vent, extending into smaller branches of pulm-artery and red auricle & confluent veins distended with dark partially clotted blood.- Tricuspid orifice dilated (3 in. in width): large clot - partially chicken fat - in aorta - Cardiac valves all in good condition, with little atheroma: muscular wall soft & easily torn. Coronary arteries patent: walls normal. Intestines somewhat injected: otherwise normal. Kidneys large, with venous Congestion: Capsule strips easily: parenchyma yellowish. Spleen enlarged: dark in color: friable: much congested: liver dark: injected with blood.- Gall-bladder moderately distended with turbid bile: urine bladder contained a cog turbid fluid. mucous membrane normal. Scalp thin & skull-cap normal in thickness: some adhesion to dura: pia arachnoid, adherent along longit. sinus & dura & thickened: Semi-opaque - non-adherent to brain. Some venous Congestion. Brain in fair Condition. No spec - path - lesions noticable Diagnosis: cause of death, dilation of right heart: tricuspid insufficiency & pulmonary oedema.

Personal and Medical History of

Personal and Medical History of Herman Hanson.

Whole No. 5654

Residence, Unknown. New Lisbon, Wis. Picked up on streets by police.

Date Admission, August 29, 1900.

Admitted by Dr. E. J. Wasson hour, 4 P.M.

How Sent, E.W. Bazille & asst. Ramsey Co.

Sex, male Age, 36 yrs.

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Laborer.

Degree Education, Common School.

Profession of Religion, Not a church member.

Habits, unknown.

Nativity, Illinois (Parents born in Norway.)

Physicians Committing, E.T. Schmidt & A.R. Wimmer.

Correspondents,

No. for Year, 15.

Insane Relatives, unknown.

Cause Exciting, "

Cause Predisposing, "

Form, Alcoholic Dementia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, ?

Date of this Attack, unknown.

Duration, "

No. of Attack, "

No. of Admission, 1 here - Says he was at Fergus Falls 3 mos.

Age First Attack, unknown.

Time of Leaving, Dec 10 - 1900

Time in Hospital, 3 mos - 11 Days.

Result, Recovered - Discharged Apl 30-1901

Examination on Admission by Dr. Wasson. *Date of* Sept. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Rather Confused & sluggish.

MEMORY, Past Events, Impaired.

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, Poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS, of hearing & sight

ILLUSIONS,

SUMMARY,

Patient is suicidal

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead.

Paternal Relatives, Unknown

Mother,

Maternal Relatives,

Brothers and Sisters, None.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

None

HABITS, Drinking and Smoking, To excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, laborer.

Detail Date, Duration, and Character of Previous Attack, if any,

At Fergus Falls 3 mos.

Sleep, Appetite, Bowels,

don't remember.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 - 1½ PRESENT WEIGHT, 164. USUAL WEIGHT, NUTRITION, Poor

WOUNDS, Abnormalities, Condition of Skin, Reddish-brown

TONGUE, Coatings, Promptness of Movement, Clear

PUPILS, Equality, Equal. Size, Small. Response to Light, Accommodation, Slight.

SIGHT, blurred.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, exaggerated Legs, do. Grasp,

TREMORS, Hands, slight - Tongue, fibrillary tremor Facial Muscles, General,

PATELLAR REFLEX, exaggerated. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, normal.

HEART, Regularity, irregular

Strength, Sounds, normal

Size, normal

Apex Beat, normal

Murmurs, none noted

ARTERIES,

LUNGS,

Chest symmetrical
Expansion good.
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, Normal

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient was found on the streets by police when perhaps in an alcoholic delirium. He had been drinking a good deal & saw things which frightened him. Was committed to the Fergus Falls institution for 3 mos. last year. Now is dull, sluggish & melancholic; shows marked loss of memory, is forgetful. Condition is one of dementia following alcoholism. Physical condition good.

Personal and Medical History of Herman Hansen.

1900

This patient was brought here by Dep. Sheriff Hamm attended by Frank Thogren, in poor physical condition with the following history: Patient was picked up on streets by police: Says he was at Fergus Falls hospital for 3 months: Disease appears increasing Patient refuses to talk & wanted an axe to chop his hands off. Has shown no disposition to injure anyone. Nothing known in regard to his previous history: Has been in County jail for 3 days. On personal examination looks sullen & refuses to talk. On admission put upon B 3 E (G.H.M. Rpt.

Aug 29 Complexion fair: hair brown: eyes blue: scars on fingers back of neck: R. side face: vac. marks on L. arm: slight eruption on skin: 2d clean: 2 5 teeth gone lower jaw: Behavior good: Exam. M. F Fahey J.

" " 30 Received on B 3. Given bath: P & T normal. Aug 30. appears confused: will hardly answer questions.

31 Noisy at midnight: became pugnacious when restricted by nurse. Sept 3. Walks about ward: does no work.

Sept 3 1 3 does not associate with other cases. Sept 13. (Record rep.) - Sept 30. Is better behaved: more talkative

Oct 3 and rational. Oct 3 Wt 191 lbs P 88. Nov 13. Transferred to A! Dec 10. Patient appears well,

Dec 10 both mentally & physically, and is Sent Home. —

Discharged

Personal and Medical History of

Personal and Medical History of George D. Barnes.

Whole No. 5653
Residence, St. Paul, Minnesota.

Date Admission, August 30 1900.
Admitted by Dr E.J. Marcous hour, 7 PM.
How Sent, Ew. Bazille & A.P. Penny Co.
Sex, male Age, 37 yrs.
Civil Condition, widowed.
Children, two Age Youngest Child, —
Occupation, Saloon Keeper.
Degree Education, Common school.
Profession of Religion, Catholic
Habits, Intemperate.
Nativity, U.S.A. (Parents born in U.S.)
Physicians Committing, A.B. Ancker & H. Munn.
Correspondents,

No. for Year, 16
Insane Relatives, none.
Cause Exciting, Intemperance.
Cause Predisposing, ?
Form, Dementia (mania à Potu)
Accompanying Bodily Disorder, none.
Suicidal or not, not.
Date of this Attack, One month ago.
Duration, 1 mo.
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 37 yrs.
Time of Leaving, Jany 8 - 1901.
Time in Hospital, 4 mos — 9 days.
Result, Recovered: Discharged Apl 30/901

Examination on Admission by Dr. Marcous *Date of* Sept. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused
MEMORY, Past Events, fair.
Recent Events, Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.
REASONING POWER, Ordinary Subjects, fair
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
indifferent.
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS, of sight
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION, 1 mo.
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, died rheumatism.
Paternal Relatives, no history of ins.
Mother, died paralysis
Maternal Relatives, no history of ins.
Brothers and Sisters, none.
3 Children 1 dead.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Gonorrhoea.
HABITS, Drinking and Smoking,
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Saloon keeper.
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, poor Appetite, Impaired Bowels, Constipated

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, —— PRESENT WEIGHT, —— USUAL WEIGHT, NUTRITION, poor.
WOUNDS, Abnormalities, Condition of Skin, Anaemic
TONGUE, Coatings, Promptness of Movement, Clear - marked tremor.
PUPILS, Equality, Equal Size, large Response to Light, normal Accommodation, normal.
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good.
COORDINATION, Arms, Slight inco-ord. Legs, Grasp,
TREMORS, Hands, Tongue, marked Facial Muscles, General,
PATELLAR REFLEX, Exaggerated Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, irritable.
Strength, Sounds, very weak
Size, enlarged.
Apex Beat,
Murmurs, none noted
ARTERIES, flabby.
LUNGS, lagging of right side expansion poor Exaggerated on R. side

CRANIAL MEASUREMENTS.

Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, good.
BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems confused & demented. Has been a hard drinker for last fifteen years & has had several attacks of delirium tremens. Physical condition poor, is anaemic & very nervous.

Personal and Medical History of George D. Barnes.

1900

This patient was brought here by Sheriff's deputy W.H. Lamb, attended by H.A. Lundberg in poor physical condition with the following history: First symptoms of insanity manifested a month ago by delirium tremens: Disease stationary Not variable: Derangement now manifested by loss of orientation delusions of accupation, mental confusion: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: No severe diseases nor injuries to head: Has been in bed in City & Co hospital St. Paul since Aug. 14th. Has been in wet packs & has been given strychnia. On personal examination does not know where he is:
Aug 30 talks disconnectedly: is restless. On admission put upon D.W.E. (G.H.M. Rpt. Complexion light: hair light brown: eyes brown: Scar on R. knee: one on left arm: & one on neck. Is clean Cut Mark gone from upper jaw: Behavior good: Exam by
" " Nurse Bernard) Received on T.W.: put to bed: is stupid & very sluggish: small bruises on right knee and on left arm and scar on right side of neck. T & P normal.
31 Was very restless, most of the night. Sept. Appears very dull. Wt 110th. Sept 6. Will
Sept 10/14 not remain in bed. Sept 12. (4 days record up) - Sept 14. Patient Shows some improvement:
Nov 16 appetite good: Sleep better. Nov 16. Patient is up & dressed - neat & clean in habits: mental
1901 and physical condition good. Works in ward dining-room - Jany 3/1901. Transfered to A.
Jany 3 Wt 144th. P.H. Jany 5. Patient well, both mentally & physically and is Sent home.
5/

Discharged

Personal and Medical History of

Personal and Medical History of William Chambers.

Whole No. 5654
Residence, Chatfield, Minn.
a resident of Fillmore Co. for 3 yrs. past.
Date Admission, September 3' 1900
Admitted by Dr. O. C. Hayden hour, 7 PM.
How Sent, Ed. Farrington J. of P. Fillmore Co
Sex, Male Age, 74.
Civil Condition, married.
Children, 4 Age Youngest Child,
Occupation, Lumber, Saw-mill.
Degree Education, Common school.
Profession of Religion, Not a church members.
Habits, a hard drinker.
Nativity, Newyork, (Parents born in America)
Physicians Committing, J.H. Phillips & G.A. Loop.
Correspondents, Mrs. Mary F. Thompson, Chatfield, Minn. (daughter)

No. for Year, 18
Insane Relatives, None.
Cause Exciting, Unknown
Cause Predisposing,
Form, Senile Dementia
Accompanying Bodily Disorder, teeth mentioned
Suicidal or not, not.
Date of this Attack, 3 years ago.
Duration, 3 yrs.
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 71 yrs.
Time of Leaving, Jan. 27' 1901.
Time in Hospital, 4 mo. 24 days.
Result, Died. Senile Dementia.

Examination on Admission by Dr. Watson. *Date of* Sept. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused.
MEMORY, Past Events, loss of memory.
Recent Events, Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.
REASONING POWER, Ordinary Subjects, poor.
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
normal now.
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS, of hearing.
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father,
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
HABITS, Drinking and Smoking, None.
HEADACHES, VERTIGO, OR CONVULSIONS, None.
OCCUPATION, Healthy or not,
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, ? Appetite, Bowels,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, ——— PRESENT WEIGHT, ——— USUAL WEIGHT, NUTRITION, poor,
WOUNDS, Abnormalities, Condition of Skin, sluggish.
TONGUE, Coatings, Promptness of Movement, grayish coating.
PUPILS, Equality, equal. Size, normal. Response to Light, slow. Accommodation, slow.
SIGHT, impaired
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, do.
COORDINATION, Arms, impaired Legs, impaired. Grasp,
TREMORS, Hands, Tongue, Facial Muscles, General,
PATELLAR REFLEX, sluggish. Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, irregular
Strength, Sounds, weak.
Size, normal.
Apex Beat, "
Murmurs, None noted
ARTERIES,
Sclerotic & hard.
LUNGS,
Asymmetrical chest. Poor expansion Breath sounds - empty resonton.

CRANIAL MEASUREMENTS.

Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character,
BOWELS, Present Condition,

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient shows marked loss of memory - cannot remember any part or recent events, markedly demented. Condition due to senility.

Personal and Medical History of William Chambers.

1900

This patient was brought here by Sheriff E.K. Blount attended by Mrs Mary J. Thompson (daughter) in fair physical condition, with the following history: First symptoms of insanity manifested about three years ago by loss of memory & delusions: Disease appears increasing: ~~Not~~ Variable: Derangement manifested first about three years ago: Now runs away & gets lost: Has delusions & hallucinations: Is disposed to injure others: Not suicidal: Habits filthy & destructive: No peculiarities previously manifested: No confinement nor restraint employed: No treatment pursued: On personal examination has all the appearance of chronic mania: Talks to imaginary persons: Cannot answer any questions rationally.

Sep 3 On admission put upon N.W.E (Gk N Kpt. Complexion light & hair gray: eyes gray: Skin in fair condition: Several small abrasions on head & one on nose: both legs bruised & scratched below knees L. darker black & blue: In clean: Teth all gone except 3 above on ~~lower~~ upper jaw: Behavior good. Exam. by A.J. Bandell

" " Received in Ward & put to bed: Has Hernia on left side: both legs badly swollen, scratched & bruised from Knees Down: abrasion on head & nose: T & P normal. Lep 5. Weight 120 lbs

7 Patient is quite restless, through the nights. Sep 7. Complains of severe pain in the

16 region of the heart. Sep 16. (14 days recd ap.) - Oct 1. Wt 151 lbs. Is much confused

Oct 7 at times. Oct 17. "Thinks some one is trying to harm him". Is very childish: often cries,

Dec 11 if led is touched. Dec 11. very destructive & noisy, all night. Patient is failing —

1901 Wt 105 lbs — Is failing rapidly. Jany 17. Noisy & destructive, all night, for several

Jany 17 25/27 nights. Jany 25. Chest and limbs scratched: (self inflicted). Jany 27. Refused dinner. Failed rapidly and died at 10.30 P.M. —

Died

Personal and Medical History of

Personal and Medical History of Andrew Olson Tyrn.

Whole No. 5655
Residence, Mound Prairie Minn.
Resident of Houston Co for 20 yrs.
Date Admission, Sept 5, 1900
Admitted by Dr. O.C. Aryerdale. hour, 9 P.M.
How Sent, L. Budahl Jap. Houston Co.
Sex, male Age, 57 yrs.
Civil Condition, single.
Children, — Age Youngest Child, —
Occupation, Farming
Degree Education, Can read.
Profession of Religion, Unknown —
Habits, Not intemperate.
Nativity, Norway. (Parents also born there)
Physicians Committing, D.B. Rhines & W.S. Browning.
Correspondents, No relatives in this country. Friend K.B. Grasby. Houston, Minn.

No. for Year, 18.
Insane Relatives, unknown.
Cause Exciting, unknown
Cause Predisposing, "
Form, Acute Melancholia
Accompanying Bodily Disorder, none mentioned.
Suicidal or not, not.
Date of this Attack, Aug 25 1900
Duration, 8 days.
No. of Attack, 1st.
No. of Admission, 1st
Age First Attack, ?
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. Wanous. *Date of* Sept 5 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused - sluggish
MEMORY, Past Events, poor.
Recent Events, Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, poor
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
depressed.

DELUSIONS, Systematized, of Transitory,
Special Subjects, of persecution

HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
unknown - They are all in Norway.
Father,
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, yes.
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not,
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Good. Appetite, Bowels,

47/165

M. Andrew Olson Tyrn

Copy of Order for Hearing Petition of N. A. Forsyth for appointment of above petitioner as guardian for said Andrew Olson Tyrn insane; served and service admitted Sept. 10th 1900

(Papers filed with commitment papers.)

RACTERISTICS.

USUAL WEIGHT, NUTRITION,
Condition of Skin, Anaemic
mpt.
use to Light, normal Accommodation, normal.

, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING,
COORDINATION, Arms, normal Legs, do. Grasp,
TREMORS, Hands, none. Tongue, none Facial Muscles, General,
PATELLAR REFLEX, normal. Other Reflexes,
ARTICULATION, Slurred, normal. Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, very rapid
Strength, Sounds, clear
Size, normal
Apex Beat, "
Murmurs, none noted
ARTERIES,

LUNGS,
Chest symmetrical
Expansion good-
B. sounds normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, fair.
BOWELS, Present Condition, irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient has been living alone. Lately has been very fearful & has had delusions of persecution. Thought people were after him to kill him & take his money. Feels safe now & contented to stay here. Talks very little english. Condition due to his solitary life.

Personal and Medical History of Andrew Olson Tyr

Whole No. 5655

Residence, Mound Prairie Minn.

Resident of Houston Co for 20 yrs.

Date Admission, Sept 5 1900

Admitted by Dr. O.G. Keyerdale. hour, 9 P.M.

How Sent, L. Budahl Sh.P. Houston Co.

Sex, male Age, 57 yrs.

Civil Condition, Single.

Children, — Age Youngest Child, —

Occupation, Farming

Degree Education, Can read.

Profession of Religion, Unknown.

Habits, Not intemperate.

Nativity, Norway (Parents also born there)

Physicians Committing, D.G. Rhines & W.R Browning.

Correspondents, No relatives in this country. Friend K.B. Grasby. Houston, Minn.

No. for Year, 18.

Insane Relatives, unknown.

Cause Exciting, unknown

Cause Predisposing,

Form, Acute Melancholia

Accompanying Bodily Disorder, None mentioned.

Suicidal or not, not.

Date of this Attack, Aug 25 1900

Duration, 8 days.

No. of Attack, 1st.

No. of Admission, 1st

Age First Attack, ?

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Wanous *Date of* Sept 5 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused - sluggish

MEMORY, Past Events, poor.

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed.

DELUSIONS, Systematized, of Transitory,

Special Subjects, of persecution

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
unknown - They are all in Norway.

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, Yes.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Good. Appetite, Bowels,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 PRESENT WEIGHT, 137½ USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, Condition of Skin, Anaemic

TONGUE, Coatings, Promptness of Movement, Clear - prompt.

PUPILS, Equality, equal. Size, normal. Response to Light, normal Accommodation, normal.

SIGHT,

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, none. Tongue, none Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, very rapid

Strength, Sounds, Clear

Size, normal

Apex Beat, "

Murmurs, none noted

ARTERIES,

LUNGS,
Chest symmetrical
Expansion good-
B. sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Fair.

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient has been living alone. Lately has been very fearful & has had delusions of persecution. Thought people were after him to kill him & take his money. Feels safe now & contented to stay here. Talks very little english. Condition due to his solitary life.

Personal and Medical History of Andrew Olson Tyru.

1900

This patient was brought here by Dep Sheriff N. A. Forsyth attended by D.C. Dyer Jr. in fair physical condition, with the following history: No consanguinity heredity nor intemperance in patients nor parents: First symptoms of insanity manifested (present attack) Aug. 25 1900. by making an assault: Has had several previous attacks of very short duration (about ½ hr.) Derangement now manifested by thinking people are going to kill him: Disease appears increasing: Is variable. Patient has shown a disposition to injure others: No filthy nor destructive habits: Has a peculiar aversion to anything red: No severe diseases nor injuries to head: Has been in jail since Aug. 29. No treatment pursued: On personal examination manifests nervous excitement: premature senility: Is dangerous to be at large.

Sep 3 On admission put upon B3 E. (G.H.N. Rpt. Complexion light: hair gray: eyes blue: Skin dirty: Dark spots on neck: Big toe on R. foot deformed: Bruise on left ankle: Is dirty: Four teeth out lower jaw + one out in upper: Rest in poor condition: Behavior good: Exam. by P. Warren + G Haber)

" 14 Received on Ward: given bath. T 100. P 96. Sept 4. Is very dull: Speaks little English: 9/0 Somewhat confused. Sep 9. No apparent change in condition. Sep 10. Sits around ward: 16 is well-behaved. Sep 16. (14 days recd us) – Oct 1. Wt 134#. P 72. Oct 31. Patient well-Oct 1/31 -behaved: Still somewhat confused: does no work. Physical condition good: bowels + urine Dec 1/ regular. Dec 1 Wt 145#. P 88. Dec 15. Patient's condition shows no special change. 1901 Jan 31 Well-behaved: still somewhat confused: no apparent change in condition. – Feb 1 Wt 144#. P 96. May 31. Cannot speak English. Seems somewhat indifferent and Jul 31 inattentive – July 31. No change from former notes – Still becomes confused, at times. Aug 1 Wt 149#. Jan 31/02. Has improved now, during period. Is confused: talks loudly: 1902 Jan 31 scolds: stubborn + inclines to fight.

Feb. 1/02 Wt 150# July 18, 02 Transfered to Annex.
Does nothing; filthy; stubborn; demented. Oct 11
Began working on farm. l
1903 Jan. 31 Little change; no work; stubborn; at times noisy and ugly.

Personal and Medical History of

Personal and Medical History of Joseph Weber.

Whole No. 5657

Residence, St. Paul, Minn.

Date Admission, September 11, 1900.

Admitted by Dr. C. L. Chapple hour, 7 P.M.

How Sent, E.W. Bazille & Asst. Ramsey Co.

Sex, male Age, 46 yrs.

Civil Condition, married

Children, six. Age Youngest Child,

Occupation, Laborer.

Degree Education, Common school.

Profession of Religion, Catholic.

Habits, Temperate.

Nativity, Germany. (Parents - born in Germany)

Physicians Committing, Chas. Wirth & J. Hodnedahl.

Correspondents, Mrs. Mary Weber. (wife) 770 Butternut St. St Paul, Minn.

No. for Year, 20.

Insane Relatives, None.

Cause Exciting, unknown.

Cause Predisposing, unknown.

Form, General

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, not.

Date of this Attack, About four mos ago.

Duration, 4 mos.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 46 yrs.

Time of Leaving, January 4 1901

Time in Hospital, 1 Yr 3 mos & 24 Ds

Result, Died: General Paresis -

Examination on Admission by Dr. Chapple *Date of* 9 - 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quick - rather confused.

MEMORY, Past Events, Apparently good -

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert. illusive.

REASONING POWER, Ordinary Subjects, Good.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

somewhat exalted -

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, Patient will not confine himself to questions asked - is very talkative - No hostile ideas noted.

HISTORICAL.

LENGTH INVASION, 4 mos.

ONSET, Gradual or Sudden, Gradual -

(Question concerning Insanity, Consanguinity, Epilepsy, HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead

Paternal Relatives,

Mother, dead.

Maternal Relatives,

3 Brothers and 3 Sisters,

6 children

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, says not to excess.

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, worked in foundry.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, sound Appetite, good Bowels, regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, —— PRESENT WEIGHT, —— USUAL WEIGHT, NUTRITION, fairly good.

WOUNDS, Abnormalities, Condition of Skin, Eruption on head & legs.

TONGUE, Coatings, Promptness of Movement, Clean. Responds promptly.

PUPILS, Equality, unequal Size, small. Response to Light, slow Accommodation, normal

SIGHT, quite good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good

COORDINATION, Arms, fairly good Legs, good. Grasp,

TREMORS, Hands, very slight. Tongue, rather goes unsteadily. Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, quite normal. Hesitating, Spoke German - Read ~~Slow~~, well.

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Regular.

Strength, Sounds, strong

Size, normal.

Apex Beat, 5 Regular

Murmurs, none

ARTERIES,

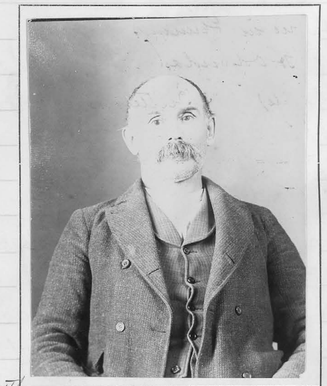
normal.

LUNGS,

Chest symmetrical

Expansion good

Breath sounds strong smooth



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character,

BOWELS, Present Condition,

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment). Patient fairly well nourished - rather thin - appears like a hard working man. Has an eruption on scalp & legs. No gross physical symptoms noted. Speaks German readily & not very distinctly - Complete history not obtainable. No delusions, hallucinations nor illusions noted. Says he has been sick. Is rather excited & very talkative & will not confine himself to questions. Says he has not been intoxicated for 18 yrs. Cannot obtain definite history in regard to previous habits. Seems to be fairly intelligent - Condition probably mania - some indications of paresis.

Personal and Medical History of Joseph Verber

1900

This patient was brought here by Sheriffs Dep. K. Hanson in fair physical condition with the following history. No consanguinity, heredity nor intemperance in patients nor parents. First symptoms of insanity manifested about four months ago by loquaciousness & sleeplessness. Disease appears increasing. So variable. Derangement now manifested by talking constantly of past events. Not disposed to injure anyone. Previous to accession of disease was extremely active: would work day & night. No severe diseases nor injuries to head received. No confinement nor restraint employed. Has been given Rest & bromide treatment. On personal examination is restless & very talkative.

Sep 11 On admission put upon Infirmary Ward (G.H.N. Rpt. Complexion dark: hair black – gray: eyes brown. Skin in fair condition: Scars from old ulcers on legs. Six teeth gone from upper & five from lower jaw. Eruption on head. Behavior good. Exam. by A.R. Spillane.)

" 12 Received on Ward. T & P normal. Patient is very talkative: appetite good. Sep 14. Very restless, through the nights. Sep 17. Clean and neat in habits: mental condition seems

" 18 improved somewhat. Sep 22. (14 Days recd up) – Oct 31. Patient is well-behaved-

Oct 31 Does some work: neat & clean in habits. Dec 1. Wt 170 lbs. P.S.S. Dec 15. Transferred to A! –

Dec 31 Dec 31. Complains of not feeling well: was transferred to TW: put to bed: suffering from

1901 La Grippe: put on treatment and improved. Jany 8/1901. Received clothes & got up in

Jany 8 ward – Jany 14. Transferred to A1. Jany 31. Seems in good physical health: bowels

to and urine regular. Febry 1 Wt 176 lbs. Pat. Is well behaved: Clean in habits – works in

Febry 28 C. D. room – July 8. Visited by wife – July 31. No apparent change in condition –

Aug 1 Wt 178 lbs. Sept 1. Easily provoked: in fair physical condition: looks some. Sep 13. Had

Sep 13/14 3 convulsions, today, and was transferred to TW. Sep 14. Visited by wife and brother.

had 12 convulsions, during day, and 24, during ensuing night. Temp: slightly elevated:

15/16 Had 9 " " " " and 11 " " – Sept 16. Had 17 Convulsions

17 during day and 11, during the night. Seems to be failing quite rapidly: Sep 17. Had

18 18 Convulsions, during day & 10, during night. Sep 18. 8 Convulsions during day and

19/20 7, during night Sep 19. Seems somewhat brighter, today. Sept 20. Had five 165

Oct 1 Convulsions, during past 2 days. Oct 1. Wt 153 lbs – Has been improved: had

3 bed sores, which have needed daily treatment. Oct 3. Improved & now able to walk some.

13/21 Is dressed & out on ward. Oct 21. Temp & about. Dull & irritable, but greatly improved.

Nov 1 Transferred to B3. Dec 16. Patient is badly confused: stupid: vomiting: Dec 27. Still

Dec 27/29 vomiting. Transferred to TW: Dec 29. Seems to be getting worse. Dec 31. Is noted as

31 failing. Temp: varies from 100 to 103. Jany 1900. Patient had 3 convulsions, today:

Jany 1st failed rapidly & Died at 10:30 P.M. (Had been failing rapidly before convulsions occured) –

Died

Personal and Medical History of

Personal and Medical History of Horace Burch

Whole No. 5658

Residence, Roscoe, Minn.

Resident of State 4 Co since 1898

Date Admission, September 18 1900.

Admitted by Dr. A.F. Kilbourne hour, 7 P.M.

How Sent, Axel Haller Jop. Goodhue Co.

Sex, male. Age,

Civil Condition, married

Children, 6. Age Youngest Child,

Occupation, Farmer.

Degree Education, Common school.

Profession of Religion, Not a church member.

Habits, Temperate.

Nativity, N. Hampshire (Parents unknown)

Physicians Committing, S. Jaching A.W. Jones.

Correspondents, P.P. Finestine Roscoe, Minn. (neighbor)

No. for Year, 71

Insane Relatives, A daughter feebleminded.

Cause Exciting, Probably injury to head.

Cause Predisposing, unknown.

Form, Senile Dementia

Accompanying Bodily Disorder, Paralysis agitans marked - Deviation of tongue on protrusion.

Suicidal or not, Not.

Date of this Attack, March or Apr. 1900.

Duration, About 6 mos.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 78 yrs.

Time of Leaving, December 31 - 1901.

Time in Hospital, 1 yr 3 mos 18 ds

Result, Died: Senile Dementia

Examination on Admission by Dr. Chapple *Date of* Sept 18 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused - Sluggish.

MEMORY, Past Events, very poor.

Recent Events, do. Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull - illusive -

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State, Says mind is well.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

normal.

DELUSIONS, Systematized, none apparent Transitory,

Special Subjects,

HALLUCINATIONS, none.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead

Paternal Relatives,

Mother, Dead.

Maternal Relatives,

Brothers and Sisters, 3 daughters.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Says 3 sons

does not remember

HABITS, Drinking and Smoking, not to excess.

HEADACHES, VERTIGO, OR CONVULSIONS, No.

OCCUPATION, Healthy or not, Farmer.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, normal Appetite, do Bowels, Regular,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, Quite good.

WOUNDS, Abnormalities, depressed sternum: projecting lower costal cartilages Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, Quite clean rather slow

PUPILS, Equality, Equal. Size, normal. Response to Light, normal Accommodation, do.

SIGHT, much impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, ~~much~~ impaired

COORDINATION, Arms, impaired Legs, do. Grasp,

TREMORS, Hands, Coarse. Tongue, Slight Facial Muscles, General, present.

PATELLAR REFLEX, ~~at~~ normal. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, diminished

Size, normal.

Apex Beat, 5. "

Murmurs, No. Sound sharp.

ARTERIES,

Sclerosis not marked.

LUNGS,

Chest symmetrical

Expansion fair

Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, OK.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Quite senile in appearance. Arteries sclerotic: heart sounds sharp. Mind confused: Memory almost absent: little history obtained from patient

Condition now of dementia resembling senility.

Personal and Medical History of Horace Burch.

1900

This patient was brought here by Sheriff & Deputy Lundquist, in poor physical condition, with the following history:- History of consanguinity unknown: A daughter predeceased: No intemperance in patient nor parents: First symptoms of insanity manifested in March or April 1900: Disease appears increasing: Not violent: Derangement manifested on all subjects by incoherence of thought & actions: Is disposed to injure others: No filthy nor destructive habits: No evidence of previous peculiarities: Last Spring received injury to head: was partly paralyzed & has not been right since then: No confinement nor restraint employed: No treatment pursued: On personal examination slight enlargement over right eye at seat of injury: Deviation of tongue on protrusion: Paralysis agitans marked.

Sep 13 On admission put upon Infirmary (C.W.H. Rpt. Complexion dark. hair gray: eyes blue: skin clear: Has hump on back: Scar on back of R. hand on on Left & one on wrist: Is clear on tooth left in lower jaw & three in upper: Is very nervous: Exam. by Nurse Moore)

" 14 Received on I.W & put to bed: very much confused: T 100. P 98. Sep 14. Sleeps all day.

" 15/19 Expressed delusions: is constipated: requires cathartics. Sep 19. Complains of pain in abdomen. Refused supper. Dec 1. Wt 144#. No apparent change in patient's condition from day to day: Jany 11/1901. Up on ward, dressed. Jany 31/1901. Patient seems improved both mentally and physically. Feby 1. Patient is up on ward: in fairly good physical condition: has slight nervous twitching of head & upper extremities. Mar 2 Transferred to A.V. Is able to get around and go out with the other patients. Mar 19 Left knee slightly swollen (suffering from acute rheumatism). Transferred to I.W: put to bed & put on treatment.

" 21 Patient improves. Apl 20. Is now up & dressed: Seems improved physically.

May 1 Wt 140# P 84. July 31 - Patient still somewhat melancholy: Mental condition due to senility - Sep 19. Patient rather unsteady and weak: Was, to day, put to bed.

July 31 Is demented & untidy. Oct 1. Wt 125#. Is quite weak & very demented - Nov 1. 112#

Sep 19 Slowly failing: Dec 1. Wt 113# - Dec 19. Seems to be in considerable pain and is

Nov 1 worse to day. Dec 30. Failing rapidly. Dec 31. Dies at 240 PM -

Dec 19/31

- Died -

Personal and Medical History of

Personal and Medical History of Archie Stewart.

Whole No. 5659.

Residence, Unknown.

Date Admission, September 14th 1900

Admitted by Dr. C L. Chapple hour, 7 PM.

How Sent, E W Bazin Dept. Ramsey Co

Sex, male Age, 31 yrs.

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Unknown.

Degree Education, Common school.

Profession of Religion, Presbyterian.

Habits, Unknown.

Nativity, Scotland (Parents also born there)

Physicians Committing, A.W. Miller + A. R. Merrick.

Correspondents,

No. for Year, 22

Insane Relatives, Unknown.

Cause Exciting, "

Cause Predisposing, " (intemperance in drink)

Form, Alcoholic Delirium

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, not. (attempted with fork while at St Peter)

Date of this Attack, one week ago.

Duration, 1 week.

No. of Attack, 2

No. of Admission, 1st at St Peter 6 yrs he says.

Age First Attack, ?

Time of Leaving, December 8-1902

Time in Hospital, 2 yrs. 2 mos 24 ds

Result, Recovered: Discharged 1/6/03 by Supt

Examination on Admission by Dr. C Chapple *Date of* Sept 18 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear. sluggish.

MEMORY, Past Events, good.

Recent Events, impaired Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert. correct.

REASONING POWER, Ordinary Subjects, fair.

Special Subjects, quite good.

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

normal.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS, of sight + hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

father drank heavily - no other history

Father, dead - drank heavily

Paternal Relatives,

Mother, dead.

Maternal Relatives,

3 Brothers and Sisters, all in Ireland.

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

Never sick in bed. was struck on head with hammer producing unconsciousness.

HABITS, Drinking and Smoking, uses tobacco: was a hard drinker but not since leaving asylum

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, Labourer - formerly a printer.

Detail Date, Duration, and Character of Previous Attack, if any,

In hospital in Michigan 9 mos. 1899 (?). At St. Peter before - drinking in St 9/7.

Sleep, poor Appetite, fair Bowels, regular.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9½ PRESENT WEIGHT, 159# USUAL WEIGHT, NUTRITION, Good.

WOUNDS, Abnormalities, double inguinal hernia: tubercular glands - larynx on face + numerous scars on body: says had scrofula when a child Condition of Skin,

TONGUE, Coatings, Promptness of Movement, Clean - prompt.

PUPILS, Equality, Equal. Size, normal. Response to Light, yes. Accommodation, do.

SIGHT, Slight impairment ~~in~~.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, impairment in left ear.

COORDINATION, Arms, fair Legs, fair Grasp,

TREMORS, Hands, slight. Tongue, slight Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal.

Strength, Sounds, good.

Size, normal

Apex Beat, 5

Murmurs, none

ARTERIES,

normal

LUNGS,

Chest symmetrical
Expansion fair
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair.

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Physical condition fairly good: has numerous large scars on face, legs + arms: says due to scrofula in childhood: also scar on head where struck with hammer: linear scar on throat due to suicidal attempt with a fork while at St Peter: double inguinal hernia; mass tuber. Patient dull, listless, appears demented. Says trouble at St Peter due to drink (may have been injury to head). Since leaving St Peter has been wandering about: had a few drinks in St Paul which evidently induced this attack. Says he sees + hears spirits: no other insane ideas manifested.

Personal and Medical History of Archie Stewart.

1900

This patient was brought here by Sheriff's Deputy Hanson in fair physical condition with the following history:- No history known concerning consanguinity: heredity, nor intemperance: Patient says he was at St Peter hospital for six years: First symptoms of present attack manifested about a week ago by delusions: Disease not variable: Sees spirits: Habits untidy nor destructive: No previous peculiarities noted: No information concerning severe diseases nor injuries to head: Patient has been in jail one week: No treatment received: On personal examination is dull in appearance: Sep 14 Talks incessantly: On admission put upon B & E. (Gen. Hosp. Rpt. Complexion dark: hair black: eyes blue: skin dirty: Dent on skull: Several scars on face, neck, left knee: & L. upper arm: large scars on L. thigh & leg: Is dirty: Has 5 teeth in upper & 8 in lower jaw: Behavior good: (Exam. by M. J. Dahey)
" 15 Received on ward: given bath & goes to bed. D 100. C 100. Sep 15. Patient thinks he is
16 Governed by Spirits. Sep 16. Memory appears clear: talks quite rationally on most subjects.
17/21 Quiet: assists on ward. Sep 21. Does not express his peculiar ideas. Sep 23. Complains of
23/24/29 Diarrhoea & headache: goes to bed. Sep 24. Transferred to F.W. Sep 29. Improved & given
Nov 14 dress: is troubled with Constipation. Nov 4. Wt 166 lbs. Sqr. Behavior is good: habits
11/15 clean and tidy: mind seems normal. Nov 11. Transferred to A 2. Nov 15 Thought unsafe
Dec 7/8 on A 2 and was returned to A 1. Dec 23. Complained: had T 102. & was in bed -
25 put on treatment: refused nourishment. Dec 25. Transferred to Infirmary ward.
1901 Jany 14/19 Patient operated on for double hernia. Jany 24. Stitches removed. Jany 29. Given
27 clothes & got up on ward: operation was successful. Jany 27. Transferred to A 1
31 Patient has occasional trouble with Constipation: has shown marked physical
Feby 1 improvement. Mind is quite clear. Feby 1. Is well-behaved: converses freely and
rationally. Works in Store-room, cleaning and mending clocks watches &c. -
March Transferred to A 3. Still works, as above, at Storeroom. July 31. Patient seems quite
Jul 31 recovered, mentally & physically. Aug 31. No special change. Works at Storeroom,
Aug 31 and also repairs watches &c. Jany 31/02. During month, patient has been uniformly
1902 quiet & well-behaved. Answers rationally, but shows some slight weakness of mind.
Jany 31 Has worked considerably about Store, and doing other work, (as above): Has parole: -
Read library books. Aug. 30/02 Patient is quite a worker at the store room. Seems to like to stay here. Does a considerable amount of work but is considered somewhat cranky. Dec. 5/02 Had an offer of some work in Minneapolis and left for that place today. Has shown no change during the past year.

Personal and Medical History of

Personal and Medical History of William Bidstidt (Bostad - correct name)

Whole No. 5660

Residence, Faribault Co. Minn.

Date Admission, September 15' 1900

Admitted by Dr. A.F. Kilbourne hour, 10 P.M.

How Sent, H.L. Bullis Jr. of P. Faribault Co.

Sex, male Age, 39 yrs.

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Laborer.

Degree Education, Common school.

Profession of Religion, Lutheran.

Habits, not intemperate

Nativity, Sweden - (Parents also born there)

Physicians Committing, F. N. Hunt + J.O. Broberg

Correspondents, brother - Frank Bostad - 6616. Newton Ave. No. Minneapolis.

No. for Year, 73

Insane Relatives, none.

Cause Exciting, unknown

Cause Predisposing,

Form, alcoholic (mania à potu)

Accompanying Bodily Disorder, injury over bom floating rib

Suicidal or not, not.

Date of this Attack, ?

Duration, ?

No. of Attack, Has had them at intervals for 9 years.

No. of Admission, 1st

Age First Attack, 38 yrs.

Time of Leaving, 10th Dec. 1900

Time in Hospital, 2 mos - 25 Days

Result, Recovered. Discha. Aff 30/1901.

Examination on Admission by Dr. C Chapple *Date of* Sept. 18' 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear - quick.

MEMORY, Past Events, good.

Recent Events, good. Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

alert. Correct.

REASONING POWER, Ordinary Subjects, Good.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

normal.

DELUSIONS, Systematized, Transitory,

Special Subjects, none.

HALLUCINATIONS, none

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, Sudden.

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

no history.

Father, dead.

Paternal Relatives, no history of insanity.

Mother, living - well.

Maternal Relatives, no history of insanity.

4 Brothers and ? Sisters, well.

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

never sick in bed that he can remember.

HABITS, Drinking and Smoking, drinks to excess. smokes some

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, Laborer

Detail Date, Duration, and Character of Previous Attack, if any,

normal

Sleep, Sound Appetite, good Bowels, regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, —— PRESENT WEIGHT, —— USUAL WEIGHT, NUTRITION, Good.

WOUNDS, Abnormalities, Nose deflected to right. slight scar. Slight scar on head - received in childhood Condition of Skin, Healthy

TONGUE, Coatings, Promptness of Movement, Clean. prompt.

PUPILS, Equality, Equal. Size, normal Response to Light, Good Accommodation, do.

SIGHT, O.K.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, O.K.

COORDINATION, Arms, good. Legs, do. Grasp,

TREMORS, Hands, Slight Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes, normal.

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, strong

Size, normal.

Apex Beat, 5.

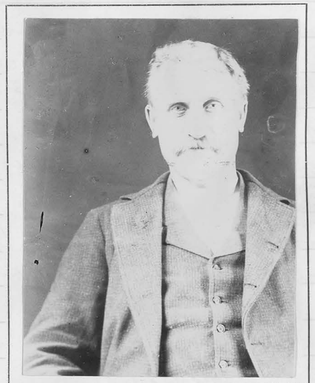
Murmurs, none.

ARTERIES,

normal.

LUNGS,

Chest symmetrical
Expansion good.
B. sounds normal



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fairly good.

BOWELS, Present Condition, regular.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Appears of ordinary intelligence. Speaks English distinctly + fluently. No insane ideas manifested. Appears rational on all subjects - States that he had imbibed considerably + was arrested: Complains of pain + tenderness over lower rib of R. side due to injury received - Says he was not crazy nor boisterous Physical condition apparently excellent: Has never been sick: Doubtless a case of acute alcoholism.

Personal and Medical History of William Bistidt (or Bostad.)

1900

This patient was brought here by Sheriff Sandy McDonald in poor physical condition with the following history:- No history of consanguinity or heredity: Patient intemperate: First symptoms of insanity manifested about a year ago: has had attack at intervals ever since: Derangement now manifested by Hallucinations & excitement: Disease appears increasing: Is Variable Derangement manifested on no special subject but is very violent at times: Before accession of disease was very excitable: No severe diseases nor injuries to head: Has been watched & finally imprisoned: No treatment pursued: On personal examination talks incoherently: very excitable:

Sep 15 Injury over floating rib at side: On admission put upon Infirmary Ward G.H.U. Rpt. Complexion light: hair light: eyes blue: Nose crooked: Vac. marks on L. arm: Scars on nose: R. shoulder R. leg, left shoulder & over R. eye: Is clean: Teeth all gone: Behavior good: Says R. side is sore. Exam. J.R. Pulliam)

" 16 Received on Ward & put to bed: T 99, P 80. Sep 16. Mind seems quite clear and beliefs quite

18 rationally. Sep 18. Marked improvement shown. Transferred to G 3. Sep 20. Complains of a

21/22 soreness in side. Sep 21. Does some work on ward. Sep 22. Mind seems clear: shows

Oct 3 marked improvement, physically. (14 Day record up) - Oct 3. Wt 195 lbs. Pgr. Nov Wt 206 lbs

Nov 1/14 Converses rationally: works on ward. Nov 14. Transferred to A! Habits neat & clean -

Dec 10 Sent home.

Discharged

Personal and Medical History of

Personal and Medical History of Charles E. Carr.

Whole No. 5663	No. for Year, 26.
Residence, Hennepin Co. Minn-	Insane Relatives, None.
nick March, 96.	Cause Exciting, Unknown- falsely imprisoned in Mch 98 when hallucinations began.
Date Admission, Sept. 18 1900	Cause Predisposing, Previous attack.
Admitted by C. L. Chapple hour, 7 P.M.	Form, Pseudo Paranoid (anthracite miner)
How Sent, F.C. Harvey Judge Hennepin Co.	Accompanying Bodily Disorder, none mentioned
Sex, male. Age, 46 yrs.	Suicidal or not, Has talked of it.
Civil Condition, married	Date of this Attack, March 1898
Children, five. Age Youngest Child, 22 mos.	Duration, About 2 yrs. 6 mos.
Occupation, Clerk.	No. of Attack, 2nd
Degree Education, Academic.	No. of Admission, 1st- has been at St Peter.
Profession of Religion, Not a church member.	Age First Attack, 44 yrs.
Habits, Temperate	Time of Leaving, May 13 — 1901
Nativity, England (Parents also born there)	Time in Hospital, 7 mos: 25 DS
Physicians Committing, L.A. Nippert & A.J. Moore.	Result, Recovered: Discharged Nov 30/1901
Correspondents,	

Ada Carr (wife) 1917 Hillside Ave, Minneapolis, Minn.

Examination on Admission by Dr. Warnous *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quite clear.

MEMORY, Past Events, fair
Recent Events, Good. Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct. alert.

REASONING POWER, Ordinary Subjects, fair
Special Subjects,
Own Mental State, Appreciates condition.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Exalted

DELUSIONS, Systematized, of persecution Transitory,
Special Subjects,

HALLUCINATIONS, Yes. - of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, died - old age.
Paternal Relatives, No history of insanity
Mother, living
Maternal Relatives, No history of insanity
3 Brothers and Sisters, Well. 5 Children well.

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

No.

HABITS, Drinking and Smoking, No.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Stenographer

Detail Date, Duration, and Character of Previous Attack, if any,
Discharg. from St Peter in Jan. '99.

Sleep, Appetite, Bowels,

Personal and Medical History of

F.C. HARVEY, JUDGE
ACE RABELL, CLERK

COURT HOUSE

OFFICE OF
PROBATE COURT
HENNEPIN COUNTY MINN.

Minneapolis Sept-17th-1900.

To the Sup't Hospital for the Insane, Rochester, Minn.

Dear Sir:- I commit the patient, Charles E. Carr, to your hospital, for the reason that I have received a communication from Dr. Tomlinson of the St. Peter hospital stating that, on account of the existence of small-pox at that institution, patients will not be received by him.

Yours truly,
F. C. Harvey
Judge of Probate.

RITION, fair
n of Skin, Anaemic
lation, do.
eral,
MENTS.

Normal.

LUNGS,
Chest symmetrical

Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character,

BOWELS, Present Condition,

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Has delusions & says he hears voices. Is rather on the alert regarding questions. Thinks people "had it in for him" & got him out of his position. Case is one of Paranoia

Personal and M

Whole No. 5663

Residence, Hennepin Co.
suick March, 96.

Date Admission, Sept. 18 1900

Admitted by C. L. Chapple hou.

How Sent, F. C. Harvey Supt. Hosp.

Sex, male. Age, 46 yrs.

Civil Condition, married

Children, five. Age Youngest Child, 22 mos. mos.

Occupation, Clerk.

Degree Education, Academic.

Profession of Religion, not a church member.

Habits, Temperate

Nativity, England (Parents also born there)

Physicians Committing, L. A. Nippert & F. J. Moore.

Correspondents,

Ada Carr (wife) 1917 Hillside Ave, Minneapolis, Minn.

N... born at St Peter.

Age F... yrs.

Time of L... May 13 — 1901.

Time in Hospital, 7 mos: 25 ds.

Result, Recovered: Discharged Nov 30/1901.

Examination on Admission by Dr. Warnous *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quite clear.

MEMORY, Past Events, fair
Recent Events, Good. Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct. alert.

REASONING POWER, Ordinary Subjects, fair
Special Subjects,
Own Mental State, Appreciates condition.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
exalted

DELUSIONS, Systematized, of persecution Transitory,
Special Subjects,

HALLUCINATIONS, Yes. - of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, died. old age.

Paternal Relatives, No history of insanity

Mother, living.

Maternal Relatives, No history of insanity

3 Brothers and 5 Sisters, Well. 5 children well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
No.

HABITS, Drinking and Smoking, No.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, stenographer.

Detail Date, Duration, and Character of Previous Attack, if any,
Discha. from St Peter in Jan. '97.

Sleep, Appetite, Bowels,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, 127 USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, big toe off (R. foot) Condition of Skin, Anaemic

TONGUE, Coatings, Promptness of Movement, Clear.

PUPILS, Equality, Equal. Size, nor - Response to Light, do Accommodation, do.

SIGHT, Good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, Normal Legs, do. Grasp,

TREMORS, Hands, Normal. Tongue, Facial Muscles, General,

PATELLAR REFLEX, Normal. Other Reflexes,

ARTICULATION, Slurred, Normal - Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, "

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,
Normal.

LUNGS,
Chest symmetrical

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character,

BOWELS, Present Condition,

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Has delusions & says he hears voices. Is rather on the alert regarding questions. Thinks people "had it in for him" & got him out of his position
Case is one of Paranoia

Personal and Medical History of Charles E. Carr.

1900

This patient was brought here by Sheriff's deputy W. Phillips in fair physical condition with the following history: No consanguinity, heredity nor intemperance known in family: First symptoms of insanity manifested about March 1898 when patient was falsely imprisoned & began to have hallucinations: Was sent to St Peter Hospital where he remained until Jan: 99. Since then has had hallucinations: Has taken five different clerical positions & has been discharged from all of them: Disease appears increasing: There are irregular rational intervals: Insanity now manifested by mental suggestions of murder & suicide hallucinations of hearing & sight: Suspicious of injuries to family: Strikes his children & has threatened wife because of mental suggestions: No filthy nor destructive habits: No previous peculiarities manifested No severe diseases nor injuries to head sustained: Has received no treatment since leaving St Peter Hospital: On personal examination sat quiet, face flushed, manner at times excited when talking of hallucinations: Said to explain mental condition.

Sept 18 On admission put upon S.W.E. G.H.U. Apt. Complexion dark: hair dark brown: eyes blue: skin in fair condition: Scars on hands. R. large toe gone: Is clean: 3 teeth out upper jaw & 5 from lower: Behavior good: Exam 2 R. Phillans.)

" 19/20 Received on Ward: given bath & put to bed. T 95. P 70. Sept 20. Restless, through night—

20/21 Talks about mental telepathy. Sept 21. vaccinated — Spends his time in reading.—

28/29 Given clothes and transferred to B 3. Sept 29. Memory good: Has delusions of a "persecutory type."

Oct 29/30 14 day — record up — Oct 30. Patient is well-behaved & agreeable: bowels & urine regular.

Nov 1 Transferred to A1. Dec. 1st T 134th P 82. Spends considerable time, practicing Shorthand

Dec 1/Jan 01/24 writing; also writing & sketching — Dec 31. Seems to have much improved—

Jany 31 No special change to report. Feby 1. Patient is rational — Mar 30. No apparent

Mar 30 delusions, but he is of a "suspicious" nature, and fearful of other patients. Apl 4. Spends

Apl 4/30 his time repairing bicycles, in basement. Apl 30. No change to report—

May 13 Sent home to Minneapolis.

Discharged

Personal and Medical History of

Personal and Medical History of Felix Goyette

Whole No. 5664

Residence, Ghent. Lyon Co. Minn.

Date Admission, September 18 1900

Admitted by Dr. O.C. Heyndale hour, 7 P.M.

How Sent, F.M. Lange J.P. Lyon Co.

Sex, male Age, 50

Civil Condition, divorced.

Children, 1? Age Youngest Child, –

Occupation, Carpenter.

Degree Education, Can read & write a little

Profession of Religion, Catholic

Habits, Not intemperate.

Nativity, Canada (Parents also from there)

Physicians Committing, H.N. Towner & Lk. Persons

Correspondents, Felix Goyette Jr. Ghent, Minn.

No. for Year, 27.

Insane Relatives, Mother has had slight attacks

Cause Exciting, Domestic trouble & Sunstroke.

Cause Predisposing, unknown - probably heredity

Form, Chronic Mania

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not.

Date of this Attack, One year ago.

Duration, One year.

No. of Attack, Several.

No. of Admission, 1st

Age First Attack, About 45 yrs.

Time of Leaving, Feb. 22d 1901.

Time in Hospital, 5 mos. 4 da.

Result, Died. Exhaustion in Acute mania.

Examination on Admission by Dr. Wasson *Date of* Sept 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused.

MEMORY, Past Events, Impaired.

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert - dull.

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Rather exalted.

DELUSIONS, Systematized, Transitory,

Special Subjects, Religious subjects.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living

Paternal Relatives, No history of insanity

Mother, living has been paralyzed.

Maternal Relatives, no history of insanity

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Sunstroke 16 yrs. ago. Syphilis - Typhoid

HABITS, Drinking and Smoking, yes.

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches

OCCUPATION, Healthy or not, Mechanic

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, Constipated

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION, Poor

WOUNDS, Abnormalities, Condition of Skin, Dry, Chapped

TONGUE, Coatings, Promptness of Movement, Coated - dry.

PUPILS, Equality, Equal. Size, Small - Response to Light, Normal Accommodation, do.

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, Normal Legs, do. Grasp,

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

PATELLAR REFLEX, Exaggerated Other Reflexes,

ARTICULATION, Slurred, Yes. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, Normal.

HEART, Regularity,

Strength, Sounds, 1st round very loud

Size, normal

Apex Beat, "

Murmurs, None noted

ARTERIES,

Easily compressible.

LUNGS,

Chest symmetrical

Expansion fair

B. sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient very talkative. believes he has powers which make him a great man. Talks on religious subjects. Says the Pope is coming to see him. Speech is defective. Says he owns the whole earth Gives a history of specific trouble which is cause of present trouble

1900

This patient was brought here by A. A. Schristianson in fair physical condition with the following history:- No history of consanguinity: Mother has had slight attacks of insanity: First symptoms of mental trouble in patient noticed about four or five years ago attack of but a few minutes duration. Present attack came on about one year ago: Does very excitable & complained of ill-treatment by his family: Disease appears increasing: Is variable: No rational intervals for three weeks past: Derangement now manifested by talking of family troubles & religious matters says he is going to see the Pope thinks his father tried to kill him: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: 16 years ago had a severe sunstroke: No confinement nor restraint employed: No treatment pursued. On personal examination talks incessantly of family matters & of going to see the Pope - all his talk indicates insanity.

Sep 18 On admission, put upon D.W. (G.P.I. Rpt. Complexion light: hair gray & bald: eyes blue: Skin in fair condition: Tattoo marks on Left arm: Scar on R. arm & on R. hand: Is clean: 2 teeth gone from upper Left & one from Lower Right jaw. Very nervous & excitable. Ex. P.R. pleasant. Received inward: given bath & put to bed: is badly demented & confused. Sep 19. very incoherent & very talkative. Sep 20. Patient goes to closet frequently to urinate. Sep 21. very noisy, and restless: put in protection sheet (Sep 20. Vaccinated) Sep 22. Extremely restless through several nights. Oct. 1st Day moved up. Oct 9-10-11-12. Requires Catheterization (for retention) — Wt 107#. Nov 9. Transferred to V.S! very restless and noisy, through night, for several nights — Had trouble with patient Frank Abbott, and was hit in head - slight bruise - Nov 26. Transferred to T.W: put to bed and on treatment: had to be put in protection sheet, through night. — 1901 Jan 1/2 Patient given dress — Jany 31. Is more quiet, but very noisy, by spells. — Feb 1/2 Transferred inward. Feb 5. Continues extremely restless, noisy & destructive to clothing & bedding: kept in straight-suit. Is much emaciated. Feb 18. Legs considerably swollen: Feb 21. Continues about same: extremely restless & destructive: sleeps little. Feb 22. 4:30 am had a "sinking spell" - (Estate of Collapse). Temp. below 94°. Bowels loose. Given hypo. Strych: 1/30 Q.H. 3. also 1/2 oz. Tannic, Glycerine Enema at 10 am. Continues unconscious, with considerable rigidity & some involuntary movements. Expired at 6:40 P.M.

Died

Personal and Medical History of James Crippra.

Whole No. 5667.

Residence, Haywood, Freeborn County

Date Admission, September 21 1900.

Admitted by Dr A.S. Kilbourne hour, 10 30 Am.

How Sent, H Blackmer Jopt. Freeborn Co

Sex, male. Age, 45

Civil Condition, married

Children, three Age Youngest Child, -

Occupation, Farmer

Degree Education, common school

Profession of Religion, Catholic

Habits, not intemperate

Nativity, Bohemia - parents also

Physicians Committing, A. L. Wedge + L. W Buck.

Correspondents,

No. for Year, 30.

Insane Relatives, none

Cause Exciting, Heat Stroke

Cause Predisposing,

Form, Subacute mania)

Accompanying Bodily Disorder,

Suicidal or not, not Suicidal

Date of this Attack, 1st August (1900)

Duration, Since August (1900)

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 45

Time of Leaving, Nov 5 - 1900

Time in Hospital, 1 month 15 Days

Result, Recovered - Dsg'd. Jany 29/1901

Examination on Admission by Dr. Wilson *Date of* Sept - 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear.

MEMORY, Past Events, good.

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct.

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Normal

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, died - Lung fever.

Paternal Relatives, No History of insanity.

Mother, died - after operation.

Maternal Relatives, all well.

3 Brothers and 2 Sisters, 3 children living 1 dead -

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

None -

HABITS, Drinking and Smoking, to ~~Excess~~ a at times

HEADACHES, VERTIGO, OR CONVULSIONS, yo -

OCCUPATION, Healthy or not, farmer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION, Fair

WOUNDS, Abnormalities, Hernia L. side. Skin oily. Condition of Skin,

TONGUE, Coatings, Promptness of Movement, Clear.

PUPILS, Equality, Equal - Size, normal Response to Light, normal Accommodation, do.

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, none Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular.

Strength, Sounds, Clear

Size, normal

Apex Beat, "

Murmurs, none noted

ARTERIES,

normal.

LUNGS,

Chest symmetrical
Expansion good.
Breath sounds normal-

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, good.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient of fair mental development + rational on all subjects. Memory good. Has had considerable trouble with wife whom he says had him committed here because she was angry. Says she was untrue to him + would go out nights with other men + tried to get rid of him. His story is quite plausible + brother accompanying him corroborated it. Patient is not insane.

Personal and Medical History of James Leippra

1920

This patient was brought here by Sheriff E. F. Erickson, accompanied by Joseph Leippra in good physical condition with the following history: No history of heredity, consanguinity or intemperance in patient or parents: First symptoms of insanity manifested "in August last by being overheated": Disease appears stationary: variable with irregular rational intervals: derangement not manifested by delusions: Thinks he hears people about his house at night: thinks one of his children is not his own: not disposed to injure others: not suicidal, filthy nor destructive: no previous peculiarities, severe disease or head injury: has not been confined or restrained. Supposed cause of disease - heat-stroke: Nothing known as to treatment received.

Sep 21 On personal examination:- much excited: has a wild expression. On admission put upon B³ East (Gen. F. M. Dept) complexion dark: hair black: eyes brown: cond: of skin good: scar over right eye: scar in centre of forehead: small scar on back of head: vaccination on left arm: hernia on left side: dirty - one tooth gone from right upper jaw, two from left lower jaw: behavior good. (Ex. by W. F. Daly).

" 22 Received on B³ and given bath. T. & P. normal. Leipra. vaccinated: well-behaved; converses

23 rationally: physical condition good. Sept 23. Patient seems to worry about his commitment. Has slight "persecutory delusions" - (Is a mild case of Paranoia) — 14 Day recd up. -

Oct 31 Well-behaved: agreeable & works at ward: physical condition good. ———

Nov 5 Was taken Home by Brother.

Discharged

Personal and Medical History of

Personal and Medical History of Fred A. Dupp.

Whole No. 5668
Residence, Nobles County. Minn.
Date Admission, September 21' 1900
Admitted by Dr. A. J. Kilbourn hour, 10½ Am.
How Sent, C. M. Cary & opt. Nobles Co.
Sex, male Age, 48
Civil Condition, divorced
Children, one Age Youngest Child,
Occupation, Canvasser
Degree Education, Common school.
Profession of Religion, not a church member.
Habits, Intemperate
Nativity, Illinois (Parents born in Newyork)
Physicians Committing, Ast Clark & GK. Curran -
Correspondents, Emily R. Dupp - Mother Round Lake, Minn.
Dr Ast Clark - family physician - Worthington, Minn.

No. for Year, 30
Insane Relatives, none
Cause Exciting, Intemperance & loss of limb.
Cause Predisposing, Unknown.
Form, Acute Alcoholism (Mania à Potu)
Accompanying Bodily Disorder, limb amputated.
Suicidal or not, Has talked of it.
Date of this Attack, ?
Duration, ?
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, ?
Time of Leaving, Dec, 11' 1900.
Time in Hospital, 2 Mos. 20 Ds
Result, Discha. Recovred. Feb. 5' 1901

Examination on Admission by Dr. Wasson *Date of* Sept 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear.
MEMORY, Past Events, good.
Recent Events, Impaired Special Subjects, good.
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct.
REASONING POWER, Ordinary Subjects, good.
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
normal
DELUSIONS, Systematized, Transitory,
Special Subjects,
none present on examination.
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, died. heart trouble
Paternal Relatives, no history of insanity.
Mother, living. well.
Maternal Relatives, no history of insanity
Brothers and Sisters, well. 1 Child - well.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Typhoid malaria.
HABITS, Drinking and Smoking, Alcoholism - smokes
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Engineer & Clerk.
Detail Date, Duration, and Character of Previous Attack, if any,
Says he has been warding off confirmed spells all summer
Sleep, good Appetite, fairly good Bowels, regular.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, - PRESENT WEIGHT, - USUAL WEIGHT, NUTRITION, Fair.
WOUNDS, Abnormalities, Amputated right extremity - scar on thigh Condition of Skin, bronzed.
TONGUE, Coatings, Promptness of Movement, coated.
PUPILS, Equality, equal. Size, normal. Response to Light, do Accommodation, do.
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good.
COORDINATION, Arms, normal Legs, do. Grasp,
TREMORS, Hands, none Tongue, Facial Muscles, General,
PATELLAR REFLEX, sluggish Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, Slow,
FACIAL EXPRESSION, Sensibility, normal
HEART, Regularity,
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES,
Compressible - flabby.
LUNGS,
Chest symmetrical
Expansion good.
Breath sounds vesicular

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, irregular
BOWELS, Present Condition, normal

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

On commitment seemed much confused. thought if he could get enough people to pray for him his leg would grow out again. Said he knew of people who had recovred through prayer. Had been drinking from one to two pints of whiskey a day for weeks which caused condition. On examination three days later seemed clear & rational. Knows he was confused during that time but has no knowledge of what happened.

Personal and Medical History of Fred A. Tripp

Personal and Medical History of

1900

This patient was brought here by Sheriffs deputy Newton Fauske attended by Fred. Tripp, in fair physical condition, with the following history. No consanguinity nor heredity noted in family: Patient intemperate: First symptoms manifested by fasting & prayer for the renewal of an amputated limb: Disease appears increasing. Not variable. Derangement now manifested on subject of the renewal of an amputated leg & by getting five thousand prayers which are to be copyrighted: Not disposed to injure anyone. No filthy nor destructive habits. No peculiarities previously manifested. No severe disease nor injuries to head sustained: No confinement nor restraint employed. No treatment pursued.

Sep 21 On personal examination very nervous & has muscular tremors, otherwise physical condition good. On admission put upon Infirmary Ward (T. F. N. Rpt.) complexion dark, hair black: eyes blue, condition of skin good: right leg off: scar on right side of face & on left leg above knee: bruises below elbow: Mouth: one tooth gone from right lower jaw. Its in bad condition: behavior good. —

" 23 Received at Ward (TW): and put to bed. Is neat and clean in personal appearance. Sep 23 Says

25 that his leg will grow out "by his fasting 21 days". Sept 25 puts clothes and gets up.

26 Patient is non-rational and admits his delusion. Oct 1 Wt 148#: Spends his time reading

Oct 1 talks rationally: takes part in amusements. Pleasant & agreeable: has been on A.3 —

Dec 11 Improved mentally & physically. Sent Home.

Discharged

Personal and Medical History of C. N. Ludlow

Whole No. 1669

Residence, St. Paul, Minn.

Has been resident of state and county 21 years.

Date Admission, Sept. 21. 1900

Admitted by Dr. E. J. Warner hour, 7 p.m.

How Sent, E.W. Bazille, Judge of Probate Ramsey Co.

Sex, male Age, 33 (?)

Civil Condition, Single

Children, – Age Youngest Child, –

Occupation, general salesman

Degree Education, College.

Profession of Religion, Catholic

Habits, Intemperate (alcoholic)

Nativity, New Jersey, Parents Ireland

Physicians Committing, E.J. Wheaton & Arthur Sweney

Correspondents,

No. for Year, 32

Insane Relatives, uncle died insane

Cause Exciting, alcohol

Cause Predisposing, Heredity

Form, Alcoholic Dementia

Accompanying Bodily Disorder,

Suicidal or not, not suicidal

Date of this Attack, Two weeks ago

Duration, Two weeks

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 33 (?)

Time of Leaving, October 1st – 1902

Time in Hospital,

Result, Transferred to Hastings Asylum

Examination on Admission by Dr. Warner *Date of* Oct 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused.

MEMORY, Past Events, much impaired

Recent Events, Cannot remember Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, Impaired

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Rather indifferent

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living - well.

Paternal Relatives, no history of insanity

Mother, living well.

Maternal Relatives, no history of insanity

Brothers and Sisters, well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

typhoid. Gonorrhoea. Syphilis eczema.

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Salesman

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Good Appetite, good Bowels, Diarrhoea

Personal and Medical History of

LUDLOW SENT TO THE ASYLUM.

He Has a Delusion That He Is a Fireman.

In the probate court yesterday afternoon C. N. Ludlow, well known about St. Paul, was adjudged insane and an order issued committing him to the insane asylum at Rochester.

While rational enough in ordinary matters, he is possessed with delusions, principal among which is one that he is a member of the Dan W. Lawler fire engine company. He told the physicians that he had been a quartermaster in the army, and in other ways furnished the physicians with sufficient evidence to show that he was not perfectly sane.

As the result of alcohol he is in bad shape, and hardly able to walk. He told the court that he was thirty-three years of age, and that he was born in Jersey City.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, not taken USUAL WEIGHT, NUTRITION, fairly nourished - Eruption on face & chest.

do. Condition of Skin,

ss of Movement,

Size, normal Response to Light, slow Accommodation, do.

us Senilis, or other troubles,

HEARING, Good.

COORDINATION, Arms, Imp. Legs, do. Grasp,

TREMORS, Hands, marked. Tongue, do. Facial Muscles, General,

PATELLAR REFLEX, lost. Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irregular

Strength, Sounds, weak

Size, enlarged.

Apex Beat, displaced down.

Murmurs, none - noted

ARTERIES,

weak

LUNGS,

Chest symmetrical

Expansion full.

Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, diarrhoea

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems much confused - thinks he is in camp at Lake City says they had a fire last night, he worked hard & is tired today. "Came into camp today" Has been drinking of late & condition comes from alcoholism. Has an eczematous eruption over face & body. Heart is very irregular - no murmurs noted.

Personal and Medical History of C. R. Ludlow

Whole No. 5669

Residence, St. Paul, Minn.

Has been resident of state and county 21 years

Date Admission, Sept. 21. 1900

Admitted by Dr. C. J. Warsons hour, 7 p.m.

How Sent, C.W. Bazille, Judge of Probate Ramsey Co.

Sex, male Age, 33 (?)

Civil Condition, Single

Children, – Age Youngest Child, –

Occupation, general salesman

Degree Education, College.

Profession of Religion, Catholic

Habits, Intemperate (alcoholic)

Nativity, New Jersey, Parents Ireland

Physicians Committing, C.A. Wheaton & Arthur Sweeney

Correspondents,

No. for Year, 32

Insane Relatives, uncle died insane

Cause Exciting, alcohol

Cause Predisposing, heredity

Form, Alcoholic Dementia

Accompanying Bodily Disorder,

Suicidal or not, not suicidal

Date of this Attack, Two weeks ago

Duration, Two weeks

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 33 (?)

Time of Leaving, October 14 – 1902

Time in Hospital,

Result, Transferred to Hastings Asylum

Examination on Admission by Dr. Warsons *Date of* Oct 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused.

MEMORY, Past Events, much impaired

Recent Events, Cannot remember Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, Impaired

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Rather indifferent

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living - well.

Paternal Relatives, no history of insanity

Mother, living well.

Maternal Relatives, no history of insanity

Brothers and Sisters, well

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

Typhoid. Gonorrhoea. Syphilis eczema.

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Salesman

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, diarrhoea

Mortgage Sale.
DEFAULT HAVING BEEN MADE IN the payment of the sum of eleven thousand five hundred and sixty ($11,560.00) dollars, principal and interest, which is claimed to be due at the date of this notice upon a certain Mortgage executed by Peter Kilnor, a widower, to A. P. Tuttle, dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 25, which said Mortgage was duly assigned by said A. P. Tuttle to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 26, which said Mortgage was duly assigned by said Frederick Weyerhaeuser to Thomas Cochran, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 27, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 28, which said Mortgage was duly assigned by said Frederick Weyerhaeuser to Thomas Cochran, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 29, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 30, which said Mortgage was duly assigned by said Frederick Weyerhaeuser to Thomas Cochran, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 31, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 32, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 33, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 34, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 35, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 36, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 37, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 38, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 39, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 40, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 41, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 42, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 43, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 44, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 45, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 46, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 47, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 48, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 49, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 50, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 51, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 52, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 53, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 54, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 55, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 56, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 57, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 58, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 59, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 60, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 61, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 62, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 63, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 64, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 65, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 66, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 67, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 68, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 69, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 70, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 71, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 72, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 73, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 74, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 75, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 76, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 77, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 78, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 79, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 80, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 81, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 82, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 83, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 84, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 85, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 86, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 87, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 88, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 89, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 90, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 91, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 92, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 93, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 94, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 95, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 96, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 97, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 98, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 99, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 100, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 101, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 102, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 103, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 104, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 105, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 106, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 107, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 108, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 109, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 110, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 111, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 112, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 113, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 114, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 115, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 116, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 117, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 118, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 119, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 120, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 121, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 122, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 123, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 124, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 125, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 126, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 127, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 128, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 129, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 130, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 131, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 132, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 133, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 134, which said Mortgage was duly assigned by said Thomas Cochran to Frederick Weyerhaeuser, by assignment dated the 1st day of October, 1900, and recorded in the office of the Register of Deeds in and for said Ramsey County, Minnesota, on the 2nd day of October, 1900, at 10 o'clock a. m., in Book 220 of Mortgages, on page 135, which

Personal and Medical History of C. N. Ludlow

Personal and Medical History of

1900

This patient was brought here by Mr. J. Schoon, attended by John Dufour in poor physical condition, with the following history: No history of consanguinity: patient is alcoholic; made legal income: first symptoms of insanity manifested two weeks ago by mental confusion with paresthesia: disease stationary: no rational intervals: derangement now manifested by general confusion of ideas and general delusions: not disposed to injure others, not suicidal, filthy nor destructive: nothing known as to previous psychiatric, nervous disease or injury to head: alcohol is supposed cause of disease: Has received M. D. treatment: On personal examination:- patient talks incoherently of various delusions - is confused as to time and place. On admission put on Infirmary ward: complexion dark: hair gray: eyes blue: condition of skin poor and dirty: scar on right leg below knee: eruption all over body: dirty: legs weak: one tooth gone from right lower jaw, one from left lower jaw, one upper front. Behavior good.

Sep 21 " 25 Received on Ward: T 100. P 110: Has acne eruption on face. Sep 23. Thinks he is in Lake City by order of his Chief: patient seems demented, confused, and his memory is very poor. Thinks he is out with the Militia. — Oct 7. Thinks he is working in Camp. Oct 14 Patient is very restless and destructive; badly confused: maniacal at times. Nov. 17 Still confused and does not know where he is; condition brought on by excessive drinking. Nov 1 17/20 Up. onward: bowels & urine regular: hypo. Strychnia ½0, each four hours. Nov 20. Transferred to B2.

Dec 1/20 Improving physically: quiet & well behaved: Dec. 16th — Dec 30. Still improving physically:

1901 Jan 31 walks more steadily; otherwise, but little change. Jan 31/1901. Dull, & sleeps most of time: answers questions, but talks little: has no ambition or interest in anything. Feb 28. Wt 170#. Mar. 176#

Feb 28 Mar 31 Has been very quiet & peaceful: habits neat. Memory extremely poor. Is beginning to appreciate somewhat where he is. Apl 30. Continues in good health: some mental improvement. Speaks

Apl 30 May 1 rationally: reads some. very indolent & sluggish in habits. May 1. 182#. P 112. Is now working

May 31 in lawn with the gardener. Is demented, but gets along very well. May 31. No change to note.

July 31 Still working with gardener. Otherwise, no change in condition. Aug 1. Wt 184#.

1901 Jan 31 During period, has worked a little: sits in a dull manner and dozes, most of time. Rather untidy & slovenly about dress.

Oct 15/01 Summary by Dr. Chaffee: (at time of patient's transfer to Hastings State Asylum).—

Upon admission, was very stupid: showed quite profound dementia: memory absolutely lapsed: was also in rather poor physical condition. Improved somewhat in latter respect, & has been, since, in quite good physical health. Has shown, at times, slight recollection of the past, but memory of recent events extremely poor. Is extremely indolent: careless of his personal appearance & surroundings. Spends much time in reading & crowds pockets full of papers &c. Worked a little, at intervals, but is too indifferent to accomplish anything. - Behavior has always been good.

Oct 14/01. Transferred to Hastings State Asylum —

Personal and Medical History of A. G. Larson

Whole No. 5670

Residence, Northfield, Rice Co.

Date Admission, Sept. 21, 1900.

Admitted by Dr. C. L. Chapple hour, 8 p.m.

How Sent, James Hunter, J. of P. Rice County

Sex, male Age, 27 years.

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Student

Degree Education, 2nd year in College.

Profession of Religion, Congregational

Habits, Very temperate.

Nativity, Sweden. Parents also

Physicians Committing, Wm. Graves & M. L. Mayland

Correspondents, Mrs. Maria Larson, East Chain Lakes, Minn. (mother)

No. for Year, 33

Insane Relatives, none

Cause Exciting, malaria, over study (and manism)

Cause Predisposing,

Form, Paranoia

Accompanying Bodily Disorder, has had malaria

Suicidal or not, not suicidal

Date of this Attack, middle of July.

Duration, about two months

No. of Attack, 2 nd

No. of Admission, 1st. here (in army Hospital)

Age First Attack, 25 years.

Time of Leaving, September 9—1901

Time in Hospital, 11 Mos 19 Ds

Result, Improved

Discharged by Board of Control Feby 5-1902

Examination on Admission by Dr. Wasson *Date of* Sept. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear.

MEMORY, Past Events, good.

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

rather alert.

REASONING POWER, Ordinary Subjects, good.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather exalted.

DELUSIONS, Systematized, Transitory,

Special Subjects,

See

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, hypochondriacal.

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, died asthma

Paternal Relatives, no history of insanity.

Mother, living, well.

Maternal Relatives, no history of insanity

2 Brothers and 3 Sisters, Well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Malaria 2 years ago.

Neurasthenia.

HABITS, Drinking and Smoking, no.

HEADACHES, VERTIGO, OR CONVULSIONS, frontal

OCCUPATION, Healthy or not, student & clerk.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Insomnia Appetite, good Bowels, Constipated

Personal and Medical History of

5670
41/205

M A. G. Larson

Copy of Order for Hearing Petition of E. B. Robertson of Northfield, Rice Co. Minn. for appointment of as guardian for A. G. Larson insane; served and service admitted April 14/1901

(Papers filed with commitment papers.)

RACTERISTICS.

USUAL WEIGHT, NUTRITION, fair

Condition of Skin Anaemic

ted.

onse to Light, normal Accommodation, do

do. Grasp,

Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular.

Strength, Sounds, normal.

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES, Full.

LUNGS, Chest symmetrical. Expansion good. Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient in rather a hypochondriacal state. Has peculiar ideas regarding work. Says he is not fit to do labor; believes he is fitted for higher things. Delusions are transitory. Case is one of mild paranoia. Physical condition good.

Personal and Medical History of A. G. Larson

Whole No. 1670

Residence, Northfield, Rice Co.

Date Admission, Sept. 21, 1900.

Admitted by Dr. C. L. Chapple hour, 8 p.m.

How Sent, James Hunter, J. of P. Rice County

Sex, male Age, 27 years.

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Student

Degree Education, 2nd year in College.

Profession of Religion, Congregational

Habits, Very temperate.

Nativity, Sweden. Parents also

Physicians Committing, Wm. Reeves & M. L. Mayland

Correspondents, Mrs. Maria Larson, East Chain Lakes, Minn. (mother)

No. f...

Insan...

Cause...

Cause...

Form,

Accon...

Suicid...

Date ...

Durati...

No. o...

No. of Admission, 1st. Res (In army Hospital)

Age First Attack, 25 years.

Time of Leaving, September 9—1901

Time in Hospital, 11 Mos 19 Ds

Result, Improved

Discharged by Board of Control Feby 5—1902

Examination on Admission by Dr. Mayou *Date of* Sept. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear.

MEMORY, Past Events, good.

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

rather alert.

REASONING POWER, Ordinary Subjects, good.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather exalted.

DELUSIONS, Systematized, Transitory,

Special Subjects,

Re

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, hypochondriacal.

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, died asthma

Paternal Relatives, no history of insanity.

Mother, living, well.

Maternal Relatives, no history of insanity

2 Brothers and 3 Sisters, Well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Malaria 2 years ago.

Neurasthenia.

HABITS, Drinking and Smoking, no.

Frontal HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Student & clerk.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Insomnia Appetite, good Bowels, Constipated

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9¼ in PRESENT WEIGHT, 174½ USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, none Condition of Skin, Anaemic

TONGUE, Coatings, Promptness of Movement, large - coated.

PUPILS, Equality, equal - Size, normal Response to Light, normal Accommodation, do

SIGHT, good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, do.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, none - Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, normal - Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular.

Strength, Sounds, normal.

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES, full.

LUNGS, Chest Symmetrical. Expansion good - Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Are,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient in rather a hypochondriacal state. Has peculiar ideas regarding work. Says he is not fit to do labor; believes he is fitted for higher things - Delusions are transitory. Case is one of mild paranoia - Physical condition good.

Personal and Medical History of A. G. Larson.

1900

This patient was brought here by Frank L. White in fair physical condition with the following history: No history of consanguinity heredity or intemperance in patient or parents: First symptoms of insanity manifested 3½ years ago. "Had malaria in the south, etc." duration of attack not known: was confined in Army Hospital: First symptoms of present attack manifested about the middle of last July by sleeplessness & nervousness: talked about how clothing ought to be worn, etc,- hallucinations: disease appears increasing: variable, with rational intervals: derangement most manifested in social questions does not believe in work and thinks only animals ought to work: not disposed to injure others, not suicidal filthy nor destructive: previous treatments,- "Strong temper at times: irregular sleeping out of doors at night: patient had malaria while in the army: has not been restrained or confined except as stated above. Supposed cause of disease,- malaria, over study and nervousness: has received no treatment: On personal examination:- Very heavy tongue thick coat. On admission but upon infirmary ward: Sept 21 (U.S.N. Apt.) Complexion light: hair light: eyes blue: condition of skin good: varicose veins: scar on right shoulder: clean: one tooth gone right upper jaw. Behavior good. ——— " /22 Received on ward, & put to bed. Temp 98.0. Wt 194#. Sept 22. Complains of Constipation 27/29 Restless; does not want to stay in bed. Sept 29. Given clothes and transferred to B3: Patient has peculiar ideas about work and constantly discusses the subject: says "Man was Oct 4/31 not intended to do manual labor". Oct 4 – (14 day record up) – Oct 31. Expresses no definite delusions: refuses to work: clean and neat in habits. (A case of mild paranoia) Nov 1/30 Wt. 198#. Nov 14. Transferred to A1. Nov 30. Visited, today, by 2 class mates from Carleton College. – Has been very well-behaved, sociable & agreeable: converses rationally on ordinary topics. "thinks his nerves are in poor condition". Dec 1. 198# – Jany 1/1901. 201# – Jany 10. Was sent to the City Dec 1 Jan 10/1901 to have teeth treated. Is very anxious about going home: asks for parole: Complains of his stomach: shows no prominent delusions, but is peculiar. "Thinks some one is going to leave him some money &c". – Jan 26/1901. Transferred to B1². Is constantly talking about going home, and 26 always wanting an interview with Dr. Kilbourne. Becomes excited: "Thinks it an injustice that he is kept here". – Jan 31. Reads & writes a good deal. Physical health excellent. – 31 Feby 1/15 Wt 191# Pulse 72. Feby 15. Converses freely and seems to be well mentally. March 7. attempted to walk March 7 away from crowd. May 2. Again attempted to elope: was returned by nurse. July 22. Transferred July 22/31 to A1. July 31. Expresses a desire to go home. Seems to have recovered from his former condition. Aug 1/20 Wt 198#. Talks freely: answers fairly well: Aug 20. Sent out camping at Oronoco. Sept 7/9 Returned from Camp: Sept 9. Sent out to work, at Oronoco, with Mr. Allis – 17 (Eloped from there).

Discharged

Personal and Medical History of

Personal and Medical History of James Burns.

Whole No. 5671

Residence, St. Paul Ramsey County
Resident of State and County since 1889

Date Admission, Sept. 27, 1900.

Admitted by Dr. E. J. Watsons hour, 7.30 pm.

How Sent, C. W. Bazille, Judge of Probate Ramsey Co.

Sex, male. Age, 46

Civil Condition, Single

Children, - Age Youngest Child, -

Occupation, machinist

Degree Education, common school

Profession of Religion, Episcopalian

Habits, not intemperate

Nativity, Canada - parents Ireland

Physicians Committing, L. O. Francis & C. W. McCord

Correspondents, Thomas Burns, 1005 E. 5th St. Sioux City, Ia.

No. for Year, 34

Insane Relatives, none

Cause Exciting, possibly clot of blood on brain.

Cause Predisposing, previous attacks(?)

Form, Organic Brain Disease

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not suicidal

Date of this Attack, July, 1900.

Duration, 2 months

No. of Attack, not 1st. has had several

No. of Admission, 1st

Age First Attack, 38 (?)

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Watsons *Date of* Sept. 1900.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired
Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.

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

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather exalted.

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy, HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living - well.
Paternal Relatives, no history of insanity
Mother, living
Maternal Relatives, no history of insanity
Brothers and Sisters, well.

(especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).

some mental disease - perhaps specific trouble. Gonorrhoea. 5 strokes of apoplexy.

HABITS, Drinking and Smoking, Smokes excessively - moderate drinker

HEADACHES, VERTIGO, OR CONVULSIONS, none

OCCUPATION, Healthy or not, Machinist

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Good Appetite, good Bowels, irregular

Personal and Medical History of James Burns.

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION, poor.

WOUNDS, Abnormalities, paralysis of Left arm. Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, Coated.

PUPILS, Equality, Equal. Size, normal Response to Light, slow. Accommodation, slow.

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good

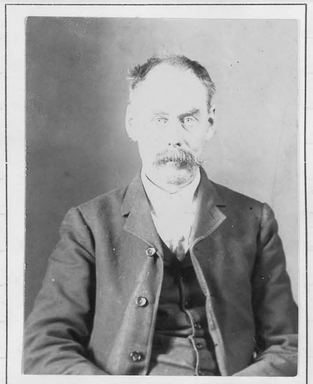
COORDINATION, Arms, impaired Legs, do. Grasp,

TREMORS, Hands, no. Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, Hesitating, hesitating Slow,

FACIAL EXPRESSION, Sensibility, normal.



HEART, Regularity,

Strength, Sounds, 1st round mark

Size, Enlarged

Apex Beat, displaced down into 4th intercostal space

Murmurs, none noted

ARTERIES,
flabby

LUNGS,
Bulging on R. side
Expansion poor
B. sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient much confused + thinks he has come to a place where he wanted to go tho when asked what place it is he cannot tell. Says he came directly from Sioux City. Has had five apoplectic strokes. Present condition comes from cerebral softening. Left hand atrophied + paralyzed

Personal and Medical History of James Burns.

1900

This patient was brought here by Thomas Burns (brother) in poor physical condition, with the following history: no history of consanguinity, heredity or intemperance in patient or parents, except patient uses tobacco: Symptoms of insanity manifested at different times during past seven or eight years, attacks lasting one or two hours: not sent to Hospital: First symptoms of present attack manifested in July, 1900 by violence & threatening violence to family: disease appears increasing: not variable, with irregular rational intervals: derangement now manifested by thinking he is being robbed of his clothing, watch and other property: Has shown disposition & injure others, but not suicidal, filthy, now destructive, no previous peculiarities, acute disease or head injury: Has not been confined or restrained: nothing known as to treatment received: Cause of disease is possibly clot of blood on the brain: On personal examination, very nervous, constant tendency to walk: Insomnia. On admission (Gen. H. N. Apt) Sep 29 put upon B3 East: Complexion fair, hair brown, eyes blue, skin in good condition: want under left arm & one on abdomen: varicose veins back legs, little finger on left hand crooked: vaccination on left arm: has hernia: clean: Ten teeth gone from right upper jaw - one from left upper: ten from right lower: several old stumps, & teeth in bad condition: behavior good. Received at Ward: is quiet & well-behaved: "Think people are working against him" - Left hand paralyzed. Sep 30. Continues the same. Oct 1. Is now more worried - (14 Days recd up) - Patient has delusions: "hears his mother in the building". Nov 1. 137# Dec 26. Dec 31. Patient Continues confused: somewhat improved physically. Is quiet. 1901 Jany 31 No change to report. — Febs. Wt 138#. Mar 2 Wt 140#. Mar 31. Little change noticed. Mar 31 Apl 2 physical condition good: manner rather silly. Evidently has some hallucinations "hears voices": habits somewhat slovenly: does as told. Is contented to stay where he is. Apl 2. Continues much the same: somewhat confused, at times: talkative & silly in manner. — Apl 3 Transferred to B3. Apl 30. Condition the same: health good: very violent & rather slovenly. June 30 Little change mentally: has been at work in lawn some. July 31. No change in emotion and July 31 above last note holds good. Augs. Wt 139#: Nov 1. Wt 145#: Jany 31/02. No change. 1902 Jan 31 During warm weather, worked well outside: is rather silly & demented in manner. but talks quite pleasantly: habits tidy.

Oct. 1/02 Wt. 144#. Aug. 5-22. Out at camp.

Dec. 29 Trans. to Annex

Jan 7/03 Trans. to D.V.R. Erysipelas of face. Jan 21 Recovered. Trans. to Annex.

1903 Jan 31. Quiet & peaceable; does nothing; talks freely; but rather silly & rambling.

Personal and Medical History of

Personal and Medical History of Fred W. Lilley

Whole No. 1673

Residence,

Date Admission, Sept. 28. 1900

Admitted by Dr. A. J. Kilbourne hour, 7.30 p.m.

How Sent, Pascal P. Bell, Judge of District Court Penny

Sex, male Age,

Civil Condition,

Children, Age Youngest Child,

Occupation,

Degree Education,

Profession of Religion,

Habits,

Nativity,

Physicians Committing, Howard R. Merrick + Waldo Sweet

Correspondents,

No. for Year, 36

Insane Relatives,

Cause Exciting,

Cause Predisposing,

Form, Not Insane

Accompanying Bodily Disorder,

Suicidal or not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving, Oct. 1- 1900

Time in Hospital, 3 d.

Result, Disc. Nov. 7. 1900 Malingerer.

Examination on Admission by Dr. Wanous *Date of* Sept 29 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused.

MEMORY, Past Events, fair

Recent Events, poor Special Subjects, avoids answers.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert + illusive

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

apparently agitated + depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, Few days.

ONSET, Gradual or Sudden, Sudden.

(Question concerning Insanity, Consanguinity, Epilepsy, HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living well

Paternal Relatives, no history of insanity

Mother, died brain trouble

Maternal Relatives, no history of insanity

Brothers and Sisters, well. 1 died Mo.

(especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).

Typhoid.

HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, Cook.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Appetite, Bowels,

not obtained

LILLEY IS ADJUDGED INSANE.

Tried to Murder His Wife and Another Woman in a Wine House.

Fred W. Lilley, who some weeks ago made a desperate attempt to murder his wife and another woman by shooting them while at the California Wine house, has been ordered to the insane hospital at Rochester.

County Attorney Bigelow yesterday satisfied Judge Bazille, of the probate court, that Lilley was not a safe person to go unrestrained, and after an examination by the customary commission the committal papers were issued.

When placed in jail, after the shooting, Lilley showed signs of insanity, and the examining physician so decided. Judge Bazille, however, refused to commit the prisoner, and he was sent to the city hospital instead.

At the hospital his insane actions became more pronounced, and the above action was promptly taken.

ASK FOR COMMITTMENT.

County Attorney Desires to Have F. W. Lilly Taken to Rochester.

County Attorney Bigelow will to-day petition the district court to issue an order committing Fred W. Lilly, who is held to the grand jury on the charge of a murderous assault, to the insane asylum at Rochester. Lilly is the man who was arrested on the charge of shooting his wife and another women in a Seventh street restaurant. About three weeks ago he was pronounced insane in the probate court and sent to the city hospital. He will probably be taken to the asylum to-night.

30/1900

With Suicidal Intent.

The insanity shammer, Fred W. Lilly, formerly of Winona, who has been given a sentence of five years to be served at Stillwater, was taken to his new quarters Saturday and put to work. But before going to Stillwater and while he was in the Ramsey county jail he made another attempt to commit suicide and was only prevented by a fellow prisoner by the name of Peter Anderson, who being asleep in the rear end of the cell was awakened by the noise Lilly made in attempting to hang himself with a rope made of the bed clothes. Anderson threw him down and persuaded him to give up the attempt.

Lilly carries about with him a picture of his baby boy, which he often looks at and exclaims, "If it wasn't for that darling boy I would shove off." He is now serving his time at Stillwater, while his wife has the custody of the child and feels free from the danger which she declared always threatened her when he was out of jail. It will be remembered that Lilly was proven to be shamming by Dr. Kilbourne at the State hospital at this city. When this had been established against him conviction soon followed.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 132. USUAL WEIGHT, NUTRITION, fair

es, Injury to back + 6th rib. Contraction Scars finger L hand + of R ~~Condition~~ of ~~Skin.~~ Ring finger.

omptness of Movement, clear

nal. Size, normal Response to Light, do. Accommodation, do.

he cannot see out of L. eye. eye is normal.

int, Arcus Senilis, or other troubles,

ms, nor. Legs, do. Grasp,

-mous. Tongue, Facial Muscles, General,

X, normal. Other Reflexes,

urred, normal Hesitating, Slow,

ON, Sensibility,

Regular

rmal

"

oted

f

rtical

Face

ds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

INE, Quantity, Sp. g. Reaction, Color and Appearance,

Sugar,

Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, poor

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems confused + will not answer questions coherently. Always avoids answering but tells about something which is not connected with the question. When asked why he tried to kill his wife he answered "the steward told me to bring it in the morning" would persist in saying 5 × 2 = 8. seems very ignorant of everything which leads one to think he is feigning insanity as he looks like a man of fair intelligence. His memory for past events is clear also at times for recent events.

Personal and Medical History of Fred W. Lilley

Whole No. 5673

Residence,

Date Admission, Sept. 28. 1900

Admitted by Dr. A. T. Kilbourne hour, 7.30 p.m.

How Sent, Pascal P. Brill, Judge of District Court Ramsey Co.

Sex, male Age,

Civil Condition,

Children, Age Youngest Child,

Occupation,

Degree Education,

Profession of Religion,

Habits,

Nativity,

Physicians Committing, Howard R. Merrick & Talbot Sweetser

Correspondents,

No. for Year, 36

Insane Relatives,

Cause Exciting,

Cause Predisposing,

Form, Not Insane

Accompanying Bodily Disorder,

Suicidal or not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving, Oct. 1- 1900

Time in Hospital, 3 d.

Result, Disc. Nov. 7. 1900

Malingerer.

Examination on Admission by Dr. Wamoss *Date of* Sept 29. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused.

MEMORY, Past Events, fair

Recent Events, poor Special Subjects, avoids answers.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert & illusive

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

apparently agitated & depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, Few days.

ONSET, Gradual or Sudden, Sudden.

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living well

Paternal Relatives, no history of insanity

Mother, died brain trouble

Maternal Relatives, no history of insanity

Brothers and Sisters, well. 1 child mll.

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

Typhoid.

HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, Cook.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Appetite, Bowels,

Not obtained

d Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6 PRESENT WEIGHT, 132. USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, Injury to back + 6th rib. Contraction little finger L. hand + of R ~~Condition~~ of ~~Skin,~~ ring finger.

TONGUE, Coatings, Promptness of Movement, clear

PUPILS, Equality, Equal. Size, normal Response to Light, do. Accommodation, do.

SIGHT, Says he cannot see out of L. eye. eye is normal.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, nor. Legs, do. Grasp,

TREMORS, Hands, none. Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Regular.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

INE, Quantity, Sp. g. Reaction, Color and Appearance,

Sugar,

Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, poor.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems confused + will not answer questions coherently. Always avoids answering but talks about something which is not connected with the question. When asked Where he tried to kill his wife he answered "the steward told me to bring it in the morning" Would persist in saying 5 × 2 = 8. Seems very ignorant of everything which leads one to think he is feigning insanity as he looks like a man of fair intelligence. His memory for past events is clear also at times for recent events.

With Suicidal Intent.

11/30/1900

The insanity shammer, Fred W. Lilly, formerly of Winona, who has been given a sentence of five years to be served at Stillwater, was taken to his new quarters Saturday and put to work. But before going to Stillwater and while he was in the Ramsey county jail he made another attempt to commit suicide and was only prevented by a fellow prisoner by the name of Peter Anderson, who being asleep in the rear end of the cell was awakened by the noise Lilly made in attempting to hang himself with a rope made of the bed clothes. Anderson threw him down and persuaded him to give up the attempt. Lilly carries about with him a picture of his baby boy, which he often looks at and exclaims, "If it wasn't for that darling boy I would shove off." He is now serving his time at Stillwater, while his wife has the custody of the child and feels free from the danger which she declared always threatened her when he was out of jail. It will be remembered that Lilly was proven to be shamming by Dr. Kilbourne at the State Hospital at this city. When this had been established against him conviction soon followed.

Personal and Medical History of Fred W. Lilley

Whole No. 5673

Residence,

Date Admission, Sept. 28. 1900

Admitted by Dr. A. F. Kilbourne hour, 7.30 p.m.

How Sent, Hon. C. P. Brill, Judge of District Court Phoenix

Sex, male Age,

Civil Condition,

Children, Age Youngest Child,

Occupation,

Degree Education,

Profession of Religion,

Habits,

Nativity,

Physicians Committing, Howard R. Merrick & Talbot Smith

Correspondents,

No. for Year, 36

Insane Relatives,

Cause Exciting,

Cause Predisposing,

Form, Not Insane

Accompanying Bodily Disorder,

Suicidal or not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving, Oct. 1- 1900

Time in Hospital, 3 d.

Result, Disc. Nov. 7. 1900 Malingerer.

Examination on Admission by Dr. Watsons *Date of* Sept 28 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused.

MEMORY, Past Events, fair

Recent Events, poor Special Subjects, avoids answers.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert & illusive

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

apparently agitated & depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, Ten days.

ONSET, Gradual or Sudden, Sudden.

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living well

Paternal Relatives, no history of insanity

Mother, died brain trouble

Maternal Relatives, no history of insanity

Brothers and Sisters, well. 1 died inf.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Typhoid.

HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, no.

OCCUPATION, Healthy or not, Cook.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Appetite, Bowels,

not obtained

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6 PRESENT WEIGHT, 132. USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, back & 6th rib. Contraction little finger L hand & of R Condition of Skin, Ring finger

TONGUE, Coatings, Pr clear

PUPILS, Equality, normal Response to Light, do Accommodation, do.

SIGHT, Nar of L. eye. eye is normal.

EYES, Nystag les,

HEARING,

COORDI Legs, do. Grasp,

TRE Tongue, Facial Muscles, General,

P al. Other Reflexes,

mal Hesitating, Slow,

Sensibility,

Size,

Apex Beat,

Murmurs, none noted

ARTERIES,

normal

LUNGS,

Chest symmetrical

Expansion fair

Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, poor

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems confused & will not answer questions coherently. Always avoids answering but talks about something which is not connected with the question When asked Why he tried to kill his wife he answered "the steward told me to bring it in the morning" Would persist in saying 5 × 2 = 8. Seems very ignorant of everything which leads one to think he is feigning insanity as he looks like a man of fair intelligence his memory for past events is clear also at times for recent events.

Personal and Medical History of Fred W. Lilley

This patient was brought here by John Moriarity in fair physical condition with the following history:- Only accompanying papers were order from District Judge committing patient to this hospital and petition in the matter of the insanity of said patient containing information as follows:- patient was arrested on or about July 11th in St Paul for assault, with a dangerous weapon, upon his wife & about Sept. 5th while in county jail he began to show signs of insanity when on being brought before Probate Court he was adjudged insane: he was sent to City Hospital and caused a great deal of disturbance & trouble there for which cause he was finally sent to this hospital. On admission put upon C.E. (St.A.N.Rpt. Complexion light: hair auburn: eyes blue: skin in good condition: Vac. mark on left arm: little fingers
Sep 28 on both hands crooked: Metacarpal bone in L. hand has been broken: 10 teeth in lower jaw: upper false set. Is clean: back swollen & sore says a colored man kicked him: Behavior confused & threatening.
" " Exam. by Dr. Wanous.) Placed on Ward. Patient apparently confused and threatening: tender over back and 6th rib: says "caused by being kicked by colored
29 man, who was protecting his wife, when in trouble." Sep 29. Examined by Dr. Kilbourne. Manns and Kopplin. Transferred to B3. Having confessed "Shamming" Insanity.
Oct 1 Returned to Ramsey County Jail, with Sheriff.

Discharged

Personal and Medical History of

Personal and Medical History of George Dunn.

Whole No. 5678

Residence, Winnebago Co. Minn.
Sent here from State Prison Stillwater.

Date Admission, October 12 1900.

Admitted by Dr. C. L. Chapple hour, 7 P.M.

How Sent, F. T. Wilson J. of P. Wash. Co.

Sex, male Age, 73 yrs.

Civil Condition, Single

Children, – Age Youngest Child, –

Occupation, Laborer.

Degree Education, Common school.

Profession of Religion, Catholic.

Habits, has used liquor to excess.

Nativity, Illinois. (Father Mass. mother do.

Physicians Committing, H. Clark. F. G. Landeen.

Correspondents,

Sep 20/00 See Letter (on file) from Henry Wolfe, Warden.

No. for Year, 41.

Insane Relatives, unknown.

Cause Exciting, unknown

Cause Predisposing,

Form, Acute Melancholia

Accompanying Bodily Disorder, Capillary circulation poor.

Suicidal or not, not.

Date of this Attack, November '99.

Duration, about 11 mos.

No. of Attack, 1st

No. of Admission, 1st here.

Age First Attack, 73 yrs.

Time of Leaving,

Time in Hospital,

Result,

Term of sentence of Geo. Dunn. Reg No 5216: Expires this day. He has no friends & his credit at this institution."

Examination on Admission by Dr. Warrens. *Date of* Oct. 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Rather sluggish.

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert.

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State, says he is insane.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather depressed.

DELUSIONS, Systematized, of persecution Transitory,

Special Subjects,

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

Father, living.

Paternal Relatives, No history of insanity

Mother, living

Maternal Relatives, no history of insanity

Brothers and Sisters, all well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Gonorrhoea.

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS, No.

OCCUPATION, Healthy or not, farmer.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, Regular.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft-8½ PRESENT WEIGHT, 152 lb USUAL WEIGHT, NUTRITION, Fair

WOUNDS, Abnormalities, Scar on left toe Condition of Skin, Anaemic

TONGUE, Coatings, Promptness of Movement, Slight coating.

PUPILS, Equality, Equal. Size, normal Response to Light, do Accommodation, do.

SIGHT, good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, none Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, Normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, Normal.

HEART, Regularity, Regular

Strength, Sounds, normal.

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,
Normal.

LUNGS,
Chest symmetrical
Expansion good.
Breath sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, irregular

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems rather on the alert in answering questions. Says he hears people talking about him. that the prison people could read his mind & controlled his thoughts. Heard voices in his cell. Appears depressed & morose. Condition one of acute melancholia physical condition good.

Personal and Medical History of George Dunn.

1900

This patient was brought here from State Prison* Stillwater, by Dr J. P. Chance, in fair physical condition, with the following history: No history concerning Consanguinity & heredity. patient has used liquor to excess: First symptoms of insanity manifested about Thanksgiving 1899. Disease appears increasing: not variable: Derangement manifested by delusions of persecution: hears voices talking about him, especially at night. Noise in shop excites him. Not disposed to injure anyone: Habits filthy & destructive: Previous peculiarities unknown: Has several scars on head from injury: Has been in solitary confinement & given Kedatives treatment. On personal examination countenance indicates mental disturbances: shows tendency to melancholia: capillary circulation poor. Discloses his delusions in conversation.

Note Patient was sentenced to State Prison Stillwater on Sept. 25'99 for crime of robbery in second degree, for a term of four years.

Oct 19 On admission, put upon B.E. & G.H.R. Rpt. Complexion dark: hair black: eyes blue: skin clear: Vac. mark on L. arm: Scar on forehead over L. eye: scars on back: Is clean: behavior good: Exam. Ch. (a.) —

" 23 Received on Ward: patient quiet: does not associate with other patients Oct 23. Threw dish in the dining room, because he was not waited upon promptly. Transferred to C. East.

24 Examined: appreciates his condition. Decs. no change apparent in his condition.

1901 Jany 31 Patient's condition remains about the same. Quiet & well behaved: habits are clean —

Feby 1 Wt 155# — Febyst: no change of importance. Talks a good deal to himself: has delusions of persecution in part of patients and nurses: language profane and obscene: Works on ward: habits tidy. Mar 31 Condition about the same. Apl 30 Behavior quite good. Is still very delusive — "Quite others can use his mind and voice" — Is very threatening in language — May 31 Wt 160# Refuses to go out for exercise. Still has delusions in regard to "use of voice" — Health good. June 30 No change noted. July 31. More ill-natured than formerly: very abusive in language — Still holds some "delusions of persecution". frequently is incoherent. Reads a good many library books — Aug 31 Wt 149#: Nov 2. Wt 152#. —: Jany 31/02. Has been in fair health: works a little on ward. 1902 Jany 31 Is very delusional & talks irrationally: surly & frequently pugnacious: attempts to plot against nurses.

Feb. 1/02 Wt. 154#. May 1/02. Still violent at times but quiet than he was; less troublesome; habits neat; works well on ward. Aug 1. Wt. 139#.

Nov. 1 Mental condition quite clear. Reads a good deal; quite agreeable; at times spells of ugly destructiveness. Will not talk much about himself. Is reserved.

1903 Jan 31 No change noted.

Personal and Medical History of

Personal and Medical History of Henry Ellerbusch Jr.

Whole No. 5679
Residence, Faribault, Rice Co. Minn.

Date Admission, October 16' 1900.
Admitted by Dr. O. C. Heyerdale hour, 7 P.M.
How Sent, James Hunter & off. Rice Co.
Sex, male Age, 65
Civil Condition, married
Children, Six Age Youngest Child,
Occupation, Farmer
Degree Education, Common school.
Profession of Religion, Lutheran.
Habits, Intemperate until one year ago.
Nativity, Germany - (Parents also born there)
Physicians Committing, P.M. Jackson & F. M. Rose.
Correspondents, Henry Ellerbusch Jr. (son) Faribault, Minn.

No. for Year, 42
Insane Relatives, none. (?)
Cause Exciting, Domestic trouble & intemperance.
Cause Predisposing, unknown.
Form, Senile Dementia
Accompanying Bodily Disorder, none mentioned.
Suicidal or not, not.
Date of this Attack, About one year ago.
Duration, One year.
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 64 yrs.
Time of Leaving, Mar. 22, 1904
Time in Hospital, 3 y. 5 m. 6 d.
Result, Died: Apoplexy.

Examination on Admission by Dr. Wanous. *Date of* 10/ /1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear except on certain subjects.
MEMORY, Past Events, Impaired
Recent Events, " Special Subjects, Thinks he is elected Judge
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct.
REASONING POWER, Ordinary Subjects, fair
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather exalted.
DELUSIONS, Systematized, Transitory,
Special Subjects, Thinks he is Judge of his County
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

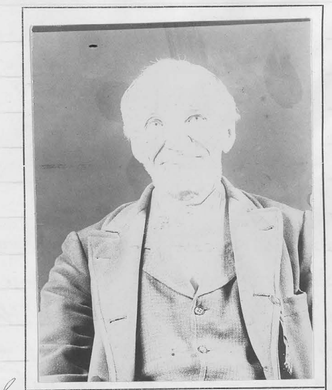
HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, dead
Paternal Relatives, no history of insanity
Mother, dead
Maternal Relatives, no history of insanity
Brothers and Sisters, dead 2 Children 6 living
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
no.
HABITS, Drinking and Smoking, yes.
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, laborer.
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, Appetite, Bowels,
Good.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 3 in. PRESENT WEIGHT, 125 lbs USUAL WEIGHT, NUTRITION, well.
WOUNDS, Abnormalities, Oblique hernia - left side. Condition of Skin, clear.
TONGUE, Coatings, Promptness of Movement, prompt - slight coating.
PUPILS, Equality, Equal. Size, normal. Response to Light, normal Accommodation, do.
SIGHT, impaired
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING,
COORDINATION, Arms, normal Legs, do. Grasp,
TREMORS, Hands, slight Tongue, Facial Muscles, General,
PATELLAR REFLEX, normal. Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, regular.
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES,
Sclerotic.
LUNGS,
Chest symmetrical
Expansion good
Breath sounds normal



CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, good
BOWELS, Present Condition, & normal

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems quite rational but rather talkative. Says he was elected Judge in his county. That the college boys elected him. President McKinley sent him presents. His first wife is trying to get his farm away. Physical condition good. Has a hernia

Personal and Medical History of Henry Ellerbush.

1900

This patient was brought here by Sheriff G.W. Mosher attended by James Thompson in good physical condition, with the following history:- No history of consanguinity or heredity: Was intemperate up to one year ago: About that time was adjudged incompetent and a guardian was appointed for him: Disease appears increasing: not variable: Derangement now manifested by illusions & delusions: Thinks he is married to a woman, not his wife; thinks he is running for office: Talks constantly: States things for facts which are not so. Not dispposed to injure anyone: No filthy nor destructive habits: No peculiarities previously mentioned: No severe diseases nor injuries to head: Has never been confined nor restrained: No treatment pursued. On personal examination is excitable, talkative, full of illusions.

Oct 16 On admission put upon Infirmary East. / 2H.N.Rpt. Complexion light: hair grayish brown: eyes light blue: Hernia on left side: Is dirty: One tooth in upper & four in lower jaw: Mouth in poor condition: Behavior good: Is very talkative: Temp. 99° Pulse 84 Resp. 20. Ex. 2R.S.)

Nov 1 Wt 132#. 990. Patient talkative & delusional: assists onward. Is rather exalted-
14 Transferred to A1 E. Dec 1. Wt 133#: no apparent change in patient's conditions
Dec 30 Customs about the same. Jany 31/1901 Is quieter, but sometimes is hold of his
1901 delusions. Assists with the work. Feby 1. Is pleasant & agreeable. Has an idea, still,
Feby 1 that he was elected "judge", and talks about it to other patients. Is harmless, but gets along
May 1 without causing any trouble. May 1. Transferred to A1. July 31. Is working in the dining-room
July 31 seems contented with surroundings - Still holds above ideas. Habits are cleanly: health has been good
Aug 1/ Wt 132#: Aug 6. Went to Arroco Camp. Aug 17. Returned. Jany 31/02. During period,
Jany 31 '02 patient has changed none. Talks in a silly and mildly demented way. Works in "C-D-R", a good deal & has no troublesome behavior. May 1/02 123#
Talks incoherently; has delusions; Is rather silly. June 1/02
118#. Oct. 1/02 - 120#. Jan 1/03 117#. Has been once or
twice somewhat confused; but is usually well be-
haved. Is again on A2.

Personal and Medical History of

Personal and Medical History of Anton Johnson

Whole No. 5685

Residence, Saint Paul Minn.

Date Admission, October 19, 1900.

Admitted by Dr. E. Z. Wanous hour, 7 PM

How Sent, E. W. Bazille J. of P. Ramsey Co.

Sex, male Age, 55 yrs.

Civil Condition, married

Children, — 8 — Age Youngest Child, -

Occupation, Carpenter

Degree Education, Common school.

Profession of Religion, Norwegian Dan. Methodist

Habits, Not intemperate.

Nativity, Norway (Parents born in Norway)

Physicians Committing Thos. S. Cooke & T. Leavitt.

Correspondents, Mrs A. Johnson 45 Atwater St. St Paul. Minn Private

No. for Year, 49.

Insane Relatives, None.

Cause Exciting, Religion

Cause Predisposing, unknown

Form, Acute Mania - mild type

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, Not.

Date of this Attack, Two and a half years ago.

Duration, 2½ years -

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 52 years.

Time of Leaving, Nov 23/1900.

Time in Hospital, 1 mo. 4 days

Result, Discharged Recovered Feb 5 1901.

Examination on Admission by Dr. Wanous *Date of* Oct. 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quite clear.

MEMORY, Past Events, good
Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct.

REASONING POWER, Ordinary Subjects, fair
Special Subjects,
Own Mental State, Says he is not right.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather exalted.

DELUSIONS, Systematized, Regarding Transitory,
Special Subjects, Religious subjects.

HALLUCINATIONS, Nps.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

Father, living - Well.

Paternal Relatives, No history of insanity

Mother, living Well.

Maternal Relatives, No history of insanity

5 Brothers and ~~Sisters~~, one dead.
6 children - Well. (especially Typhoid Fever, Sunstroke,

PROMINENT DISEASES, Head Injuries and Surgical Operations).
Sunstroke

HABITS, Drinking and Smoking, No.

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Carpenter.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, Regular.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft. 5 in. PRESENT WEIGHT, 132½ lbs USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, none. Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, Coated & sluggish

PUPILS, Equality, equal. Size, normal. Response to Light, do Accommodation, do.

SIGHT, impaired - Wears glasses for reading -

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, slight Tongue, slight Facial Muscles, General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, normal.

HEART, Regularity, irregular

Strength, Sounds, strong

Size, normal

Apex Beat, "

Murmurs, none noted

ARTERIES,
hardened.

LUNGS,
Chest Asymmetrical
Expansion poor
Breath sounds normal.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient has been exalted & very talkative. Is easily irritated at which time is liable to become abusive. Thinks he must preach to be saved. Physical condition poor - Is nervasthenic Has had night emissions which worry him - Says they are due to some trouble he had several years ago.

Personal and Medical History of Anton Johnson.

1900

This patient was brought here by Sheriff A.B. Carter in fair physical condition with the following history:- No consanguinity, lunacy nor intemperance in patient nor parents. First symptoms of insanity manifested two and a half years ago by religious zeal. Disease appears increasing. Not variable. Derangement now manifested on subject of religion, temperance &c. desires to sing & pray almost constantly. Not disposed to injure anyone. No filthy nor destructive habits. No previous peculiarities manifested. No severe diseases nor injuries to head received. No confinement nor restraint employed. No treatment pursued. On personal examination is constantly engaged in religious worship, writing songs, praying, prohibition work on the streets &c. Fears that people are plotting to do him harm.

Oct 19 On admission, put upon B 5 E. (G.H.K Rpt. Complexion light. Hair light brown: eyes blue: skin in good condition: small scar on right knee. Is clean. Three teeth gone from lower & four from upper jaw.

" " Behavior quiet. Received on ward: given bath: complains of pain in chest. Do not

21 get up to breakfast following morning. Actor appears depressed: is frequently seen

26 praying. Oct 26. Put on treatment. Continues very quiet. Is now up: remains in room.

29/31 Complains of pain in stomach. Oct 31. Transferred to TW: put to bed. Nov 3. Wt 122#

Nov 3/11 (14 day record up, today) - Nov 11. Put on eggnogs: appetite very poor. Nov 11. Is up on ward.

14/22 Stomach improved. Nov 14. Transferred to A. Nov 22. Visited by wife & Salvationists.

Discharged

Personal and Medical History of William Brown

1900

Oct 19 Received on ward: very nervous: Complains of severe headache:

21 Visited by wife: has involuntary movements of right arm and hand: Vericosities frequently: was put on treatment.

26 Visited by wife and taken home.

See papers on file (next to No 5688)
This man was sent here Oct 23/1900.
Commitment irregular: not accepted: Taken home by wife Oct 26/1900

Personal and Medical History of James Doyle.

Whole No. 5684

Residence, Wabasha Co. Minn. Since 1850

Date Admission, October 19th 1900.

Admitted by Dr. E. Z. Warren hour,

How Sent, M Kennedy J. of P. Wabasha Co.

Sex, male Age, 50.

Civil Condition, Single.

Children, — Age Youngest Child,

Occupation, None

Degree Education, None.

Profession of Religion, Catholic.

Habits, Not intemperate.

Nativity, Minn. (Parents born in Ireland)

Physicians Committing, J. F. Bowie + W. F. Milligan.

Correspondents, W. M. Doyle Kellogg Minn. 4 Mi. out. (Brother)

No. for Year, 47.

Insane Relatives, None.

Cause Exciting, Scarlet fever + diphtheria

Cause Predisposing, Unknown.

Form, Low grade imbecile.

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, Not.

Date of this Attack, In early childhood

Duration, Imbecility manifested after illness when 8 mo. old

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, years ago – (40-45)

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. ..... *Date of* .....

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

MEMORY, Past Events, cannot remember.

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

None obtained.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

nothing obtainable.

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, farming

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good. Appetite, do Bowels, Normal.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 6ft 1½in PRESENT WEIGHT, 163# USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, Coated - sluggish

PUPILS, Equality, Equal Size, normal Response to Light, do Accommodation, do.

SIGHT, Good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, None. Tongue, Facial Muscles, General,

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, Slurred. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity,

Strength, Sounds, Very strong

Size, enlarged.

Apex Beat, displaced downw.

Murmurs, None noted

ARTERIES,

LUNGS,

Asymmetrical Expansion poor - Right apex consolidated.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, good.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is an imbecile. no history obtainable from him. Always answers "yes" whether a question is asked in affirmation or negation. Commitment papers state that he had diphtheria when young & has been in this condition ever since. Physical condition fair.

Personal and Medical History of James Doyle.

1900

This patient was brought here by sheriff's deputy G.S. Dickman attended by J.E. Emery, in poor physical condition, with the following history: First symptoms of insanity manifested when very young- had scarlet fever & diphtheria when 18 months old and manifested imbecility after that. Disease appears increasing: No history of consanguinity, heredity or intemperence in patient or parents: Is disposed to injure others: Wanders away from home, & actions are those of an imbecile No filthy nor destructive habits: No peculiarities previously manifested: Has never been confined. Has simply been watched to prevent wandering away: On personal examination presents an appearance of imbecility wanders about exposed to want & accident.

Oct 19 On admission put upon B[2] E[1] G. H. Fr. Rpt. Complexion dark: hair dark gray: eyes gray. Skin normal: Is clean: 6 teeth in upper & 3 in lower jaw: Received on Ward: appears dull: speech imperfect & incoherent. Oct 21. Is restless— spends time walking the hall. Oct 26. Remains away from other patients— Nov 1. (14 Day record up)— Wt 162[#]. Oct.: patient is undeveloped, mentally: seems more quiet. Jany 4/1901. Wt 166[#] p 89. Patient seems to comprehend things told him, more readily. Jany 31 No further change Wt 168[#] P 96. May 31. Speech incoherent. (Is defective). Works on ward: habits fairly tidy— No change in patients condition from Day to Day. Aug 1 Wt 173[#]. Oct 31. Has not changed in any special respect: usually quiet, but childish & demented. Is fairly neat in habits— 171[#]. Dec 6. Is B[2] (quarrelsome with other patients): Jany 31/01. No change of importance: getting along very well, now: works well on ward and about buildings. habits tidy.

Feb 1 Wt. 176[#]. Aug 1. Wt. 169[#]

Health fairly good; inclined to be mischievous; pugnacious; works well on & off ward; talks foolish; imbecilic; foolish manner.

Personal and Medical History of

Personal and Medical History of Edward P. Holmen.

Whole No. 5686
Residence, Goodhue Co. Minn.

Date Admission, October 20 1900.
Admitted by Dr. G. L. Chapple hour, 7 P.M.
How Sent, Axel Haller J. of P. Goodhue Co.
Sex, male Age, 19 yrs.
Civil Condition, Single.
Children, — Age Youngest Child,
Occupation, Farm-work.
Degree Education, Common school.
Profession of Religion, Lutheran
Habits, Temperate.
Nativity, Goodhue Co. Minn. (Parents born in Norway)
Physicians Committing, J. W. Anderson & G. G. Wellman.
Correspondents, Peter Holmen (father) Aspelund. Minn.

No. for Year, 49.
Insane Relatives, None.
Cause Exciting, Masturbation.
Cause Predisposing, unknown.
Form, masturbatory Antipacient
Accompanying Bodily Disorder, None mentioned
Suicidal or not, Not.
Date of this Attack, 2 years ago.
Duration, 2 years.
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 17 yrs.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. Wanous *Date of* Oct 21 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Rather sluggish.
MEMORY, Past Events, good.
Recent Events, " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.
REASONING POWER, Ordinary Subjects,
Special Subjects,
Own Mental State, says he feels tired.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, living well.
Paternal Relatives, no history of insanity.
Mother, living - well.
Maternal Relatives, no history of insanity
5 Brothers and 4 Sisters, all well.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
pneumonia 2 years ago.
masturbation
HABITS, Drinking and Smoking, not to excess.
HEADACHES, VERTIGO, OR CONVULSIONS, frontal headaches
OCCUPATION, Healthy or not,
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, poor Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 10 in. PRESENT WEIGHT, 132½ # USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, Contracture 3rd finger of left hand - caused by accidental discharge of revolver. Condition of Skin, anaemic
TONGUE, Coatings, Promptness of Movement, Clear
PUPILS, Equality, Equal Size, large Response to Light, normal Accommodation, do.
SIGHT, good.
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good.
COORDINATION, Arms, normal Legs, do. Grasp,
TREMORS, Hands, fine Tongue, fine Facial Muscles, General,
PATELLAR REFLEX, exaggerated. Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, irritable
Strength, Sounds, strong
Size, normal.
Apex Beat, "
Murmurs, None noted
ARTERIES,
flabby.
LUNGS,
Chest symmetrical
Expansion fair
Breath sounds normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Insomnia
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is anaemic, poorly nourished & of a neurasthenic type. Says he cannot work, feels tired & is not fit to work. Masturbation cause of present trouble. Physically is sluggish & poorly nourished.

Personal and Medical History of Edward P. Holmes.

1900

This patient was brought here by sheriffs deputy Oct 2nd attended by John Holmes in fair physical condition with the following history:- No consanguinity, heredity nor intemperance in patients nor parents. First symptoms of insanity manifested two years ago by threatening his father with a pitchfork without provocation: Disease appears increasing: Is variable with no rational intervals: Derangement now manifested by refusal to work, is sullen, refuses to talk; secludes himself from rest of family: Habits filthy + has broken a window: No previous peculiarities manifested: No severe diseases nor injuries to head: No confinement nor restraint employed. Has consulted physicians. On personal examination is excited taciturn + sullen. On admission put upon B³ E. Oct 2 G.H.N.Rpt. Complexion light; hair brown: eyes blue: skin pimply: 3 scars on L. hand + one on L. shoulder: Burns on each hip: Is clean: One tooth gone from lower jaw: third finger L. hand crooked. " " Behavior quiet) Received on ward. Is depressed: answers questions quite readily: 27/28/29/30/31 Visited by brother. Oct 3. Patient seems brighter. Oct 4. Transferred to Infirmary ward. Is given Spinal Douches (1 a day): also Extra Diet - Oct 31. Appears very Stupid.- Nov 3 will only talk, when asked questions - Nov 3. (1st day recovered up) - Patient shows some 5/14/24 physical improvement: very little mentally: Nov 5. Visited by sister. Nov 19. Blistered for habit of masturbation. Nov 24. Visited by sister. Dec 12. Patient dressed and upDec 7 1901 Jan 31 assists some a ward. Jany 5/1901. Transferred to B³. Jany 31. Not any mental change manifested: somewhat depressed: seldom talks. Febys. Wt 151# P 100. Patient has a boil Febys 1/14 on neck which required lancing + has to be dressed. Febys 4. Patient has rash appearing on body. Transferred to I.W. Is suffering from urticaria: put on treatment + patient improved. — 20 Lump + dressed. Mind seems somewhat improved. Mar 2. Transferred to B³ — Mar 7 Has "stuporous spell". Transferred to I.W. Face seems swollen: picks his face, causing many open sores; must be restrained by muff. Was put on treatment and improved. 15 Transferred to B³. May 15. To Be. June 15. Was taken home, by brother, against advice of June 15 physicians. Augo. Returned to B³. Sep 5 to 25. Gastric lavage + feeding with tube. Oct 11 To B¹. Is gluttonous + vomits after eating: diet limited. Nov 1. Wt. 115# — Decm Jan Jany 31 visited by friend. Jany 31/02 - Has been gaining considerably in weight, of late, but is more stupid mentally: pulls out hair: very irrational + dirty in habits: during past month has been treated with hot + cold douches. Does nothing.

Feb. 1/02 Wt. 163#. May 1 No improvement noticeable — Talks to self; dirty; works a little on ward. Aug. 1 Wt. 149½#. Becoming more demented; stands looking at pictures or other objects for long periods. Seems entirely unable to control actions. Dec. 22 Trans to I.W.D. Infection of face - caused by kick by Arthur

Personal and Medical History of

Furlough Dec 20. Dec 26 Trans. to B¹. Jan 3. Visited by sister and friend.
Jan 17 03 Jan 31. Three ulcerated teeth extracted. No change in general condition.

Personal and Medical History of Horace D. Stewart.

Whole No. 5688.

Residence, St Paul, Minn.

Date Admission, October 23 1900.

Admitted by Dr. A.F. Kilbourne hour, 7 P.M.

How Sent, Ems Bazille J. of P. Ramsey Co.

Sex, male Age, 32.

Civil Condition, single

Children, — Age Youngest Child,

Occupation, R.R. brakeman - —

Degree Education, Methodist

Profession of Religion, Common school.

Habits, Not intemperate

Nativity, Wisconsin - Parents born in Canada

Physicians Committing, Parks Ritchie + Arthur Guernsey.

Correspondents, Mr. Coan (nephew) 539 Dacotah St. St. Paul, Minn.
Mrs M.E. Coan (Sister) "

No. for Year, 51.

Insane Relatives, none.

Cause Exciting, unknown.

Cause Predisposing, "

Form, Paresis

Accompanying Bodily Disorder, none mentioned

Suicidal or not, Not.

Date of this Attack, About 6 mon. ago.

Duration, About 6 mon.

No. of Attack, 3rd (?)

No. of Admission, 3rd

Age First Attack, about 29 yrs.

Time of Leaving, this time October 10 - 1902.

Time in Hospital, 1 Yr 11 Mos 17 Ds

Result, Died: General Paresis.
(2 - 3 years)

Examination on Admission by Dr. Travaus. *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused.

MEMORY, Past Events, poor

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Rather indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

Father, dead.

Paternal Relatives,

Mother, living - Mill.

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, Head Injuries and Surgical Operations). (especially Typhoid Fever, Sunstroke,

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Appetite, Bowels,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4 in. PRESENT WEIGHT, 126 lb USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, Coated.

PUPILS, Equality, equal. Size, normal Response to Light, do Accommodation, do.

SIGHT,

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, Legs, Grasp,

TREMORS, Hands, slight Tongue, slight Facial Muscles, General,

PATELLAR REFLEX, lost. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, impaired

HEART, Regularity, Regular

Strength, Sounds, normal.

Size, "

Apex Beat, "

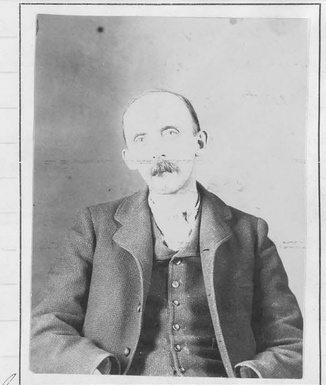
Murmurs, none noted

ARTERIES,

Normal

LUNGS,

Chest symmetrical
Expansion poor
Breath sounds normal



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good.

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient seems much demented - No information obtainable from him. Talks about nothing but his Brothers "Big store" Calls everything a "Thing" Case one of advanced paresis.

Personal and Medical History of Horace D Stewart.

1900

This patient was brought here by Sheriff's deputy Hy. Gallick attended by M.E. Coan, in fair physical condition, with the following history:- No consanguinity, heredity nor intemperance in patient nor his parents:- First Symptoms of insanity manifested in 1897 when patient was in this hospital from Sept 20 '97 to Dec 31 '97. (Vol. 37 - Fol. 229. No. 4876. He was again here from Nov 30 '98 to May 1 '99 (Vol. 41 - Fol 189 No. 5187) First symptoms of present attack manifested about 6 months ago by general incoherence & exaltation: Disease appears increasing: Not variable. Derangement now manifested by exalted ideas with regard to business: No disposition shown to injure anyone: No filthy nor destructive habits No peculiarities previously manifested: No severe diseases nor injuries to head received: No confinement nor restraint employed: No treatment pursued. On personal examination talks irrelevantly & has exalted ideas & is not interested in surroundings-

Oct 23 On admission put upon B 3 E. (G.H.W. Rpt. Complexion light, hair brown: eyes blue: Skin in good condition: Vaccination marks on left arm: Is fairly clean: Teeth badly decayed - eight stumps left in upper jaw: Four teeth out of lower jaw: Patient much confused & quite nervous.) Received on Ward. Patient is confused: speech incoherent: slow & stammering: marked incoordination of extremities: Acts as frequently asks to go home.

" 24 " 30 Transferred to B 1: had "choking spell" after supper: fell over, on floor, in dining room: was unconscious: Examined & found choking from food in throat - Dec 12: had another "Choking Spell": (caused from food) - Transferred to T.W. Dec 19. Visited by sister. Dec 31. Patient's mind still confused: physically, not as well. Jany 31/1901. No further change to report.

Jan 1901 31

Feb 28 1901 Patient is filthy: (Last stages of paresis) - April. Transferred to A 4. Is still able to go out with crowd. July 29. Visited by brother. July 31. Patient is failing, quite rapidly. Much confused. Is filthy. Augt 1. Wt 129 #. Sept 1. Seems to be gradually failing; physically & mentally: is becoming very untidy. Sept 7. Transferred to T.W. Has been in bed: is today, up & dressed: has grown somewhat stronger. Wt 121 #. Jan 31/02. Patient is very dull, demented & filthy. Continues to fail quite rapidly: much confused. Feb 1/02 130 #. Is very unsteady: quite demented: dull & listless. June 20/02 Noted as gradually failing in strength & ability. July 3 Patient choked on radishes at dinner time and nearly died. Sept. 30/02 Patient has been steadily failing & was today placed on Inf. for treatment. Oct 1/02 Patient is shown to have normal temperature. Is failing simply from the Paresis. Oct. 10/02 Died at 3.55 P.M. For the past 2 days his temperature has been rising & at 8 00 o'clock this morning was as 106 2/10. (Probably there was some static Pneumonia; but also general weakness with Paresis

Personal and Medical History of

Personal and Medical History of John Quigley.

Whole No. 5690

Residence, Faribault, Minnesota,

Date Admission, October 29, 1900.

Admitted by Dr. E. J. Wancors hour, 4:30 PM.

How Sent, Jas. Hunter Jr. of P. Rice Co.

Sex, Male Age, 57

Civil Condition, Single

Children, — Age Youngest Child,

Occupation, Labored

Degree Education, Common school.

Profession of Religion, Catholic

Habits, Occasionally becomes intoxicated.

Nativity, Mass. (Parents born in Ireland.

Physicians Committing, F. M. Rose + W. H. Robillard.

Correspondents, Wm. Geiger chief of police (friend) Faribault, Minn.
Edw. Quigley bro. Belmont, Mass.

No. for Year, 53

Insane Relatives, none.

Cause Exciting, unknown

Cause Predisposing,

Form, Ac. Melancholia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, never attempted.

Date of this Attack, Seven weeks ago.

Duration, 7 Wks.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 52 yrs.

Time of Leaving, April 22 — 1901

Time in Hospital, — Yr 5 Mo 24 Ds

Result, Recovered. Discharged May 22/1901.

Examination on Admission by Dr. Wancors *Date of* Oct. 31 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Rather confused.

MEMORY, Past Events, fair

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Rather alert + dull.

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State, not appreciated

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects, of persecution

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy, HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead

Paternal Relatives, no history of ins.

Mother, dead.

Maternal Relatives, no history of ins.

Brothers and Sisters,

(especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).

None

HABITS, Drinking and Smoking, None

HEADACHES, VERTIGO, OR CONVULSIONS, No.

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, Bowels,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9 1/4 PRESENT WEIGHT, 132 # USUAL WEIGHT, NUTRITION, Emaciated.

WOUNDS, Abnormalities, little fingers of both hands contracted. Condition of Skin, Anaemic

TONGUE, Coatings, Promptness of Movement, Coated.

PUPILS, Equality, Equal. Size, normal Response to Light, slow Accommodation, slow.

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, none. Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irritable.

Strength, Sounds, weak

Size, normal

Apex Beat, normal

Murmurs, none noted

ARTERIES,
Compressible

LUNGS,
Chest symmetrical
Expansion fair
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character,

BOWELS, Present Condition,

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient depressed, agitated + has been unable to sleep. Frequently tried to escape from people who are after him to kill him. Was found in a lake in water up to his neck. Physically is emaciated anaemic + shows a general sluggishness of all organs.

Personal and Medical History of John Quigley.

1900.

This patient was brought here by Dep. Sheriff J.B. Thompson attended by H.P. McIlvane, in fair physical condition, with the following history:- No history of consanguinity or heredity. Patient rather intemperate. First symptoms of insanity manifested seven weeks ago by fear of pursuit & of mob violence. Disease appears increasing. Not variable. Derangement now manifested by fear of pursuit, imagines a crowd is after him to kill him. When he saw crowd approach (in imagination) hid in lake. Not disposed to injure anyone. No filthy nor destructive habits. No peculiarities previously manifested. No severe diseases nor injuries to head. Has been confined last day or two at his own request to keep him safe from mob. After collapse from exposure was given stimulants no other treatment pursued. On personal examination fearful noise startled him. Continually on the alert.

Oct 29 On admission, put upon Inf. East / G.P.I. Ept. Complexion light. Hair brown. eyes brown. Skin in good condition. Vaccination marks on left arm. Varicose veins on both legs & feet. Small bruise on R. leg. 7 teeth on upper & 3 on lower jaw. Little finger stiff. Behavior quiet. Received on T.W. put to bed. is very much emaciated and melancholic. has delusions of persecution. speech hesitating. appreciates his condition. Nov. 1. Wt 145 lbs. Nov 6. Complains of pain in the knees, of a rheumatic type. Nov 12. Given clothes and got up. on ward. frequently requires cathartics. Jany 1901. Wt 164 lbs. Works some on ward. Nov 16 Dec 12 1901 Jan 1 Transferred to B3. Jan 31. Jan 27 Feb 4 Feb 4 Mar 6 Apl 22 Dec well-behaved. manifests no delusions. works on ward 167 lbs. P 72. Mar 13. Transferred to A1. Is very well-behaved. agreeable. converses freely and rationally. a good worker on ward. Physical condition good. habits clean. Mar 26. Transferred to A2. There has been steady improvement. patient seems normal in every way. very neat & tidy in personal habits. talks pleasantly & rationally & very agreeable with other patients. Sent home today.

Discharged

Personal and Medical History of

Personal and Medical History of Michael J. Moore.

Whole No. 569r

Residence, Ramsey Co. Minn.
Bt here from State Prison, Stillwater, Minn.

Date Admission, November 3' 1900.

Admitted by Dr. E. J. Warnow hour, 7 Pm.

How Sent, F. T. Wilson Dep. Sh. Wash. Co.

Sex, male Age, 75 yrs.

Civil Condition, single

Children, - Age Youngest Child, -

Occupation, mattress-maker.

Degree Education, Common school.

Profession of Religion, Catholic.

Habits, unknown.

Nativity, Minnesota. (Parents born in Ireland)

Physicians Committing, H. Clark & J. H. Haines

Correspondents,

but see Letter from Warden Walker July 29/02. "Sentence expired July 23." - he has no money to his credit"
" " " " Oct 7/02

No. for Year, 55

Insane Relatives, unknown.

Cause Exciting, "

Cause Predisposing, "

Form, Defective - Dubescent

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, ?

Date of this Attack, October 26' 1900.

Duration, 6 days.

No. of Attack, 1st.

No. of Admission, 1st

Age First Attack, 24 yrs.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Warnow. *Date of* Nov. 6' 1900

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good.
Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
illusive

REASONING POWER, Ordinary Subjects, fair.
Special Subjects,
Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather exalted.

DELUSIONS, Systematized, of poisoning Transitory,
Special Subjects, " persecution

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, living
Paternal Relatives, no history of insanity.
Mother, living.
Maternal Relatives, no history of insanity
5 Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
masturbation

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, from prison

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft. 1 in. PRESENT WEIGHT, 146.# USUAL WEIGHT, NUTRITION, poor.

WOUNDS, Abnormalities, scar on left upper lip. teeth out. Condition of Skin, reddish. normal.

TONGUE, Coatings, Promptness of Movement, Clear.

PUPILS, Equality, equal. Size, normal. Response to Light, normal Accommodation, do.

SIGHT, good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, pterygium.

HEARING, good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, none Tongue, do. Facial Muscles, General,

PATELLAR REFLEX, exaggerated Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION,

HEART, Regularity, Regular

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, normal

ARTERIES,

LUNGS,
Chest symmetrical
Expansion good.
B. sounds normal.

Sensibility,

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is very talkative, talks about his past but frequently changes his topic. Is delusional says he is in love with a girl - while being examined talked to himself constantly. Says he thinks he aught to have been a great singer or speaker. Patient has the appearance of a defective.

Personal and Medical History of Michael J. Moore.

1900

This patient was brought here by sheriffs deputy Dr. J.P. Chance, from the State Prison, Stillwater, in poor physical condition, with the following history:- First symptoms of insanity manifested within the past year. has had attacks at intervals. Since Sunday Oct. 26/1900 has not slept much & irrational in all his talk. Disease appears increasing. Derangement now manifested by slightness and wild ravings. Not disposed to injure anyone. Habits filthy and destructive. No previous peculiarities manifested. No severe diseases nor injuries to head. Has been confined in cell. & given sedatives. On personal examination no further particulars noted.

Note Patient sentenced to State Prison (under two indictments) for crime of Grand Larceny. for a period of five years and six months - on Jan. 30. 1897

Nov 3 On admission put upon B3 E(2d N Rpt. Complexion dark. hair black: eyes brown: skin in good condition: vac. marks on L. arm. Scars on L knee. & on upper lip. 5 teeth out upper & 1 out lower jaw. Is clean: Behavior good.) Received on B3. given bath. At 8pm, became pugna-
4 -cious and attacked night-nurse. Nov 4. Struck several patients. Transferred to C1.
5/6 Again struck several Patients. Nov 6. Patient talks to himself. Nov 7. Attacked night-
10/20 -nurse. Nov 10. Continues to have very violent "spells", through the night. Nov 20. Very
26 violent & pugnacious. Nov 26. Attacked nurse Gregor, throwing him against bench.
30 very maniacal: talks to himself a good deal: very obscene in language. Dec 1st 110#
Dec 1 Had trouble with H. J. Dueere: struck nurse Keefer, while interfering: had to be
22/30 put in room. Dec 22. Attacked nurse Gregor. Dec 30. No improvement: Continues
1901 very violent & treacherous: talks to himself in a rambling manner: Language obscene
Jan 1/31 152#. Jan 31. No noticeable improvement: talks to himself a great deal. At times,
very excited: Speech irrational: violent: requires close watching: kept in "Bay"-
Feby 1/28 Wt 165#. Feby 3. very troublesome and in seclusion 3 hours. Feby 28. Pugnacious & maniacal.
Mar 30 habits cleanly. Mar 30 Condition about same. Struck H.J. Dueere. Frequently pugnacious and
Apl 30 threatening. Apl 30. Continues noisy, threatening & pugnacious: attacks nurses & others, without
provocation: (apparently through idea of persecution): has also illusions and hallucinations -
May 31 Same as in former note: threatening & treacherous. at times, talks quite rationally -
June 1/30 Wt 152#. June 7. Attempted to jump out of window, when nurse opened the screen. Appears
quite despondent: refuses to eat. June 30. Is still despondent. July 31. Little change apparent.
July 31 Goes out with crowd. Talks a great deal to self, incoherently. Still treacherous & threatening.
Aug 31 Wt 143#: Nov 1 Wt 145#: Jany 31/02. During whole 6 months, has been very confused.
Jany 31 with numerous delusions & hallucinations & frequently violent; no improvement noticeable. -
Health quite good: Kept in bay most of the time.

Personal and Medical History of Michael Moore.

Feb. 1/02 Wt. 160#. Apr. 2 Wt. 164#; confused; noisy at times; ugly and threatening; May 1 Wt. 174#
May 3 Visited by [illegible]

St. Peter State Hospital

DR. GEO. H. FREEMAN, SUP

St. Peter, Minn
July

After 5 days, return to
POUCH A,
SAINT PETER, MINN.

Dr. Geo. H. Freeman, Sup't.
St. Peter State Hospital
St. Peter, Minnesota

UNITED STATES POSTAGE 2 CENTS

woman, is scheduled to go to trial this week in St. Paul on a first degree murder indictment charging him with hiring Redenbaugh and McCool, through Moore, to put Mrs. Dunn to death.

"Tacoma Johnny" Doyle, named by Redenbaugh as the third man in the J. F. McQuillan home the night Mrs. Dunn was killed there, is still at large.

Moore's conviction yesterday came after he had taken the stand in his own behalf and had admitted under cross-examination that he paid $2,900 to Redenbaugh and McCool in Redenbaugh's room on West Third street, St. Paul, a few hours after the Dunn murder. He denied that it was blood money to compensate them for the crime, declaring he merely wished to aid them in escaping from the city, as he knew they had killed Mrs. Dunn. With equal emphasis he denied that the money came from Frank J. Dunn, insisting that it was his own money, taken from his "private vault."

Jurors Called Cowards.

The jury retired at 2:13 p.m. and reported its verdict at 3:05 p.m.

"Ain't you ashamed of yourselves, you cowards," shouted the prisoner to the jurors, emphasizing his remarks with profanity. "I'm the happiest man in the world. Get out and go home, you dirty rats."

Bailiffs quieted Moore and jammed him back into his chair. Judge Hanft, following the usual court custom, started to thank the jurors for their work.

The prisoner turned his attention to the judge.

"What are you thanking the jury for?" he demanded. "God won't thank you for this."

Charles McDonald, Moore's counsel, asked for a stay of sentence. The prisoner sprang to his feet and interrupted him.

"I'm ready for sentence right now!" he cried with an oath, "and give it to me quick."

"All right," said Judge Hanft. "Bring the prisoner before me."

Moore thereupon launched an avalanche of profanity at the judge.

Detectives rushed the prisoner to the railing before the judge's bench.

"Don't ask me any questions," commanded Moore, as the court started the string of queries that usually precede a life sentence.

"Don't you wish to answer questions before you are sentenced?"

"No!" roared the prisoner.

Moore asked if he could make a statement and was told to proceed. He commenced a rambling relation of incidents of his early life.

Stole to Aid Poor.

He declared his first crime was the theft of a purse which he stole to give the money to the poor. Judge Hanft cautioned him to keep to the facts in the case.

It was then that Moore began cursing the judge so furiously that it was necessary for the bailiffs to choke him off forcibly. Judge Hanft quickly pronounced the sentence.

When the words "life imprsonment" at hard labor" were reached, Moore managed to twist his head away from the muffling hands of the bailiffs.

"Hard labor!" he jered. "Why, I'll have a snap over there at Stillwater. The guards all like me and I'll have a snap."

The maddened prisoner was then dragged away, cursing, struggling and shrieking, from the room.

5692
add - Nov. 3-1900
Dis. June 27-1903 "Dr"

Thomas J. Newman, attorney for Mike Moore, interviewed his client at the county jail last night.

"He appeared more cheerful," Mr. Newman said, "and firmly insists the whole story is a frame-up so far as he is concerned."

Personal and Medical History of Mic

1900

This patient was brought here by sheriff d
the State Prison, Stillwater, in poor physical
ing history:- First symptoms of insanity
past year has had attacks at intervals.
has not slept much & irrational in all
increasing De
ested
amp
manif
confu
furi
in tw
and h
Rpt.
com
out
Gave
two m. struck sev
5/02 again struck several Patients. Nov 6. Patient talks to h
10/20 nurse. Nov 10. Continues to have very violent spells
26 violent & pugnacious. Nov 26. Attacked nurse Gregor,
30 very maniacal: talks to himself a good deal: very obs
Dec 12 Had trouble with H. J. Deuere: struck nurse Keep
22/30 put in room. Dec 22. Attacked nurse Gregor. Dec
1901 very violent & treacherous: talks to himself in a rat
Jan 6/31 152#. Jan 31. No noticeable improvement: talks to
very excited: speech irrational: violent: requires
Feb 3/03 Wt 165#. Feb 3. Very troublesome and in seclusion 3 hours.
Mar 30 habits cleanly. Mar 30. Condition about same. Struck H. J. D
Apl 30 threatening. Apl 30. Continues noisy, threatening & pugnacious
provocation: (apparently through idea of persecution): has a
May 31 Same as in former note: threatening & treacherous. At t
June 1/30 Wt 152#. June 1. Attempted to jump out of window, when
quite decumbent: refuses to eat. June 30. Is still decum
July 31 goes out with crowd. Talks a great deal to self, in coherent
Aug 31/01 Wt 143#: Nov 2 Wt 145#: Jany 31/02. During whole of
Jany 31 with numerous delusions & hallucinations & frequently
health quite good: Kept in bay most of the time.

After 5 days, return to
POUCH A,
SAINT PETER, MINN.

UNITED STATES POSTAGE 2 CENTS 2

Dr. Geo. H. Freeman, Sup't.
St. Peter State Hospital
St. Peter, Minnesota

Mpls. Journal
June 11-1917.

PAGE TWO

GERMAN
Army Chiefs Sp

MOORE GUILTY OF HIRING REDENBAUGH FOR DUNN MURDER

Prisoner Shrieks Curses at Judge as Life Sentence Is Imposed.

FORCIBLY LED BACK TO JAIL BY BAILIFFS

Boasts Stillwater Guards Who Know Him Will Make "Hard Labor" Easy.

Mike Moore, the man who hired Joseph P. Redenbaugh to murder Mrs. Alice McQuillan Dunn April 26, must spend the rest of his life at hard labor in the state penitentiary at Stillwater.

Found guilty of first degree murder in just 52 minutes late yesterday. Moore, screaming and cursing, was given a life sentence by District Judge Hugo Hanft in St. Paul. He cursed the jury that found him guilty and the judge who sentenced him. He cursed the bailiffs who led him forcibly back to the jail. He fought every step of the way.

He jeered the judge when the latter solemnly pronounced the words "hard labor" and boasted that friends among the prison guards, gained while serving three previous terms at Stillwater, would make his life there easy for him.

Two of Five Convicted.

The sentencing of Moore transfers to the state prison two of the five men accused of playing major roles in the Dunn tragedy. Joseph P. Redenbaugh, confessed actual slayer of Mrs. Dunn, already is at the penitentiary, serving a life sentence for the murder of Patrolman George Connery in Minneapolis.

Frank McCool, indicted as a principal in both the Dunn and Connery crimes, is now on trial in Minneapolis on a first degree murder charge for his alleged share in the slaying of the policeman. His fate may be in the jury's hands by tomorrow night.

Frank J. Dunn, husband of the slain woman, is scheduled to go to trial this week in St. Paul on a first degree murder indictment charging him with hiring Redenbaugh and McCool, through Moore, to put Mrs. Dunn to death.

"Tacoma Johnny" Doyle, named by Redenbaugh as the third man in the J. F. McQuillan home the night Mrs. Dunn was killed there, is still at large.

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The maddened prisoner was then dragged away, cursing, struggling and shrieking, from the room.

Personal and Medical History of Michael Moore

Feb 1/02 Wt 160#. Apr 2 Wt 164#; confused; noisy at times; ugly and threatening; May 1 Wt 174#.

St. Peter State Hospital

DR. GEO. H. FREEMAN, SUPERINTENDENT

St. Peter, Minnesota
July 15, 1929

SUBJECT Mike Moore

Dr. A. F. Kilbourne, Sup't.
Rochester State Hospital
Rochester, Minnesota

Dear Doctor:

A number of years ago, one, Mike Moore, a convict, was at Rochester State Hospital. This is the man who was later mixed up in the Dunn murder case and at present his mental condition at the prison is very poor. Will you please let me know the diagnosis and send me a brief resume of his condition when he was at Rochester?

Yours very truly,

Geo. H. Freeman
Superintendent

ghf-emg

25 years

5692
add - Nov. 3-1900
dis: June 27-1903 "Drift"

past.

Thomas J. Newman, attorney for Mike Moore, interviewed his client at the county jail last night.

"He appeared more cheerful," Mr. Newman said, "and firmly insists the whole story is a frame-up so far as he is concerned."

Personal and Medical History of Michael J. Moore.

1900

This patient was brought here by sheriff [illegible] from
[illegible] follow-
[illegible] the
[illegible] 26 1900
[illegible] appears
[illegible] and
[illegible] d de-
[illegible] eases
[illegible] seda-
[illegible].
[illegible] time
[illegible] 1897
Nov 3 [illegible] Law
[illegible] L. arm.
[illegible] jaw.
4 [illegible] pugna-
5/6 [illegible] to 6.
10/20 [illegible] night-
26 [illegible] o. very
30 [illegible] t bench.
Dec 12 [illegible] 110#
[illegible] ad to be
22/30 [illegible] ntinues
1901 [illegible] ge obscure
Jan 6/31 [illegible] t times.
[illegible] "Bay"
Feb 1/3 [illegible] anical.
Mar 30 [illegible] eurs and
Apr 30 [illegible] orthurst
[illegible] ations -
[illegible] dy.
May 31 [illegible]
June 1/7 [illegible] appears
30 [illegible] pparent.
July 31 [illegible] tening.
Aug 31 [illegible] nfused.
Sept 30 [illegible] no improvement noticeable.-
July 31 [illegible] health quite good: Kept in bay most of the time.

Personal and Medical History of Michael Moore.

Feb 1/02 Wt. 160#. Apr 2 Wt. 164#; confused; noisy at times; ugly and threatening; May 1 Wt. 174#. May 3 Visited by father. May 4 Visited by friend. Still pugnacious. July 3 Visited by friends; improving considerably. Aug 1 Wt. 193#. Oct 1 Wt. 200#. Oct 14 Patient in excellent physical condition; talks rationally; but shows some defectiveness; no delusions to be discovered; rather uncertain in behavior and mental state. Sent home today by Emanuel Johnson.

SANE NOW, BUT WAS CRAZY ONCE, MOORE TELLS CITY POLICE

State Records Show He Was Released From Asylum on Father's Plea—Again Denies Dunn Plot.

"They say I was crazy once, but I'm not crazy now."

This was Mike Moore's reply yesterday afternoon when he again was confronted with the confession of Joseph L. Redenbaugh that he had paid Redenbaugh and Frank McCool $2,900 to murder Mrs. Alice McQuillan Dunn at the request of her husband, Frank J. Dunn.

"Anybody who would pull off a stunt like that sure would be crazy," he said.

FATHER SECURED RELEASE.

Moore's reference to his previous insanity led state officials to investigate his records, which show that while he was in the state prison at Stillwater for grand larceny in 1900, he was transferred to the state hospital for the insane at Rochester.

He was released from the state hospital June 27, 1903, at the request of his father, who signed an agreement guaranteeing his future good behavior.

Few further developments in the murder case are expected by Police Chief O'Connor until after Redenbaugh arrives with County Attorney R. D. O'Brien and Detective P. J. La Valle some time Sunday.

EXTRADITION GRANTED.

The St. Paul officers, with their prisoner and Mrs. Redenbaugh and the Minneapolis detectives, Frank Brunskill and Bert Weare, prepared to leave San Francisco last night after Governor Stephens had signed extradition papers turning Redenbaugh over to St. Paul.

Chief O'Connor is making no effort to conceal the movements of his officers and their prisoner.

MOB IDEA RIDICULED.

Police officials last night scoffed at the idea of any demonstration against Redenbaugh in a city where there has been no mob violence in more than fifty years, and especially when the crime is more than three weeks past.

Thomas J. Newman, attorney for Mike Moore, interviewed his client at the county jail last night.

"He appeared more cheerful," Mr. Newman said, "and firmly insists the whole story is a frame-up so far as he is concerned."

Personal and Medical History of J. A. Wallen.

Whole No. 5694

Residence, St. Paul. Minn.

Date Admission, November 8' 1900.

Admitted by Dr. E. J. Wanous hour, 7 P.M.

How Sent, Ex. Bazille & P. Ramsey Co.

Sex, male Age, 47.

Civil Condition, married

Children, four. Age Youngest Child, –

Occupation, Laborer.

Degree Education, Common school.

Profession of Religion, Methodist.

Habits, not intemperate

Nativity, Sweden Parents also born there.

Physicians Committing, H.G. Nippert & Talbot Jones

Correspondents, Fred W. Wallen, 771 Indiana Ave, St. Paul, Minn.

No. for Year, 57.

Insane Relatives, none

Cause Exciting, unknown.

Cause Predisposing, unknown

Form, Chronic mania.

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not.

Date of this Attack, 2 years ago.

Duration, 2 yrs.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 40 yrs.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Wanous *Date of* Nov. 9' 1900

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, fair

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State, appreciates condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather exalted.

DELUSIONS, Systematized, yes. Transitory,

Special Subjects, of grandeur & wealth

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, died - delirium.

Paternal Relatives, 1 bro. insane.

Mother, living

Maternal Relatives, all well.

3 Brothers and 3 Sisters, 4 children

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Syphilis 10 yrs. ago. Rheumatism.

HABITS, Drinking and Smoking, Yes.

HEADACHES, VERTIGO, OR CONVULSIONS, Occasional.

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, do Bowels, do

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 6ft 1 PRESENT WEIGHT, 146 # USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, Scar on R. lower jaw. Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement,

PUPILS, Equality, Equal Size, normal Response to Light, sluggish Accommodation, do.

SIGHT, impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, coarse Tongue, do. Facial Muscles, General,

PATELLAR REFLEX, lost. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Regular

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

LUNGS,
Chest symmetrical
Expansion good.
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient appears rather exalted. Has grandiose ideas - motor disturbances - defective stammering speech - perhaps a beginning case of paresis
Physical condition is emaciated & generally sluggish.

Personal and Medical History of J. A. Wallen.

1900

This patient was brought here by sheriffs deputy F. D. Wallen in poor physical condition, with the following history:- No history of consanguinity heredity nor intemperance in patients nor his parents: First symptoms of insanity manifested two years ago, by irrational talk: Disease not variable: Derangement now manifested by hallucinations of various kinds: Not disposed to injure anyone: No filthy nor destructive habits. No information concerning previous peculiarities Has had epilepsy: Was kicked in head by a horse when 4 yrs old. No confinement nor restraint employed. No treatment pursued. On personal examination is garrulous & irrational in conversation: On admission put upon B3. East. G.M.U. Rpt Complexion light: hair dark: eyes blue: Vac. marks on both arms: Scar on forehead, lower jaw: left leg & knee. Also on R. leg below knee: Ds clean: 12 teeth gone from lower & 7 from upper jaw: Behavior good: Exam. by Nurse Cased

Nov 8 Received on ward: given bath: was very pugnacious, during night: restless: confused:
10 attempted to get out. Nov 10. Talks about buying every one a present: is very grandiose
12/13 in ideas. Nov 12. Threw a billiard ball. Nov 13. Complains of various physical ail-
14/15 ments. Nov 14. Very abusive, at supper table. Nov 15. To B1 East. Was restless &
17/18/19/21 noisy, all night. Nov 17-18-19-21. Was very noisy & abusive, through the day. Nov 23. Got
23 into a fight with A.M. Hayes & Robert Hague: throwing shoes at each other.
24/30 Struck A.M. Hayes on head, causing severe scalp wound - Nov 30. Patient Continues
Dec 1/10 very restless & noisy: has "violent spells". Dec 1. 137 #. Pgr. Dec 10. Still restless.
18 Sleeps very little: noisy & incoherent: destructive. Dec 18. Struck and kicked
22 Peter Knudson. Dec 22. Left ear swollen and inflamed (hematoma Auris) -
25 Visited by Daughter: patient struck her: had struggle with nurse Clayton.
during which swollen ear was ruptured: (patient has taken to T.W. Hazdressed) -
27/29 Ear re-dressed. Dec 31 - Jany 3/1901. In camisole jacket - Jany 5 very quarrelsome
1901 Jan 5/7 and violent; restless at night. Jan 8. Attempted to strike nurse Allen with chair.
30 patient is very destructive to bed-clothing. Jan 30. Became very violent, throwing
shoes and chairs & breaking picture on wall: destroying everything he could
31 get hold of: Received several bruises in struggle. - Jany 31. No improvement.
Physical condition not so good: Still very maniacal & violent: Given hypnotics
Feby 1 which seem to have but little effect. Feby 1. Wt 142#. Continues very restless, noisy &
7/14 destructive. Feby 7. Attacked and kicked nurse. Feb 14. Continues very restless & pugnacious.
15 attacked nurse Sharp, biting arm: Put in protection Sheet 10 hours. Feby 15. In restraint, 9 hours.
16/17 In sheet, 9 hours. Feby 17. In sheet 10 hours: very noisy & restless. Mar 12. Has been in restraint during
Mar 12 - night, since last note. Very restless & violent. Was struck over left eye by a cup, in hands of L. Porter,
31 causing slight cut. Mar 31. Is still very restless & pugnacious & sleeps little. Given hyp-
Apl 13/14 - notics, without much effect. Apl 13/14. Visited by wife - May 1 Wt 147# - May 26. Con-

Personal and Medical History of J. A. Wallen

1901

May 26 - times as in former note. Extremely troublesome, noisy & destructive. June 1. Been quiet.
June Works a little on ward - July 1/2. Visited by wife. July 31. Slight improvement. Eats and
July 31 sleeps well: works some on ward. Is very noisy and talkative. Restless, at times -
Aug 1 also incoherent. Aug 1. Wt 150#. Sept 29. Visited by Son. Nov 2 Wt 152#. Dec 9. To B1
Dec 9 Has been very noisy, confused & troublesome; abusing other patients & frequently violent.
Touchy in habits. Dole some work on ward. Talks a great deal, but is very obscene and
1902 Jan 31 abusive. Jany 31/02. Above general note still holds good.
Feb. 1/02 Weight 153#; May 1 Restless; noisy; quite pugnacious; habits untidy. May 17 Visited by wife. Aug. 1 Wt. 147#. Nov. 27 Transfered to D.V.R. Has to be catheterized; is very dull; Visited by wife; Jan. 1/03 Trans. to B1.; somewhat improved physically
1903 Jan 31. Little change mentally; eats poorly; confused; stubborn; quite weak.

Personal and Medical History of Erick Severson

Whole No. 5697
Residence, Hartland, Minn
No. for Year, 60
Insane Relatives, unknown.
Cause Exciting, Crowding use of alcohol.
Cause Predisposing, Previous attack
Date Admission, November 9' 1900
Admitted by Dr E.J. Edwards hour, 7:30 P.M.
Form, Temporary Insanity
How Sent, H. Blackmer & off. Freeborn Co.
Accompanying Bodily Disorder, none mentioned.
Sex, male Age, ?
Suicidal or not, not.
Civil Condition, married
Date of this Attack, About Nov 5-
Children, one. Age Youngest Child,
Duration, ?
Occupation, Carpenter
No. of Attack, Second.
Degree Education, Common school.
No. of Admission, 1 hes. (In Hospital at Albert Lea.
Profession of Religion, Not a church member
Age First Attack, ?
Habits, Intemperate
Time of Leaving, Dec 8 - 1900
Nativity, Norway. (Parents also born there)
Time in Hospital, - 29 Days -
Physicians Committing, A.C. Wedge & G.W. Barck.
Result, Recovered. Disch Apl 30/1901
Correspondents, Mrs. Erick Swenson, Hartland Minn. (Freeborn Co.)

Examination on Admission by Dr. Wedge *Date of* 11/9/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish
MEMORY, Past Events, fair
Recent Events, poor Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.
REASONING POWER, Ordinary Subjects, poor
Special Subjects,
Own Mental State, does not appreciate it.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather depressed.

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION, 2 yrs.
ONSET, Gradual or Sudden, gradual.
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

Father, living.
Paternal Relatives, no history of insanity
Mother, dead.
Maternal Relatives, no history of insanity
Brothers and Sisters,

PROMINENT DISEASES, Head Injuries and Surgical Operations). (especially Typhoid Fever, Sunstroke,
Typhoid 10 yrs. ago.

HABITS, Drinking and Smoking, To excess.
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Carpenter.
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of

H7/253 5697

M Erick Severson

Copy of Order for Hearing Petition of Retta Severson for appointment of T.E. Lee (or some) other suitable person as guardian for said Erick Severson insane; served and service admitted 21st November 1900.

(Papers filed with commitment papers.)

RACTERISTICS.

USUAL WEIGHT, NUTRITION, poor
Condition of Skin, Anaemic
ig= tremor present.
nse to Light, normal Accommodation, do.
s. Grasp,
TREMORS, Hands, Tongue, Facial Muscles, General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, rather Slow,
FACIAL EXPRESSION, Sensibility, normal
HEART, Regularity, Regular
Strength, Sounds, good.
Size, normal
Apex Beat, "
Murmurs, none noted
ARTERIES,
Pulse Mak.
LUNGS,
Chest symmetrical
Expansion good.
Breath sounds normal.

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, poor.
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient dull, sluggish & has been worrying considerably. Condition is of long standing & is one of melancholia followed by mild dementia

Personal and Medical History of Erick Swenson

Whole No. 5697

Residence, Hartland, Minn

Date Admission, November 9' 1900

Admitted by Dr E.L. Simmons hour, 7 30 P.M.

How Sent, H. Blackmer & of P. Freeborn Co

Sex, male Age, ?

Civil Condition, married

Children, one. Age Youngest Child,

Occupation, Carpenter

Degree Education, common school.

Profession of Religion, Not a church member

Habits, Intemperate

Nativity, Norway. (Parents also born there)

Physicians Committing, A.L. Medge - G.W. Barck.

Correspondents, Mrs. Erick Swenson, Hartland Minn. (Freeborn Co.)

No. of Admission, This. (In hospital at Albert Lea.

Age First Attack, ?

Time of Leaving, Dec 8 - 1900

Time in Hospital, - 29 Days -

Result, Recovered. Discharged April 30/1901

Examination on Admission by Dr. Simmons *Date of* 11/9/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, fair

Recent Events, poor Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State, does not appreciate it.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Rather depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, 2 yrs.

ONSET, Gradual or Sudden, gradual.

HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

Father, living.

Paternal Relatives, no history of insanity

Mother, dead.

Maternal Relatives, no history of insanity

Brothers and Sisters,

PROMINENT DISEASES, Head Injuries and Surgical Operations). (especially Typhoid Fever, Sunstroke,

Typhoid 10 yrs. ago.

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Carpenter.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9 3/4 PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor

WOUNDS, Abnormalities, Scar on nose. Condition of Skin, Anaemic

TONGUE, Coatings, Promptness of Movement, Grayish coating - tremor present.

PUPILS, Equality, Equal. Size, normal Response to Light, normal Accommodation, do.

SIGHT, good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, normal. Legs, do. Grasp,

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, Hesitating, rather Slow,

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, Regular

Strength, Sounds, good

Size, normal

Apex Beat, "

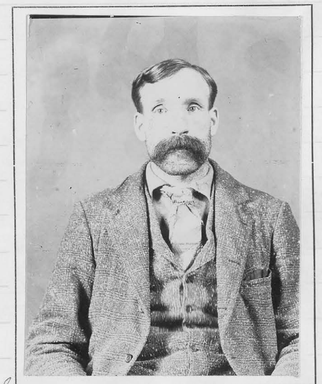
Murmurs, none noted

ARTERIES,

Pulse Mak.

LUNGS,

Chest symmetrical
Expansion good.
Breath sounds normal.



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, poor.

BOWELS, Present Condition, Constipated.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient dull, sluggish & has been worrying considerably. Condition is of long standing & is one of melancholia followed by mild dementia

Personal and Medical History of Erick Reverson

Personal and Medical History of

1920.

This patient was brought here by Sheriff W.G. Mitchell attended by H.M. Wolff in poor physical condition, with the following history: Nothing known concerning Consanguinity nor heredity: Patient intemperate: First symptoms of insanity manifested two or three years ago: was in hospital at Albert Lea. First symptoms of present attack manifested about Nov. 5th Disease appears increasing, is variable: Patient is stupid & deluded. Derangement now manifested on nearly all subjects: by delusions: & by mania: Has threatned harm to wife: & at times has broken furniture Prior accession of disease was rather sullen & silent. No severe diseases nor injuries to head manifested: Has been in hospital, as above stated, & in jail at times.

On personal examination is perfectly quiet: has a vacant expression, appears sullen & deluded.

Nov 9 On admission put upon B.3.E. (Gth.H. Opt. Complexion light: eyes blue: hair brown: Skin in normal condition: Vac. Marks on R. arm: Scars on L. thumb & on R. knee: Is dirty: 5 teeth out upper jaw: lower set not in very good condition. Behavior good. Exam. M. J Fahey)

" " Received on Ward. apparently much confused: walks about in an indifferent mood.-

12 rather incomprehensible: Nov 12. appears some brighter, conversation more rational.

14/17/20 "Asks to go home & work". Nov 17. Assists on ward - Nov 20 transferred to A! -

21 - Seems rational & agreeable: willing to work: takes part in amusements -

Dec 1/p "Wt 175" Por. Decs. Was sent home.

Discharged

Personal and Medical History of Alfred Bredahl.

Whole No. 5698

Residence, St. Paul, Minnesota

Date Admission, November 9, 1900

Admitted by Dr. L.D. Linton hour, 7:30 P.M.

How Sent, E.W. Bazille & Co. Ramsey Co.

Sex, male Age, 40.

Civil Condition, married.

Children, six Age Youngest Child, —

Occupation, Carpenter.

Degree Education, Common school.

Profession of Religion, Norwegian Lutheran.

Habits, Smoked continually.

Nativity, Norway. (Parents also born there.)

Physicians Committing, Chas. P. Argo & J.B. Brimhall.

Correspondents, Mrs N. Bredahl
859 Agate St St Paul

No. for Year, 61.

Insane Relatives, unknown.

Cause Exciting, "

Cause Predisposing, "

Form, Chronic Melancholia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, Not.

Date of this Attack, 1895

Duration, 5 yrs.

No. of Attack, 1st

No. of Admission, 1st here - At City Hospital - St. Paul.

Age First Attack, 35 yrs.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Wanous. *Date of* 11/12/1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear.

MEMORY, Past Events, Good.

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull

REASONING POWER, Ordinary Subjects, fair.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

depressed.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

Father, died - from accident

Paternal Relatives, no history of insanity

Mother, living Well.

Maternal Relatives, no history of ins.

Brothers and Sisters, all well - 6 children - well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

none.

HABITS, Drinking and Smoking, Yes.

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches.

OCCUPATION, Healthy or not, Cabinet maker.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor. Appetite, poor Bowels, Constipated

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 9½ PRESENT WEIGHT, USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, none Condition of Skin, oily - sluggish

TONGUE, Coatings, Promptness of Movement, Clear.

PUPILS, Equality, Equal. Size, normal. Response to Light, slow Accommodation, slow.

SIGHT, good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, marked Tongue, marked. Facial Muscles, General,

PATELLAR REFLEX, somewhat exaggerated. Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, weak

Size, normal

Apex Beat, "

Murmurs, none noted

ARTERIES,

normal.

LUNGS,

Chest symmetrical
Expansion good.
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient somewhat depressed & worried. Has various delusions. Says he is weak & sick & cannot work; his back gives out; his head swells from steam rising in his chest. Case is very hypochondriacal refuses to work because weak, tho apparently well built, well nourished & strong physically.

Personal and Medical History of Alfred Bredahl.

1900

This patient was brought here by Dep. Sheriff Hansen, in good physical condition with the following history:- Nothing known concerning consanguinity nor heredity. Patient smoked continually, otherwise not intemperate: First symptoms of insanity manifested in 1895 by delusions; imagined he was being pursued &c: Has been in City hospital, St Paul: Disease appears increasing, not variable: Derangement now manifested by imagining that he is being continually charged with electricity: Not disposed to injure anyone: No filthy nor destructive habits: No previous peculiarities noticed: Has been subject to spasmodic muscular contractions: Has had hospital care as above stated. On personal examination talks incoherently

Nov 9 expression staring. On admission put upon B[3] E. (G. H. & Dpt. Complexion light: hair brown: eyes blue: skin in good condition: Scar on R. thigh, small one on L. knee also on left upper arm & shoulder: So clean: 6 teeth in lower jaw & one stump in upper. Behavior good:

" " Exam. M. F. Fahey.) Received on Ward; given bath: appears depressed: says "he is

12 sick & tired": thinks steam is rising from chest and going to his head" Nov 12. Was

20 transferred to IW, & put to bed: given cold spinal douches - Nov 20. Up & dressed: appears improved, physically: no special change mentally. Transferred to B[3].

Dec 1 Assists on ward: is neat & clean in habits: sleeps well: Conversation quite rational.

1901 Jany 31 Wt 184#. Pso. Jany 31. Sentences as in "December Report". - July 1. Wt 181#. Pyr

Mar 31 Dewell - behaved & agreeable. In good physical condition - July 3. Visited by wife.

July 1 Patient shows sound mental improvement. Talks quite rationally. Habits neat & clean.

Aug 1 Wt 170#. Jany 31/01. Works a good deal: is neat in habits: behaves well: Is, at present,

Jan 31 on A! outdoors in the Kitchen. Feb. 1/02 173#. Answers questions fairly well. Is in good health. Is dull & partly demented.

Jan 31 03 Condition remained unchanged during year. Works daily in kitchen. No illness, except eczema of hand recently.

Personal and Medical History of

Personal and Medical History of George Steenenagel

Whole No. 5699
Residence, Winona Co. Minn.

Date Admission, November 12, 1900.
Admitted by Dr. L. A. Linton hour, 4 P.M.
How Sent, H. L. Buck J. of P. Winona
Sex, male Age, 58 yrs.
Civil Condition, married
Children, 8. Age Youngest Child,
Occupation, farmer.
Degree Education, reads & writes
Profession of Religion, Lutheran.
Habits, not intemperate.
Nativity, Germany (Parents born in Germany)
Physicians Committing H. Lichtenstein & H. F. McNaughey.
Correspondents, Wilhelmina Steenenagel. Lewiston, Minn.

No. for Year, 62.
Insane Relatives, None.
Cause Exciting, Change of habits.
Cause Predisposing, unknown.
Form, Chr. Hallucination
Accompanying Bodily Disorder, none mentioned
Suicidal or not, has talked of it.
Date of this Attack, 6-8 mos. ago
Duration, 6-8 mos.
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 58 yrs.
Time of Leaving, July 18 - 1901
Time in Hospital, 8 mos 6 ds
Result, Improved
Discharged by Bd of C
July 5th 1901

Examination on Admission by Dr. Mawson *Date of* Nov. 14th 1900.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good
Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct.

REASONING POWER, Ordinary Subjects, fair
Special Subjects,
Own Mental State, Does not think he is insane.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
depressed

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, Is afraid he cannot support his family - worries about his property.

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

Father, dead.
Paternal Relatives, no history of insanity
Mother, living - Well.
Maternal Relatives, no history of insanity
Children 1 boy 7 girls - Brothers and Sisters, 1 sister died cancer
PROMINENT DISEASES, Head Injuries and Surgical Operations). (especially Typhoid Fever, Sunstroke,

HABITS, Drinking and Smoking, No.
HEADACHES, VERTIGO, OR CONVULSIONS, When on farm had headaches
OCCUPATION, Healthy or not, Farmer up to 7 yrs. ago.
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, good Bowels, Irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 7½ PRESENT WEIGHT, 132 lbs USUAL WEIGHT, NUTRITION, Emaciated
WOUNDS, Abnormalities, haemorrhoids - Left oblique hernia Condition of Skin, sluggish.
TONGUE, Coatings, Promptness of Movement, Coated & fissured.
PUPILS, Equality, Equal Size, small. Response to Light, sluggish Accommodation, do.
SIGHT, wears glasses
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good
COORDINATION, Arms, normal Legs, do. Grasp,
TREMORS, Hands, slight Tongue, do Facial Muscles, General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Regular
Strength, Sounds, weak.
Size, normal.
Apex Beat, "
Murmurs, none noted
ARTERIES,
Sclerotic.
LUNGS,
Chest symmetrical
Expansion good
B. sounds normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, Constipated.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient says that about two years ago he made up his mind to stay in the house & keep away from people - why, he does not know - He has been worrying about supporting his wife because he does not feel well & strong enough to work. Sits with his head drooping & meditates - Has a rupture also haemorrhoids - Stomach trouble him. Bowels irregular & constipated.

Personal and Medical History of George Steinnagel.

1900

This patient was brought here by Sheriff's Deputy A.W. Fuhrmann in fair physical condition, with the following history: No consanguinity heredity nor intemperance in patient nor parents known. First symptoms of insanity were manifested 6-8 months ago, would not talk, became melancholy. Disease appears increasing: is variable. Derangement now manifested by depression over business matters: hides himself & avoids his friends: occasionally is violent. Is disposed to injure others. Has talked of suicide: has broken furniture No peculiarities previously noted: was sick for two years. No confinement nor restraint employed: has been under medical care, (no effect) On personal examination is depressed: weeps when questioned: Is not interested in anything. On admission put upon B3 E6 (G.H. N.Rpt. Complexion light: eyes blue: hair gray: skin fair: Scar on L. knee. Hernia on L. side. Is clean. Has six teeth in lower jaw: none in upper: Behavior restless:

Nov 12 Exam. by Asst. Phys. Received on Ward: patient is quiet: does not speak, unless questioned: depressed: says "he is sick all over". Complains of no definite symptoms.

" " Appears anaemic and poorly nourished. Nov 22. Transferred to I W and put to bed.

20/22 Dec 12 very restless, through the night. Dec 12. Patient dressed and on ward: mental

20 condition improved. Dec 20. Transferred to B3. Temperature Wt 141#. Pulse: —

Jan 1901 Still seems somewhat depressed and worries about his condition. Jan 31. Wt keeps

Feb 28 about the same. Feb 28. Is still depressed & despondent. Stays in room. Inactive: occasionally

June 11/30 visited by wife. June 30. No change specially noticeable. Seems much depressed.

July 18. Was taken home by wife.

Discharged

Personal and Medical History of

Personal and Medical History of William E. Taylor.

Whole No. 5700
Residence, Redwing. Minnesota

Date Admission, November 17 1900
Admitted by Dr. E. J. Warnons hour, 7 P.M.
How Sent, Axel Kaller J. of P. Goodhue Co.
Sex, male Age, 44 yrs.
Civil Condition, married
Children, Two Age Youngest Child, —
Occupation, City Clerk.
Degree Education, Common school.
Profession of Religion, not a church member.
Habits, not intemperate.
Nativity, Illinois (Father Ohio. Mother Kentucky.
Physicians Committing, F.W. Dimmitt & H.L. McKinstry.
Correspondents, Mrs. M.E. Taylor Cor. 3rd & Dakota Sts. Redwing, Minn.

No. for Year, 63.
Insane Relatives, none
Cause Exciting, unknown
Cause Predisposing, "
Form, Paresis
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not
Date of this Attack, Two weeks ago.
Duration, Two weeks.
No. of Attack, First.
No. of Admission, First.
Age First Attack, 44 yrs.
Time of Leaving, Mar. 26, 1904.
Time in Hospital, 3 y. 4 m. 9 d.
Result, Died: Gen. Paresis.

Examination on Admission by Dr. Warnons *Date of* Nov. 17 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused.
MEMORY, Past Events, poor
Recent Events, " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.
REASONING POWER, Ordinary Subjects, poor
Special Subjects,
Own Mental State, says he is crazy
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
exalted.
DELUSIONS, Systematized, of wealth Transitory, grandeur.
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.
LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, dead.
Paternal Relatives, no history of insanity
Mother, living
Maternal Relatives, no history of insanity.
Brothers and Sisters, 7 children mn.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Syphilis - malaria - Rheumatism.
HABITS, Drinking and Smoking, has been a hard drinker
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Clerk.
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, poor Appetite, good Bowels, regular.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, —— PRESENT WEIGHT, —— USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, Skin sluggish Condition of Skin,
TONGUE, Coatings, Promptness of Movement, Coated.
PUPILS, Equality, Equal. Size, large Response to Light, no Accommodation, no.
SIGHT, good.
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good.
COORDINATION, Arms, in-coord. Legs, do. Grasp,
TREMORS, Hands, slight Tongue, slight. Facial Muscles, General,
PATELLAR REFLEX, lost. Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, regular
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES, full.
LUNGS, Chest symmetrical Expansion good Breath sounds normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, poor
BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient is delusional - expressed ideas of grandeur. says he is a "millionaire" "the strongest man on earth" "a hypnotist" Thinks he is building great buildings. Has a lost reflex of both the muscles of the iris & knee. Is a paretic in second stage of the disease.

Personal and Medical History of William E. Taylor.

1900

This patient was brought here by Sheriff's deputy Thomas Hunneman attended by F. J. O'Connell. in fair physical condition, with the following history:- No consanguinity, heredity, nor intemperance in patient nor parents known: First symptoms of insanity manifested two weeks ago by incoherent talk and delusions: Disease appears increasing: Not variable: Derangement now manifested on subject of inventions & patents, says he has millions in sight. Not disposed to injure anyone: No filthy nor destructive habits: Bfore accession of disease was frenzied at times: No severe diseases nor injuries to head: Has been watched of late & has received treatment by family physician. On personal examination Talk incoherent; utterance indistinct, has delusions.

Nov 17 On admission put upon Inf. W. (G.H.N. Rpt. Complexion light: hair light brown: eyes brown: Skin in good condition: Scar on L. thumb. Is clean: Teeth in good condition / filled: Behavior good. ——
" , Exam. by Nurses Moore - N. Sharp.) Received on Ward: Complains of being sick at
18 Stomach: Vomited. Nov 18. Visited by Friends: very restless, all day: became pugnacious
19 towards nurses - Nov 19. Extremely nervous & restless all night: Nov 21. Pugnacious,
2-2/20 at supper table. Nov 22. Put in protection Sheet - Pulse Dycrotic - Nov 25: Refused nour-
26/28 -ishment: bowels constipated: requires Enema: Nov 26 Vomited. Nov 28. In protection Sheet.
Dec 1/6/15 In protection Sheet. Dec 6. Pulse: is very maniacal. Dec 15. Patient is up and dressed.
18 Visited by brother. Jany 1901. Is excited: "fears he will be killed". Jany 2 1901. Was
Jany 2/1901 transferred to 61 East. Jan 8. Is filthy, noisy and destructive. Jany 9. Develops
30 "Hematoma auris". Jan 30. Is very much disturbed: was struck, mean, by
31 patient, causing Jaw to bleed. Jany 31. Very noisy; still very much disturbed.
Feb 3 Is continually rubbing fingers & thumbs together, mumbling, what he says is "Greek" -
8 Falls out of bed: often throws himself about room, causing many sores & bruises,
6/15 on body. Feb 6. Right ear swollen. Patient is filthy. Feb 15. Extremely restless &
28 noisy, all night. Feb 28. Maniacal & noisy. March 1. Visited by friends: very
Mar 1/31 delusional & maniacal: Patient is filthy & Destructive. Mar 31. Patient restless,
Apl 5 through the night. No change in physical condition. Apl 5. Dressed & up, in ward.
May 1 Is restless & noisy, at times, at night. May 1. Wt 116#. Continues to be noisy, nights. June 19. Has
June 19 infected knee: treated & improved. July 31 Seems confused & very much disturbed. Continues
July 31 noisy, nights: restless. Aug 1. Wt 140#. Aug 21. Is 133. Nov 1. Wt 151#. Dec 31 Is 7th:
Dec 31 (has inflamed leg): put to bed: Jany 1902. Up, in ward: leg improved. Jany 3 Visited
1902 by friend. Jany 31/02. No change: Patient is very noisy; incoherent: very seldom intel-
Jany 31 -ligible: Constantly moving about & getting into trouble with other patients:
habits filthy: Pastic in appearance

Personal and Medical History of

Mar. 1/02 Wt. 137#; Apr. 11 Visited by wife & friend Apr. 12 By wife. Apr 30 Has been very destructive & violent slightly quieter now; improving physically. May 14 Trans. to B! May 17. Was kicked by E. Johnson, causing large cut over left eye - stitched; very pugnacious and troublesome - Aug 1. Wt. 149#. Continues noisy; violent; restless; filthy. In muffs to Sept. Oct. 1 Visited by friend.

Jan 03 31 No change; continues restless; destructive; kept in straight suit most of time.

Personal and Medical History of Henry Rhinhart.

Whole No. 5701
Residence, Faribault Co. Minn.

Date Admission, November 30 1900.
Admitted by A. F. Kilbourne M.D. hour, 10 a.m.
How Sent, H. L. Bullis Sheriff Faribault Co.
Sex, male Age, 75
Civil Condition, widowed
Children, none. Age Youngest Child,
Occupation, Business man.
Degree Education, Can read & write.
Profession of Religion, Not a church member.
Habits, has been a hard drinker.
Nativity, Germany (Parents also born there)
Physicians Committing, F. M. Hunt & J. A. Broberg.
Correspondents, Feb 4/1901. Inquiry made by letter from Mrs Dornfeldt Minnesota Lake, Minn

No. for Year, 64.
Insane Relatives, Cannot ascertain
Cause Exciting, Intemperance.
Cause Predisposing, unknown.
Form, Senile Dementia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, Tried to hang himself.
Date of this Attack, About 11 months ago
Duration, About eleven months - More part 2 months
No. of Attack, First - continuous -
No. of Admission, 1st
Age First Attack, 74 yrs.
Time of Leaving, Dec. 28/1900.
Time in Hospital, 1 mo. 8 da.
Result, Died. Pneumonia

Examination on Admission by Dr. Warous. *Date of*

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events,
Recent Events, Impaired Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.

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

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather depressed

DELUSIONS, Systematized, Transitory,
Special Subjects, of persecution.

HALLUCINATIONS, of hearing.
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, died. paralysis.
Paternal Relatives,
Mother, died - Consumption.
Maternal Relatives,
Brothers and Sisters, all dead
No children
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, yes.
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Farmer-moder.
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, Irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, ——— PRESENT WEIGHT, ——— USUAL WEIGHT, NUTRITION,
WOUNDS, Abnormalities, Condition of Skin, bronzed.
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Size, Response to Light, Accommodation,
SIGHT, partly blind.
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Blind in right. opacity of Left.
HEARING,
COORDINATION, Arms, Slight incoordination Legs, do. Grasp,
TREMORS, Hands, fine tremor Tongue, Facial Muscles, General,
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility, normal.
HEART, Regularity, regular
Strength, Sounds, normal.
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES,
Sclerotic.
LUNGS,
Chest symmetrical
Expansion poor
Breath sounds normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Good.
BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient somewhat depressed & melancholic. Has delusions of persecution, also hallucinations - Condition due to senility - Physical condition fair - Has an impairment of sight due to corneal opacity.

Personal and Medical History of Henry Rhinhart

1900

This patient was brought here by Sheriff S. MacDonald in poor physical condition, with the following history: No consanguinity heredity unknown; patient has been very intemperate: First symptoms of insanity manifested in January 1900. Has not been well since + past two weeks has been growing worse Disease is variable, patient seeming quite rational during day. Derangement now manifested by hallucinations, thinks he is being persecuted by others + tries to kill himself: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: No severe diseases nor injuries to head: Has been watched for one year + has been given sedatives - no result. On personal examination is constant fear of injury by others

Nov 20 On admission, put upon Inf. (T.H.N.R.I.) Complexion dark: Hair gray: eyes grey: Skin dirty: Vac. mark on L. arm: Scars on R. arm and Scar on L. hand: L. side body partly paralyzed. Is Dirty Teeth all gone: Behavior good: R. eye operated.)

Received in Ward: given bath + put to bed: is partially paralyzed on left side: confused + restless. Nov 23. Has delusions; thinks he is travelling — Nov 25. Fears being killed: Has to be fed by nurse. Dec 11. Seems extremely noisy, by spells. Dec 15. Refuses nourishment: is failing rapidly. Dec 28. Has continued to fail rapidly.

Patient Expired.

— Died —

Personal and Medical History of

Personal and Medical History of Gust Alexandersson.

Whole No. 5703
Residence, Olmsted Tp. Waseca Co. Minn.

Date Admission, November 20 1900.
Admitted by Dr. hour, 7½ PM.
How Sent, Sent back from Hastings Asylum.
Sex, Male. Age, 29 yrs.
Civil Condition, Single
Children, Age Youngest Child,
Occupation, -Farm Laborer-
Degree Education, Common school in Sweden.
Profession of Religion, not a church member
Habits, not intemperate
Nativity, Sweden (Parents also born there.
Physicians Committing, -
Correspondents, Husb. Gustav Carlson Otisco. Minn.

No. for Year, 66
Insane Relatives, none.
Cause Exciting, unknown
Cause Predisposing, "
Form, Paranoia ~~Paranoiac~~
Accompanying Bodily Disorder, Tuberculosis.
Suicidal or not, not.
Date of this Attack, Dec. 1899.
Duration, Since Dec. 1899.
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 27 yrs
Time of Leaving, June 18 - 1901.
Time in Hospital, (This time) 6 yrs - 29 Ds -
Result, Died - June 18 - 1901 - Disseminated Tuberculosis.

Examination on Admission by Dr. Manson. *Date of* Nov. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused.
MEMORY, Past Events, Impaired
Recent Events, Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
dull.
REASONING POWER, Ordinary Subjects, fair
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather indifferent.
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father,
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
HABITS, Drinking and Smoking,
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not,
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, poor Appetite, poor Bowels, poor

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 8 in. PRESENT WEIGHT, USUAL WEIGHT, NUTRITION, Emaciated.
WOUNDS, Abnormalities, R. cheek bleeding from picking it. Condition of Skin, Anaemic
TONGUE, Coatings, Promptness of Movement, Coated - protruded.
PUPILS, Equality, equal Size, Large Response to Light, Slow. Accommodation, slow
SIGHT,
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING,
COORDINATION, Arms, normal. Legs, do. Grasp,
TREMORS, Hands, Tongue, Facial Muscles, General,
PATELLAR REFLEX, Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity,
Strength, Sounds, normal.
Size,
Apex Beat,
Murmurs, None noted
ARTERIES,
LUNGS,
Lagging of R. side
Expansion poor
Increased resonance of of both apices

CRANIAL MEASUREMENTS.

Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character,
BOWELS, Present Condition,

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Seems confused & quite demented. Frequently scratches & picks himself causing face & body to bleed. Physical examination reveals a consolidation of both apices - more extensive in R. lung. Has a beginning phthisis

Personal and Medical History of Gust Alexanderson

1900

This patient was returned from the Hastings asylum in care of Mrs A. Dorr, Supervisor + John Benson in poor physical condition:-
For former history see Vol. 45. Fol. 65. No. 5460.
On admission put upon Wm East (Gth.W. Rpt. Complexion light. Hair brown: eyes blue. Skin in good condition. Vac. mark on L. arm. R. side of face badly scratched. Cut over L. eye. Several small scars on body. Is clean: Teeth in good condition: Behavior good.

Nov 20 Received on Ward (by transfer from Hastings Hospital); put to bed: face badly scratched + several marks on body: does not talk: rather confused; physically emaciated, and has some "temperature" - Dec 6. Has epistaxis - Dec 31. No change in patient's

Dec 6/31 condition. (Notes Omitted: Nov 19/900: was put to bed on T.W. Is anaemic, + appears phthisical: - answers incoherently, when spoken to: is restless: constantly getting out of bed: Expectorates on the

1901 floor + rubs his hands in it: very demented; very dirty in his habits) - Jany 2/901. Rpt. on

Jany 2/ ward: Scarcely any change in condition. Jan 4. Transferred to D^r. Apl 9. Transferred to T.W. -

Apl 9 physical condition failing. T 101 P 102 R 22. Coughs considerably + expectorates freely -

June 17/ appetite fairly good: bowels regular. June 11. Was visited by brother + friend. June 17. No special

" 18 incidents. Patient has been gradually failing: running a typical course of tuberculosis of the Lungs. June 18 Died at 3^{45} P.M., Today.

—Dies—

Personal and Medical History of

Personal and Medical History of Jorge P. Nissen.

Whole No. 5704

Residence, Germany + Denmark (?) Austin Minn

Date Admission, November 22' 1900.

Admitted by Dr. L.A. Linton hour, P.M.

How Sent, C.M. Washburn Co. Supt. Mower Co.

Sex, male Age, 32 yrs.

Civil Condition, Single.

Children, — Age Youngest Child, —

Occupation, Laborer.

Degree Education, Common school.

Profession of Religion, Lutheran.

Habits, unknown.

Nativity, Denmark. (Parents also born there.)

Physicians Committing, A.W. Allen + H.F. Purvis.

Correspondents, Nils Nissen - Austin,

No. for Year, 67.

Insane Relatives, none known,

Cause Exciting, Sunstroke + drunkenness.

Cause Predisposing, unknown.

Form, Alcoholic Insania à Potu

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not.

Date of this Attack, Nov. 2' 1900.

Duration, 20 days.

No. of Attack, Several

No. of Admission, 2nd - Was as an inebriate before

Age First Attack, ?

Time of Leaving, 9th April 1901.

Time in Hospital, 4 mos 18 ds

Result, Discharged Nov 7th 1901 Recovered —

Committed on application of Dr. A.W. Allen and H.F. Purvis. Committment recommended by State Board C. + C. Sent to the M.S. as a resident of the M.S.

Examination on Admission by Dr. C. Koepke *Date of* Nov 28' 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

fairly clear. rather sluggish.

MEMORY, Past Events, fairly good.

Recent Events, fair Special Subjects, fairly good.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert - correct

REASONING POWER, Ordinary Subjects, fair.

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

normal

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS, Says normal

ILLUSIONS,

SUMMARY, Rather dull. loss of will.

HISTORICAL.

LENGTH INVASION, Has not been well since Sunstroke

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

one cousin has fits.

Father, living - troubled with Rheumatism

Paternal Relatives,

Mother, died - Consumption.

Maternal Relatives,

Brothers and Sisters, (Sister + 2 brothers dead)

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Sunstroke twice 14 yrs. ago. Has since had dizzy spells + would fall down + lose consciousness.

HABITS, Drinking and Smoking, to excess

HEADACHES, VERTIGO, OR CONVULSIONS, do show

OCCUPATION, Healthy or not, Bar-tender.

Detail Date, Duration, and Character of Previous Attack, if any,

Here 10 weeks as an Inebriate in 1896

Sleep, wakeful Appetite, good Bowels, Regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 11. PRESENT WEIGHT, 179# USUAL WEIGHT, NUTRITION, Good

WOUNDS, Abnormalities, Small scar on L. thigh. Varicose veins L. arm. Condition of Skin, capillary dilatation some acne

TONGUE, Coatings, Promptness of Movement, Clear - sluggish

PUPILS, Equality, Equal. Size, normal Response to Light, sluggish Accommodation, do.

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, Good Legs, impaired. Grasp,

TREMORS, Hands, Very slight Tongue, some coarse Facial Muscles, none General, none.

PATELLAR REFLEX, slightly exaggerated Other Reflexes,

ARTICULATION, Slurred, yes. Hesitating, Slow, + thickened

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Accelerated on excitement

Strength, Sounds, weakened

Size, normal

Apex Beat, "

Murmurs,

ARTERIES, Normal

Considerable capillary dilatation

LUNGS,

Chest symmetrical

Expansion good.

Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sleep poor he says.

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

General physical condition appears good. Patient is well nourished No prominent physical defects of any kind noted. Has general appearance of an alcoholic dement.

Personal and Medical History of Jorge O. Nieves.

1900.

This patient was brought here by Sheriffs deputy J. M. Gault (Chief of Police) in fair physical condition, with the following history:- No history of consanguinity or heredity. Patient has been very intemperate. Was confined in this hospital under an Insanity Warrant from Apr. 26'96 - June 24'96 when he escaped - (See Vol. 3rd. Fol. 179. No. 4383.) Has had several attacks of insanity of short duration: First symptoms of present attack manifested November 2'1900. Is irresponsible at all times & an habitual drunkard: Disease appears increasing. Is variable: Says that since having sunstrokes in 1888 & 1889 at times feels wholly irresponsible: Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: Has had convulsions as result of sunstroke: In hospital for inebriety as above stated: On personal examination acted fairly well but usually seems weak mentally: Committment recommended as patient is neglected by relatives & friends.

Nov 28 On admission put upon B 3 E (G.H.U. Rpt. Complexion fair: Hair light brown: eyes blue: Skin in good condition: Vac. marks on L. arm: Scar on L. leg: Pimples on body: Is clean: Teeth in poor condition 3 out lower & 6 out upper jaw: Behavior good: Exam. (Hoppe & McCoy)

" Received on board: well-behaved: Talks quite freely: Speech slow & slug gish: Appears dull: Manifests no delusions: assists with work. (Condition is due to chronic alcoholism)

Dec 5 - (14 Day record up) - Patient works on ward: Habits neat & clean: good physical condition. Is somewhat exalted in his opinion. Dec 15 Transferred to A 5

1901 Jany 12 186#. Pso. Works with Carpenter - Jany 31. Seems quite well, both mentally and physically. Feby 1. Wt 185#. Is well-behaved: converses freely.

Feby 1 - Apl 9 Works with carpenter. Apl 4. Wt 184#. Apl 9. Patient seems rational, & well physically. Sent to Austin, today.

Discharged

Personal and Medical History of

Personal and Medical History of James Rogan

Whole No. 5705

Residence,

Date Admission, November 22 1900.

Admitted by Dr. A.F. Kilbourne hour, 7:30 PM.

How Sent, G.L. Bunn Jof D.C. Ramsey Co.

Sex, male Age, 37

Civil Condition, single

Children, — Age Youngest Child,

Occupation,

Degree Education, Common school

Profession of Religion, Roman catholic

Habits, ?

Nativity, ?

Physicians Committing,

Correspondents,

No. for Year, 68.

Insane Relatives, ?

Cause Exciting, unknown

Cause Predisposing,

Form, not insane.

Accompanying Bodily Disorder, none mentioned.

Suicidal or not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving, Nov. 29 1900.

Time in Hospital, 6 days.

Result, Discha. Not Insane Dec 6 1901.

Examination on Admission by Dr. Warnous. *Date of* Nov. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear - At times tries to be confused.

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct.

REASONING POWER, Ordinary Subjects, fair.

Special Subjects,

Own Mental State, Says he is not insane.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

normal - indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Unit. Know

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, drinking

HEADACHES, VERTIGO, OR CONVULSIONS, none

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, irregular

ST. PAUL DISPATCH.

MADE STAGE PLAY.

ROGAN CREATES A LIVELY SCENE IN THE CRIMINAL COURT ROOM.

HE SEIZED A CUSPIDOR.

Was at Once Clinched by Sheriff's Deputy—Took Several Men to Subdue the Fellow—His Old Father Jumps Up, but is Promptly Ordered to His Seat — Rogan Manacled and His Trial for Robbery Proceeded.

2/15/01 — Dsptch

There was an exciting scene in the criminal branch of the district court today in which James Rogan, charged with robbery, was the star performer.

Rogan was brought in by a deputy sheriff and took his usual chair near the jury box. The county attorney was on the opposite side of the table. Judge Kelly had taken his place on the bench, but Attorney Foote, prisoner's counsel, had not arrived.

While waiting for Mr. Foote, suddenly the prisoner, Rogan, jumped forward and seized an iron cuspidor which stood near the desk of Court Reporter Hillman. Herges was quick after his man, and before Rogan could do anything he had him by the arms. There was a struggle, in which Rogan showed superior strength.

While the men were wrestling for possession of the cuspidor Policeman Frazer, Sheriff Justus and Deputy Sheriff Moriarty rushed to the assistance of Herges. It took the combined efforts of the four men to overpower Rogan and force him back into his seat. He resisted with frenzied fury.

One of the jurymen took a hand in the melee. While the sheriff was endeavoring to put handcuffs on Rogan the latter cried out:

"They have been after me all night!" emphasizing the exclamation with a shower of oaths.

The sheriff and the others were working with Rogan when there was a stir in the crowd of spectators outside the railing.

An elderly man was observed throwing off his coat and making his way forward.

The man was Rogan's father, and the sight of his son being overpowered was more than flesh and blood could stand. He was about to enter the gate and come inside the railing when he was stopped by John Selb, deputy clerk of court, and Attorney William Louis Kelly, Jr., who restrained him and made him return to his seat in the body of the court room. Meanwhile Judge Kelly was rapping the desk vociferously for order.

The whole affair lasted perhaps a minute, but it was an exciting episode.

During the remainder of the session Rogan sat in his chair with his hands manacled, and made no further demonstration. Deputy Sheriff Herges took no chances, and kept a tight hold on his coat collar. Occasionally Rogan swayed from side to side and groaned, but he was unable to arise from his seat.

County Attorney Kane, in his address to the jury, stated that Rogan, at the time of the commission of the offense, was entirely rational, and that, while he might be a moral pervert, he was satisfied that the man was not insane. He said that Rogan's conduct at the state prison was entirely exemplary up to the time he made a murderous assault on Keeper Powers. He hinted that every act of the man since his last arrest was in keeping with sanity.

The weight of opinion is to the effect that Rogan is making a stake play in order to affect the decision of the jury.

BANTZ'S TRAP

To Get City Railway Company in Five Cents

... the court room were on their feet watching the struggle. All was confusion, for it was impossible to maintain order while the deputies were having their hands full.

It required five minutes by the watch for the five deputies to subdue Rogan, who was well nigh exhausted when the battle was over. The deputies were just as tired as the criminal.

"Wait till I get to Stillwater," shouted Rogan, "I'll kill some of the — — — if I swing for it."

He was led away to the jail and locked in his cell, where he gave vent to imprecations against those who had endeavored to restrain him.

This morning Rogan called Deputy Hardick to the cell door and pleaded to be allowed to walk in the corridor.

"I ain't a bit crazy," he said, but I thought I would give you fellows a run for your money over in the court."

Rogan was allowed to enter the corridor and was quiet during the rest of the day.

John Selb, deputy clerk of court, was hurrying up the papers in Rogan's case today so that the prisoner might be got to the penitentiary by this evening. The sheriff and all the court officials will feel relieved when the fellow is landed in the pen at Stillwater.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, good.

Condition of Skin, Clear

None - Clear

Size, normal. Response to Light, normal Accommodation, do

Senilis, or other troubles,

normal Legs, do. Grasp,

Tongue, Facial Muscles, General,

somewhat exaggerated Other Reflexes,

normal. Hesitating, Slow,

Sensibility,

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

Sp. g. Reaction, Color and Appearance,

Sugar,

Emoglobin,

t and Character, Insomnia -

dition, Constipated.

tatement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of vious mental grade, and any physical impairment).

patient tossed about in bed and stated that he saw two people ppeared very much frightened but on further investigation found e "put on". When questioned closely said he was "not insane" + answered rationally. Said he saw these things when he had been drinking the prison authorities thought some of sending him here when released ught his mind affected. This probably gave him the clue to feign insanity

Personal and Medical History of James Rogan

Whole No. 5705

Residence,

Date Admission, November 22 1900.

Admitted by Dr. A.F. Kilbourne hour, 7.30 P.M.

How Sent, G.L. Bunn Jof D.C. Ramsey Co.

Sex, male Age, 32

Civil Condition, single

Children, — Age Youngest Child,

Occupation,

Degree Education, Common school

Profession of Religion, Roman catholic

Habits, ?

Nativity, ?

Physicians Committing,

Correspondents,

No. for Year, 68.

Insane Relatives, ?

Cause Exciting, unknown

Cause Predisposing,

Form, not insane.

Accompanying Bodily Disorder, none mentioned.

Suicidal or not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving, Nov. 29 1900.

Time in Hospital, 6 days.

Result, Discha. Not Insane Feb 6 1901.

Examination on Admission by Dr. Warnock *Date of* Nov. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear - At times tries to be confused.

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct.

REASONING POWER, Ordinary Subjects, fair.

Special Subjects,

Own Mental State, Says he is not insane.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

normal - indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, Head Injuries and Surgical Operations). (especially Typhoid Fever, Sunstroke,

HABITS, Drinking and Smoking, drinking

HEADACHES, VERTIGO, OR CONVULSIONS, none

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, irregular

"PAUL DISPATCH."

"THE HELLO OF NEW YORK," AND THE METROPOLITAN.

"The Belle of New York," widely ad

ROGAN MAKES NO TROUBLE

TRIP TO STILLWATER PRISON.

He Is Landed in the Penitentiary by Jailer Herges Without Causing Any Disturbance.

James Rogan, who has been such a weight upon the minds of the Ramsey county jailors, and who twice offered fight in the district court Friday, was taken to the penitentiary at Stillwater yesterday. He made no resistance.

He was removed in the evening to avoid the crowd of curious sightseers, which all through the trial has so much irritated him. He was handcuffed in his cell and driven in a hack to the union depot, taking the 6:10 train for Stillwater. Jailor Nic Herges, who had charge of the prisoner, tied a large muffler securely about his throat and kept a firm grasp on it throughout the journey.

"This isn't the reformatory," he said as he eyed the cold exterior of the penitentiary. He was turned over to Deputy Warden Alexander, and asked if Jailer Herges was not going to remain with him, as he was lead away to serve his five-year sentence.

Rogan was convicted on a charge of robbing the Anheuser-Busch Brewing company's office of $82.60, June 11. A jury had found him too insane to understand the proceedings against him. He was sent to Rochester, and was returned by the authorities in three days. He is considered a dangerous man, and although only twenty-seven years old, has been confined in all the penal institutions of the state and has served eight years at Stillwater. He is the man who assaulted Deputy Warden Powers with a shoe knife, causing the loss of his left eye and a portion of his nose.

He was taken to Stillwater by Jailer Nic Herges and Special Deputy William Mayer.

AL-KI is the greatest of all skin remedies. At all stores.

intendent's expert testimony, the prisoner was convicted of grand larceny and met the fate he deserved.

to say.

Deputies Herges and Moriarty were standing by his side. The former tapped him on the shoulder to lead him away when Rogan turned and swung his right against Herges' jaw. He let Moriarty have the left and thereupon ensued a free-for-all fight.

For five minutes the dignity of the court was ruthlessly disturbed. Two deputies were no match for Rogan, whose strength is something phenomenal. Back and forth the men pulled and hauled. Deputy Courteau came to the rescue and he was soon joined by Deputy Reichow and Head Deputy Hardick.

Rogan fought like a fiend and resisted all efforts of the deputies to put the handcuffs on him. As he struggled he ripped out oath after oath, threatening all hands with death if he could get free.

Rogan secured Courteau's thumb and twisted it out of joint. He also bit into the clothing of Moriarty.

The people in the court room were on their feet watching the struggle. All was confusion, for it was impossible to maintain order while the deputies were having their hands full.

It required five minutes by the watch for the five deputies to subdue Rogan, who was well nigh exhausted when the battle was over. The deputies were just as tired as the criminal.

"Wait till I get to Stillwater," shouted Rogan, "I'll kill some of the — — — if I swing for it."

He was led away to the jail and locked in his cell, where he gave vent to imprecations against those who had endeavored to restrain him.

This morning Rogan called Deputy Hardick to the cell door and pleaded to be allowed to walk in the corridor.

"I ain't a bit crazy," he said, but I thought I would give you fellows a run for your money over in the court."

Rogan was allowed to enter the corridor and was quiet during the rest of the day.

John Selb, deputy clerk of court, was hurrying up the papers in Rogan's case today so that the prisoner might be got to the penitentiary by this evening. The sheriff and all the court officials will feel relieved when the fellow is landed in the pen at Stillwater.

Medical History of

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, ——— USUAL WEIGHT, NUTRITION, good.

Condition of Skin, clear

Movement, Clear

Size, normal. Response to Light, normal Accommodation, do

Senilis, or other troubles,

normal Legs, do. Grasp,

Tongue, Facial Muscles, General,

somewhat exaggerated Other Reflexes,

normal. Hesitating, Slow,

Sensibility,

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

NE, Quantity, Sp. g. Reaction, Color and Appearance,

Sugar,

Crystals,

EXAMINATION,

emoglobin,

t and Character, Insomnia -

dition, Constipated

tatement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of vious mental grade, and any physical impairment).

u patient tossed about in bed and stated that he saw two people ppeared very much frightened but on further investigation found e "put on". When questioned closely said he was "not insane" & answ- rationally. Said he saw these things when he had been drinking the parish authorities thought some of sending him here when released ought his mind affected. This probably gave him the clue to feign insanity

Personal and Medic

Whole No. 5705

Residence,

Date Admission, November 2[illegible]

Admitted by Dr. A. F. Kilbourne

How Sent, G. L. Bunn Jof D.C. Ramsey Co.

Sex, male Age, 32

Civil Condition, single

Children, — Age Youngest Child,

Occupation,

Degree Education, Common school

Profession of Religion, Roman catholic

Habits, ?

Nativity, ?

Physicians Committing,

Correspondents,

Accompanying Bodily Disorder, none mentioned

Suicidal or not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving, Nov. 29 1900.

Time in Hospital, 6 days.

Result, Discha. Not Insane Dec 6 1901.

Examination on Admission by Dr. Wanous. *Date of* Nov. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear - At times tries to be confused.

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct.

REASONING POWER, Ordinary Subjects, fair.

Special Subjects,

Own Mental State, Says he is not insane.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

normal - indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, drinking

HEADACHES, VERTIGO, OR CONVULSIONS, none

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, fair Appetite, poor Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, ____ USUAL WEIGHT, NUTRITION, good.

[illegible] none - Condition of Skin, Clear

[illegible]mptness of Movement, Clear

[illegible]l. Size, normal. Response to Light, normal Accommodation, do

[illegible]t, Arcus Senilis, or other troubles,

[illegible]s, normal Legs, do. Grasp,

[illegible]one. Tongue, Facial Muscles, General,

[illegible] somewhat exaggerated Other Reflexes,

[illegible]d, normal. Hesitating, Slow,

Sensibility,

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

[illegible]NE, Quantity, Sp. g. Reaction, Color and Appearance,

Sugar,

[illegible] Crystals,

EXAMINATION,

[illegible]emoglobin,

[illegible]t and Character, Insomnia -

[illegible]dition, Constipated

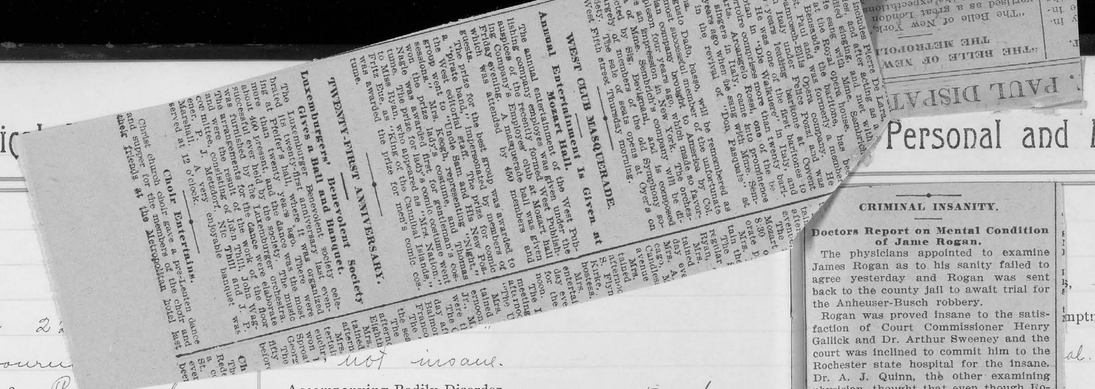
[illegible]tatement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of [illegible]evious mental grade, and any physical impairment).

[illegible]u patient tossed about in bed and stated that he saw two people [illegible]ppeared very much frightened but on further investigation found [illegible]e "put on" - When questioned closely said he was "not insane" + answ[illegible] rationally - Said he saw these things when he had been drinking [illegible]t the prison authorities thought some of sending him here when released [illegible]ught his mind affected - This probably gave him the clue to feign insanity

[illegible]metical

[illegible]Good.

[illegible]eds normal



WEST CLUB MASQUERADE.

Annual Entertainment Held in the West Publishers' Benevolent Society Gives a Ball and Banquet.

TWENTY-FIRST ANNIVERSARY.

Choir Entertains.

Annual Entertainment and Mozart Hall to be Given by the Choir.

Lacombe's Band First Appearance.

CRIMINAL INSANITY.

Doctors Report on Mental Condition of Jame Rogan.

The physicians appointed to examine James Rogan as to his sanity failed to agree yesterday and Rogan was sent back to the county jail to await trial for the Anheuser-Busch robbery.

Rogan was proved insane to the satisfaction of Court Commissioner Henry Gallick and Dr. Arthur Sweeney and the court was inclined to commit him to the Rochester state hospital for the insane. Dr. A. J. Quinn, the other examining physician, thought that even though Rogan was insane, his insanity was criminal and that he was not a fit person to be committed to a hospital where he would be associated with all classes of patients, practically without restraint, and where his chances for escape would be comparatively good.

FROM JURY'S STANDPOINT.

Rogan Is Insane and Will Go to the Asylum.

While three physicians, experts in mental and nervous diseases, testified yesterday in the district court that James Rogan was legally sane, the jury which tried the issue of his mental condition, after consulting two hours, found him insane.

Dr. Sweeney testified that the man Dr. Kilbourne testified that he was a moral imbecile, but mentally competent to understand the proceedings against him on the indictment found against him.

S. J. Donnelly made much of the fact that both Rogan's father and mother had been committed to the asylum and that his mother was still an inmate there.

It follows that Rogan will be committed to the insane hospital until such time as he may be so far recovered as to stand trial on the indictment for grand larceny in the first degree. If he ever comes to trial the defense of insanity may be interposed. He is an old offender and has spent seven years in the state prison. While a convict he assaulted and nearly killed one of the guard.

[illegible] the trial last week, insanity was set up as the ground of his defense. Dr. Kilbourne appeared to testify that Rogan was not insane. On the Rochester superintendent's expert testimony, the prisoner was convicted of grand larceny and met the fate he deserved.

[illegible] had nothing to say.

Deputies Herges and Moriarty were standing by his side. The former tapped him on the shoulder to lead him away when Rogan turned and swung his right against Herges' jaw. He let Moriarty have the left and thereupon ensued a free-for-all fight.

For five minutes the dignity of the court was ruthlessly disturbed. Two deputies were no match for Rogan, whose strength is something phenomenal. Back and forth the men pulled and hauled. Deputy Courteau came to the rescue and he was soon joined by Deputy Reichow and Head Deputy Hardick.

Rogan fought like a fiend and resisted all efforts of the deputies to put the handcuffs on him. As he struggled he ripped out oath after oath, threatening all hands with death if he could get free.

Rogan secured Courteau's thumb and twisted it out of joint. He also bit into the clothing of Moriarty.

The people in the court room were on their feet watching the struggle. All was confusion, for it was impossible to maintain order while the deputies were having their hands full.

It required five minutes by the watch for the five deputies to subdue Rogan, who was well nigh exhausted when the battle was over. The deputies were just as tired as the criminal.

"Wait till I get to Stillwater," shouted Rogan, "I'll kill some of the — — — if I swing for it."

He was led away to the jail and locked in his cell, where he gave vent to imprecations against those who had endeavored to restrain him.

This morning Rogan called Deputy Hardick to the cell door and pleaded to be allowed to walk in the corridor.

"I ain't a bit crazy," he said, but I thought I would give you fellows a run for your money over in the court."

Rogan was allowed to enter the corridor and was quiet during the rest of the day.

John Selb, deputy clerk of court, was hurrying up the papers in Rogan's case today so that the prisoner might be got to the penitentiary by this evening. The sheriff and all the court officials will feel relieved when the fellow is landed in the pen at Stillwater.

Personal and Medical History of

Whole No. 5705

Residence,

Date Admission, November

Admitted by Dr. A. F. Kilbourne

How Sent, G. L. Bunn Jof D.C. Ro

Sex, male Age,

Civil Condition, single

Children, — Age Youngest Child

Occupation,

Degree Education, Common school

Profession of Religion, Roman catholic

Habits, ?

Nativity, ?

Physicians Committing,

Correspondents,

of this Attack,

Duration,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving, Nov. 29 '

Time in Hospital, 6 days.

Result, Discha. Not Insane Dec 6' 1901.

Examination on Admission by Dr. Wilson. *Date of* Nov. 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear - At times tries to be confused.

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct.

REASONING POWER, Ordinary Subjects, fair.

Special Subjects,

Own Mental State, Says he is not insane.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

normal - indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

Father, Died - Heart.

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, Head Injuries and Surgical Operations). (especially Typhoid Fever, Sunstroke,

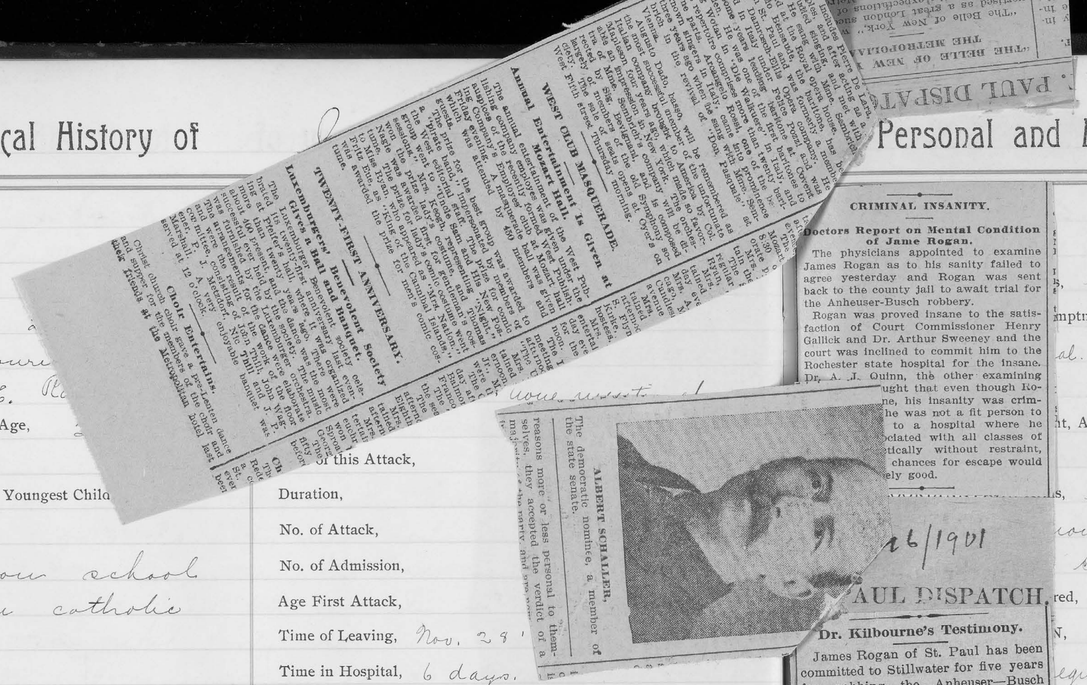
HABITS, Drinking and Smoking, drinking

HEADACHES, VERTIGO, OR CONVULSIONS, none

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, irregular



TWENTY-FIRST ANNIVERSARY.

Luxemburger Democratic Society Gives a Ball and Banquet.

WEST CLUB MASQUERADE.

Annual Entertainment in Mozart Hall Is Given at Night.

CRIMINAL INSANITY.

Doctors Report on Mental Condition of Jame Rogan.

The physicians appointed to examine James Rogan as to his sanity failed to agree yesterday and Rogan was sent back to the county jail to await trial for the Anheuser-Busch robbery.

Rogan was proved insane to the satisfaction of Court Commissioner Henry Gallick and Dr. Arthur Sweeney and the court was inclined to commit him to the Rochester state hospital for the Insane. Dr. A. J. Quinn, the other examining ...ught that even though Ro... he was not a fit person to ... to a hospital where he ...ciated with all classes of ...tically without restraint, ... chances for escape would ...ely good.

ALBERT SCHALLER.

The democratic nominee, a member of the state senate.

11/26/1901

PAUL DISPATCH.

Dr. Kilbourne's Testimony.

James Rogan of St. Paul has been committed to Stillwater for five years for robbing the Anheuser—Busch Brewing company of $82.60 on June 11. Rogan has been a violent prisoner and when sentenced Friday made a most hostile demonstration against the officers. He feigned insanity when brought to trial under an indictment of the grand jury last October and was brought to the Rochester state hospital. Supt. Kilbourne almost immediately discovered that the prisoner was shamming and in three days the "patient" was returned to the Ramsey county jail where he has been kept in solitary confinement. At the trial last week, insanity was set up as the ground of his defense. Dr. Kilbourne appeared to testify that Rogan was not insane. On the Rochester superintendent's expert testimony, the prisoner was convicted of grand larceny and met the fate he deserved.

... had nothing to say.

Deputies Herges and Moriarty were standing by his side. The former tapped him on the shoulder to lead him away when Rogan turned and swung his right against Herges' jaw. He let Moriarty have the left and thereupon ensued a free-for-all fight.

For five minutes the dignity of the court was ruthlessly disturbed. Two deputies were no match for Rogan, whose strength is something phenomenal. Back and forth the men pulled and hauled. Deputy Courteau came to the rescue and he was soon joined by Deputy Relchow and Head Deputy Hardick.

Rogan fought like a fiend and resisted all efforts of the deputies to put the handcuffs on him. As he struggled he ripped out oath after oath, threatening all hands with death if he could get free.

Rogan secured Courteau's thumb and twisted it out of joint. He also bit into the clothing of Moriarty.

The people in the court room were on their feet watching the struggle. All was confusion, for it was impossible to maintain order while the deputies were having their hands full.

It required five minutes by the watch for the five deputies to subdue Rogan, who was well nigh exhausted when the battle was over. The deputies were just as tired as the criminal.

"Wait till I get to Stillwater," shouted Rogan. "I'll kill some of the — — — If I swing for it."

He was led away to the jail and locked in his cell, where he gave vent to imprecations against those who had endeavored to restrain him.

This morning Rogan called Deputy Hardick to the cell door and pleaded to be allowed to walk in the corridor.

"I ain't a bit crazy," he said, but I thought I would give you fellows a run for your money over in the court."

Rogan was allowed to enter the corridor and was quiet during the rest of the day.

John Selb, deputy clerk of court, was hurrying up the papers in Rogan's case today so that the prisoner might be got to the penitentiary by this evening. The sheriff and all the court officials will feel relieved when the fellow is landed in the pen at Stillwater.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, ——— USUAL WEIGHT, NUTRITION, Good.

...s, none - Condition of Skin, Clear

...mptness of Movement, Clear

...al. Size, normal. Response to Light, normal Accommodation, do

...ht, Arcus Senilis, or other troubles,

...s, normal Legs, do. Grasp,

...one. Tongue, Facial Muscles, General,

... somewhat exaggerated Other Reflexes,

...red, normal. Hesitating, Slow,

...N, Sensibility,

...egular

...rmal

...noted

...l -

...metrical

...good.

...t

...ds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

...NE, Quantity, Sp. g. Reaction, Color and Appearance,

Sugar,

... Crystals,

...C EXAMINATION,

...æmoglobin,

...nt and Character, Insomnia -

...dition, Constipated.

...statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of ...evious mental grade, and any physical impairment).

...w patient tossed about in bed and stated that he saw two people ...ppeared very much frightened but on further investigation found ...e "put on". When questioned closely said he was "not insane" & answ... ...rationally. Said he saw these things when he had been drinking ...t the person authorities thought some of sending him here when released ...ought his mind affected. This probably gave him the clue to feign insanity

Personal and Medical History of Jam

Whole No. 5705

Residence,

Date Admission, November 2

Admitted by Dr. A. F. Kilbourn

How Sent, G. L. Bunn Jof D.C.

Sex, male Age,

Civil Condition, single

Children, — Age Youngest Child

Occupation,

Degree Education, Common school

Profession of Religion, Roman catholic

Habits, ?

Nativity, ?

Physicians Committing,

Correspondents,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving,

Time in Hospital,

Result, Discharged

Examination on Admission by Dr. Wausus *Date* D. 190

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear - At times tries to be confused.

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct.

REASONING POWER, Ordinary Subjects, fair.

Special Subjects,

Own Mental State, Says he is not insane.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

normal - indifferent.

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, drinking

HEADACHES, VERTIGO, OR CONVULSIONS, none

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, ——— USUAL WEIGHT, NUTRITION, good.

Condition of Skin, Clear

[illegible], none -

[illegible]mptness of Movement, Clear

[illegible]al. Size, normal. Response to Light, normal Accommodation, do

[illegible]t, Arcus Senilis, or other troubles,

[illegible]s, normal Legs, do. Grasp,

[illegible]one. Tongue, Facial Muscles, General,

[illegible] somewhat exaggerated Other Reflexes,

[illegible]red, normal. Hesitating, Slow,

[illegible]N, Sensibility,

[illegible]egular

[illegible]ormal

[illegible]noted

[illegible]l -

[illegible]mmetrical

good.

[illegible]uds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

[illegible]NE, Quantity, Sp. g. Reaction, Color and Appearance,

Sugar,

Crystals,

[illegible]C EXAMINATION,

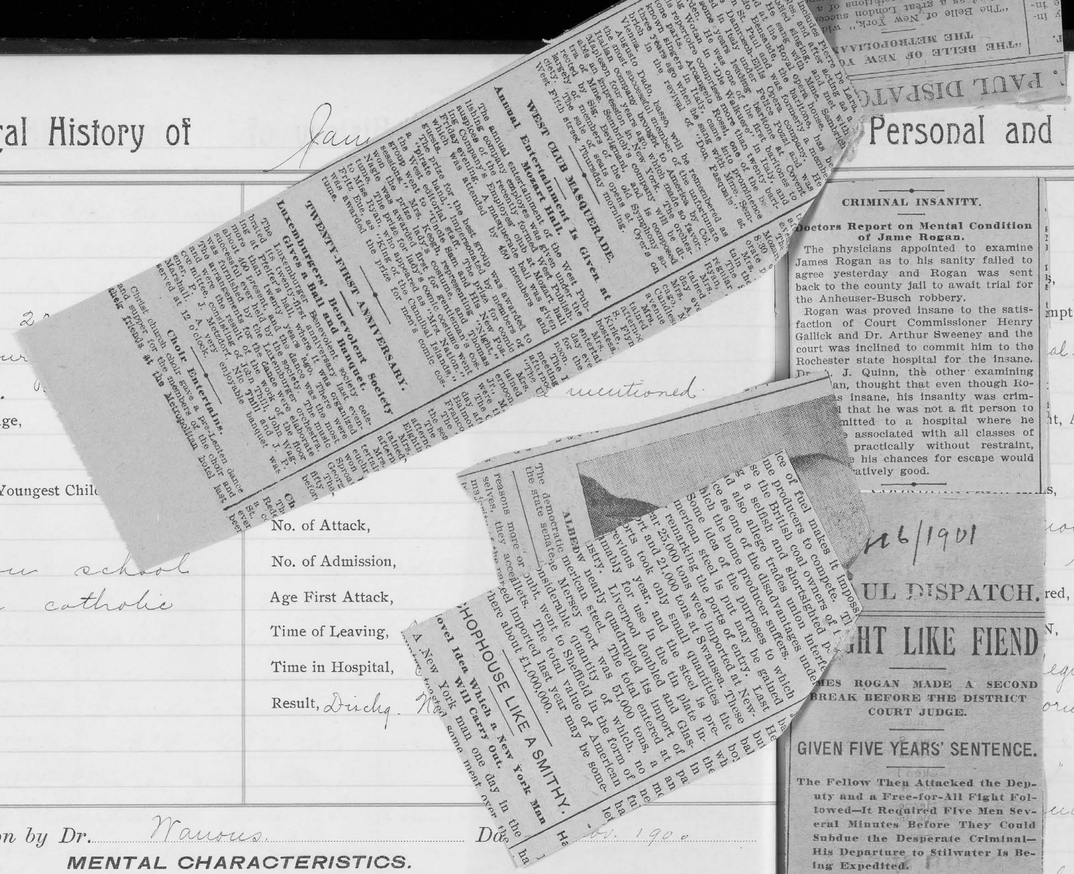
[illegible]æmoglobin,

[illegible]nt and Character, Insomnia -

[illegible]dition, Constipated.

statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of evious mental grade, and any physical impairment).

[illegible]ew patient tossed about in bed and stated that he saw two people appeared very much frightened but on further investigation found [illegible]e "put on" - When questioned closely said he was "not insane" & answers[illegible]s rationally. Said he saw these things when he had been drinking [illegible]t the prison authorities thought some of sending him here when released [illegible]ought his mind affected. This probably gave him the clue to feign insanity



WEST CLUB MASQUERADE.

Annual Entertainment In Given at Mozart Hall, Is

TWENTY-FIRST ANNIVERSARY.

Larremmerers' Beneficent Society Gives a Ball and Banquet.

Choir Entertains.

CRIMINAL INSANITY.

Doctors Report on Mental Condition of Jame Rogan.

The physicians appointed to examine James Rogan as to his sanity failed to agree yesterday and Rogan was sent back to the county jail to await trial for the Anheuser-Busch robbery.

Rogan was proved insane to the satisfaction of Court Commissioner Henry Gallick and Dr. Arthur Sweeney and the court was inclined to commit him to the Rochester state hospital for the insane. Dr. [illegible] J. Quinn, the other examining [illegible]an, thought that even though Ro[illegible]s insane, his insanity was crim[illegible]d that he was not a fit person to [illegible]mitted to a hospital where he [illegible]e associated with all classes of [illegible] practically without restraint, [illegible]e his chances for escape would [illegible]atively good.

[illegible]16/1901

[illegible]UL DISPATCH.

[illegible]GHT LIKE FIEND

[illegible]ES ROGAN MADE A SECOND BREAK BEFORE THE DISTRICT COURT JUDGE.

GIVEN FIVE YEARS' SENTENCE.

The Fellow Then Attacked the Deputy and a Free-for-All Fight Followed—It Required Five Men Several Minutes Before They Could Subdue the Desperate Criminal—His Departure to Stillwater Is Being Expedited.

James Rogan gave another evidence of his desperate character as a criminal in court last evening.

The jury had found him guilty of the crime charged and sentence of five years in the penitentiary had been pronounced by Judge Kelly when Rogan made his break. The manacles were removed from his hands in accordance with an old law that the prisoner must be free to make his plea. He grunted out in a surly way to the court that he had nothing to say.

Deputies Herges and Moriarty were standing by his side. The former tapped him on the shoulder to lead him away when Rogan turned and swung his right against Herges' jaw. He let Moriarty have the left and thereupon ensued a free-for-all fight.

For five minutes the dignity of the court was ruthlessly disturbed. Two deputies were no match for Rogan, whose strength is something phenomenal. Back and forth the men pulled and hauled. Deputy Courteau came to the rescue and he was soon joined by Deputy Relchow and Head Deputy Hardick.

Rogan fought like a fiend and resisted all efforts of the deputies to put the handcuffs on him. As he struggled he ripped out oath after oath, threatening all hands with death if he could get free.

Rogan secured Courteau's thumb and twisted it out of joint. He also bit into the clothing of Moriarty.

The people in the court room were on their feet watching the struggle. All was confusion, for it was impossible to maintain order while the deputies were having their hands full.

It required five minutes by the watch for the five deputies to subdue Rogan, who was well nigh exhausted when the battle was over. The deputies were just as tired as the criminal.

"Wait till I get to Stillwater," shouted Rogan. "I'll kill some of the — — — if I swing for it."

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[illegible]at [illegible]

Personal and Medical History of

Whole No. 5705

Residence,

Date Admission, November

Admitted by Dr. A. F. Kilbourne

How Sent, G. L. Bunn Jof D.C.

Sex, male Age,

Civil Condition, single

Children, — Age Youngest Child

Occupation,

Degree Education, Common school

Profession of Religion, Roman catholic

Habits,

Nativity,

Physicians Committing,

Correspondents,

Examination on Admission by Dr. Wa... *of* Nov. 190...

MENTAL C...

MENTAL ACTIVITY, Clear or Confused, Quick or Slugg... ISTORICAL.

Clear - At times tries to be

MEMORY, Past Events, good

Recent Events, " Speci...

PERCEPTIVITY, Alert or Dull, Correct o...

Correct.

REASONING POWER, Ordinary

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Norm...

normal - indifferent

DELUSIONS, Systematized, Trans...

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

Duration,

No. of Attack,

No. of Admission

Age First A...

Time of Lea...

Time in ...

Resp...

A...

...of this Attack,

...none

...stion concerning Insanity, Consanguinity, Epilepsy, ...alysis, Syphilis, Hysteria, Inebriety, Consumption).

...ather, direct - Knowl

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

(especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).

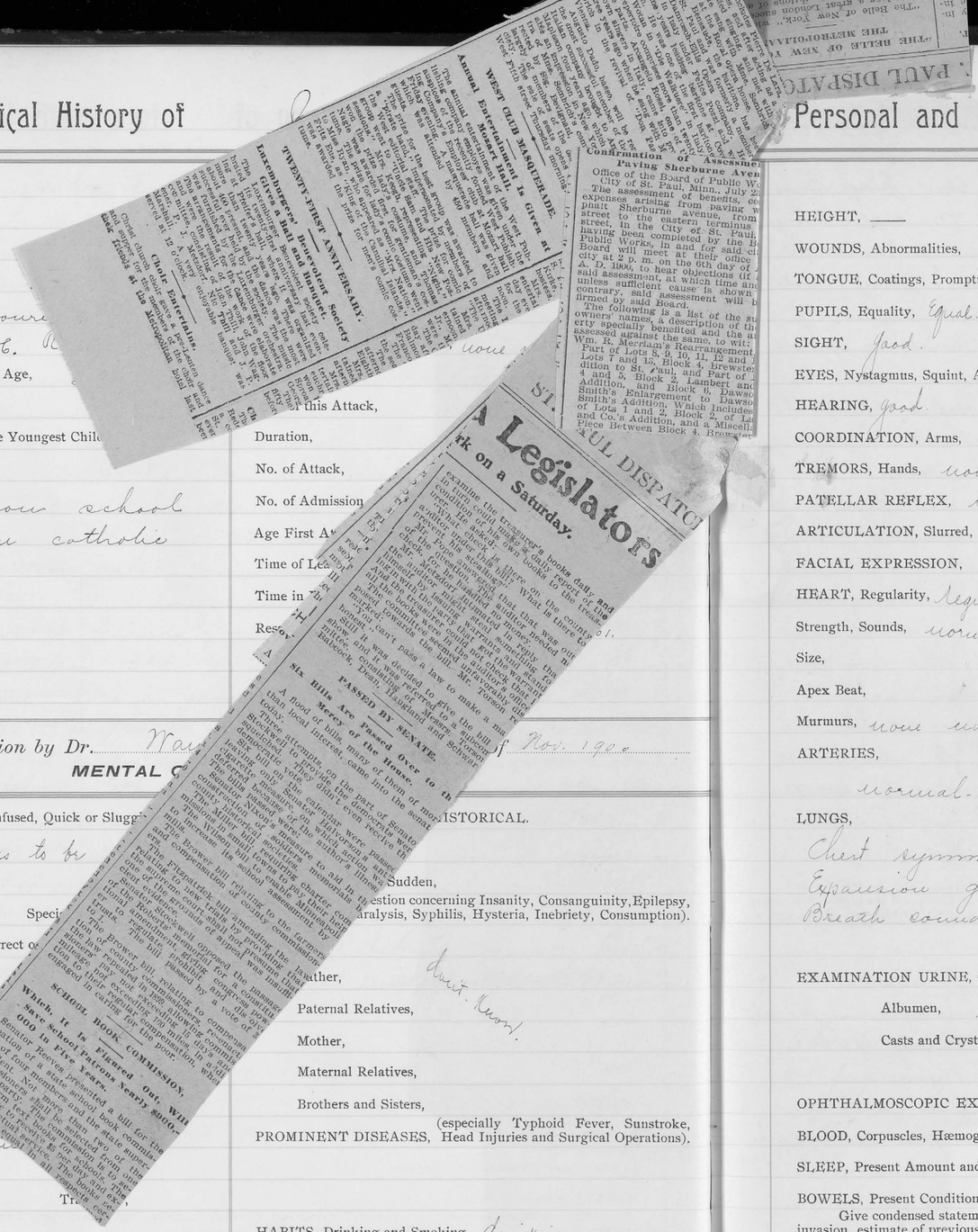
HABITS, Drinking and Smoking, drinking

HEADACHES, VERTIGO, OR CONVULSIONS, none

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, irregular



TWENTY-FIRST ANNIVERSARY.

Entertainment, Ball and Banquet. Society

Choice Entertainment.

Confirmation of Assessme...

Paving Sherburne Aven...

Legislators

Six Bills Are Passed Over to the House.

PASSED BY SENATE.

Save School Patrons Nearly $000...

SCHOOL BOOK COMMISSION.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, good.

WOUNDS, Abnormalities, none - Condition of Skin, Clear

TONGUE, Coatings, Promptness of Movement, Clear

PUPILS, Equality, Equal. Size, normal. Response to Light, normal Accommodation, do

SIGHT, good.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, none. Tongue, Facial Muscles, General,

PATELLAR REFLEX, somewhat exaggerated Other Reflexes,

ARTICULATION, Slurred, normal. Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Regular

Strength, Sounds, normal

Size,

Apex Beat,

Murmurs, none noted

ARTERIES,

normal -

LUNGS,

Chest symmetrical
Expansion good.
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia -

BOWELS, Present Condition, Constipated.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

When first seen patient tossed about in bed and stated that he saw two people near him. Appeared very much frightened but on further investigation found this to be all "put on". When questioned closely said he was "not insane" & answered all questions rationally. Said he saw these things when he had been drinking also stated that the prison authorities thought some of sending him here when released before as they thought his mind affected. This probably gave him the clue to feign insanity at this time.

Personal and Medical History of James Rogan.

1900

This patient was committed here by Order of District Court. Judge Bunn. Brought here by Dep. Sheriff Hanson attended by Frank W. Martin + George Kreps. He was in jail under indictment for crime of grand Larceny in first degree. Oct. 24 was tried by Judge Bunn + jury as to question of insanity + found by jury to be insane. At request of County Attorney Bigelow Dr Kilbourne examined patient while confined in County jail in St. Paul awaiting trial. at three different times + he was satisfied that patient was a malingerer + so testified at his trial. Dr. Sweney testified to practically the same thing, Dr. Archibald not being so positive. When first seen in jail + questioned he wore hair very long + beard untrimmed. looked like an insane person. All questions were answered with studied evasion; answers being entirely irrelevant. When asked for a pencil he brought a broom and so all requested for certain articles would always hand something different: Asked what month, said "March". What day "Thursday" what year "2000": Said he was forty years old and was born before the flood: When asked what a certain man did, said he "did time", at which witticism he could hardly repress a smile: When given some figures to multiply proceeded to add them: When asked to write name, wrote St Paul. + when asked to write Jim Rogan said "oh! is that what you want" + wrote Rogan. Said father lived in Boston: called attention to word Chicago, said it was Boston: Claimed to be very much afraid + on alert for approaching footsteps: Had sticks stuck up in cell "to keep off spirits": Said he heard someone crying.
Eye clear: pulse normal: Temperature, to the feeling, normal.
Made motions as though looking around for imaginary people.
At trial in court room sat quiet + gave no evidence of being insane. On admission to Hospital put upon Infirmary (Gen. Rpt Complexion dark: Hair black: eyes blue: Skin in fair condition Tattoo marks on arms + legs below knees. A few pimples on body. Is dirty: Teeth good: Behavior good)
was given bath + went through about the same antics as at jail.
He was put to bed + examined by Dr. Kilbourne, studiously evaded the right answers to any questions + kept looking under bed.
The next morning Nov. 7th was given cold bath. was again examined for 1st + hrs. by Dr. Kilbourne. Asked where he was, said he thought in Minneapolis - said he took cars in morning + travelled until night but yet thought he was in Minneapolis. Told whole history of his trouble in St. Paul. Said he met a man whom he did not

Personal and Medical History of James Rogan

know + went with him to look up a man by name Harry Edmonds. They went out near where he lived + dropped into the Anheuser-Busch brewery. + while the man he was with looked in the directory a sudden impulse came over him to seize the money box. he did so + ran with it. was pursued + caught near Union depot. He had a revolver but could not shoot it because the cartridges were too big. Had face bruised while being taken into custody. Said he had never had any show; had always been abused. Would like to lead a decent life + came out of prison with good intentions: Never had had any kindness shown him. Said he saw his mother two weeks ago in jail: that she was not in this institution When accused of shamming said with an oath that he was not shamming. that if we did not want to keep him here we might send him back to St. Paul. Said he could go out on bail. his sister would probably take him out. He did not expect to be punished for what he had done. When asked what was maximum punishment for crime for which he was indicted, said "yes" In talking with Nurse Spillane in evening said he did not remember anything about St. Paul. When told how another man who feigned insanity was sent back to St. Paul + sent to prison was greatly interested + asked questions regarding it. Pulse + temperature apparently normal. Eyes bright. Shows no evidence whatever of insanity. While during conversation in morning he did not pretend to hear any voices or persons.

notes by Dr. Wanous — (Dictated)

1900
Nov 7th Admitted on T.W.: given bath + put to bed. is rather irritable and inclined to be pugnacious. At intervals, patient talks to himself and talks of seeing and hearing things in the room. (Is sent here by order of Court): Strongly suspected of feigning Insanity. Answers questions quite readily: goes through various performances, (such as, searching his bed + looking around room) - When asked why he does so? says "he thinks there is a man there". Is threatening and very obstinate. When first seen, patient tossed about in bed: seemed very much frightened. On further investigation this appeared to be "feigned" — When questioned closely, said "he was not insane" answered, at times, rationally. Said "the prison - authorities thought of sending him here, when he was released before, as they thought his mind affected" — On morning of 23rd, told of the trouble he had in St. Paul, and was

Carried to 316.

Personal and Medical History of Thomas Williams.

Whole No. 5706
Residence, Unknown.

Date Admission, November 24' 1900.
Admitted by Dr. C. L. Chapple hour, 7.30 P.M.
How Sent, E.W. Bazill & of P. Ramsay Co.
Sex, male Age, ?
Civil Condition, Single
Children, — Age Youngest Child,
Occupation, Hostler.
Degree Education, none.
Profession of Religion, ?
Habits, unknown.
Nativity, Wales. (Parents also born there)
Physicians Committing, F.B. Darling & A.W. Dunning.
Correspondents,

No. for Year, 69.
Insane Relatives, unknown.
Cause Exciting, "
Cause Predisposing, "
Form, Epileptic Dement
Accompanying Bodily Disorder, unknown.
Suicidal or not, not.
Date of this Attack, six mos. ago.
Duration, 6 mos.
No. of Attack, 1st
No. of Admission, 1 here.
Age First Attack, unknown.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. Warnock. *Date of* Nov 26' 1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Cannot Talk
MEMORY, Past Events,
Recent Events, Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
REASONING POWER, Ordinary Subjects,
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.
LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father,
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
HABITS, Drinking and Smoking,
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not,
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, Appetite, Bowels,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION,
WOUNDS, Abnormalities, Eruption over face & body. Condition of Skin,
TONGUE, Coatings, Promptness of Movement, Coated.
PUPILS, Equality, equal Size, large Response to Light, good. Accommodation, good.
SIGHT,
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING,
COORDINATION, Arms, Legs, Grasp,
TREMORS, Hands, none. Tongue, Facial Muscles, General,
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Slow.
Strength, Sounds, Weakened.
Size, normal.
Apex Beat, "
Murmurs, None noted
ARTERIES,
full.
LUNGS,
Chest symmetrical
Expansion fair
Breath sounds normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Poor.
BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient cannot talk. Has a staring expression as tho endeavoring to say something. Face is drawn - R. side of mouth drawn upward. Pupils dilated respond to light & accomodation readily. Condition due to brain softening & small haemorrhage. Has a papular eruption over body - perhaps "specific".

Personal and Medical History of Thomas Williams.

1900

This patient was brought here by Dep. Sheriff Hansen attended by Alfred E. Ward. in poor physical condition with the following history:- No No information concerning consanguinity heredity nor previous history. First symptoms of insanity manifested six months ago by peculiar actions. delusions appears increasing. Patient is solitary & indifferent. Has been in Ramsey Co. Hospital for six weeks & has been treated - rest in bed & diet. No further facts learned on

Nov 29 personal examination. On admission, put upon. G.U.E.L. G.U.-U.R.pt. Complexion sandy: hair reddish brown: eyes dark blue: Skin in fair condition: Vac. marks on L. arm. Tattoo marks on fingers of L. hand. Wart on back. Left big toe nail marked. Eruption on body. Is dirty. One tooth gone from upper jaw: rest in fair condition. Behavior good. very stupid. (exam. by Nurse Howe & E. Moore) —

" " Received on Ward: Given bath & put to bed: has to be fed by nurses: Is restless & badly

29 Confused: very filthy in habits - Nov 29. requires catheterization. (Case is one of primary

Dec 31 Dementia) - Dec 31. Patient manifests "hallucinations of hearing" - Talks about his having worked in St Paul at Allen's livery Stable. Says "he was in love with a girl in Dakota and told her so" - "Hears Devils talking to him, but cannot see them."

1901 Patient given clothes and got up. Jany 2. Transferred to B1. Jany 3. 118th. P.S.S. —

Jany 2 Remains about the same. Is very stupid; talks a little, but irrationally, & vulgar: attention appears

31 to be fixed by vivid hallucinations: will stare at a single object for a long period: at other times, will grin foolishly, if spoken to. Is extremely filthy: eats his own faeces: says "it is a sure cure for all diseases". Is very inactive. Feby 1. Wt 125#. March 1. 138#. April 1. Wt 145# - Mind

July 1 seems almost a blank: will rarely answer questions: is very dirty and filthy in habits: May 9. Some

May 9 improvement: cleanly: works some in dining room: June 1. 142#. Health quite good: Eats

June 1 and sleeps well. Works a little on farm. June 29. Transferred to D2. July 8. Has sore on wrist:

July 8 (apparently from burn): same dressed. July 31. Is restless & work. some. Is very sluggish

Aug 1 and demented: no improvement. Aug 1. Wt 134#. Nov 1. Wt 130#. Jany 3/02. Appa-

1902 Jany 31 -rently increasing dementia: mind appears constantly occupied by hallucinations and delusions. Is constantly grabbing at everyone that comes near him: very filthy: removes entire clothing frequently. Physical condition fair.

Feb. 1 Wt. 142#; Aug 9 Trans. to C. Patient very violent of late; destructive & filthy in habits. Sept. 6 Has again become quiet & peaceable - Transferred to Annex.

1903 Jan 31 Still remains quiet - very inactive; contrary. talk incoherent; very demented.

Personal and Medical History of

Personal and Medical History of John Kelly.

Whole No. 5707
Residence, St. Paul, Minn.

Date Admission, November 27, 1900.
Admitted by Dr. E. J. Warnock hour, 7.30 PM.
How Sent, E.W. Bazille J. of P. Ramsey Co.
Sex, male Age, 23 yrs.
Civil Condition, single
Children, – Age Youngest Child, –
Occupation, Laborer
Degree Education, Common school.
Profession of Religion, Catholic.
Habits, Not intemperate.
Nativity, Minn. Father born in Ireland, Mother Minn.
Physicians Committing, S.S. Hesegrave + W.G. Richeson.
Correspondents,

No. for Year, 70
Insane Relatives, None.
Cause Exciting, unknown.
Cause Predisposing, Previous attack.
Form, Adolescent insanity.
Accompanying Bodily Disorder, none mentioned.
Suicidal or not, not.
Date of this Attack, Recent.
Duration, ?
No. of Attack, 2nd
No. of Admission, 2nd
Age First Attack, 22 yrs.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. Warnock. *Date of* Nov. 28 1900

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,
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,
ILLUSIONS,
SUMMARY, Has been confined in Workhouse for a couple of months.

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father,
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Syphilis
HABITS, Drinking and Smoking, Yes.
HEADACHES, VERTIGO, OR CONVULSIONS, no.
OCCUPATION, Healthy or not,
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, Bowels,

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 in. PRESENT WEIGHT, 155.# USUAL WEIGHT, NUTRITION,
WOUNDS, Abnormalities, Condition of Skin,
TONGUE, Coatings, Promptness of Movement, Coated.
PUPILS, Equality, Size, Response to Light, Accommodation,
SIGHT,
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING,
COORDINATION, Arms, Legs, Grasp,
TREMORS, Hands, Tongue, Facial Muscles, General,
PATELLAR REFLEX, Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity,
Strength, Sounds, Weakened.
Size, normal
Apex Beat, "
Murmurs, none noted
ARTERIES,
Pulse very weak + slow.
LUNGS,
Chest symmetrical
Expansion poor
Breath sounds normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character,
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient appears in a cataleptic condition: eyes fixed + repeats words "Lost lonely" Will not answer questions. Appears pale, breath foul, tongue coated. Sordes over teeth + lips. Patient has been here before at which time he was treated for "specific" trouble and cleared up. Physical condition poor.

Personal and Medical History of John Kelly.

1900

This patient was brought here by Dep. Sheriff Hansen attended by Peter Stone in poor physical condition, with the following history:- No history of consanguinity, heridity nor intemperance in patient nor parents: First attack of insanity manifested in Aug 1899. & patient was in this hospital from Aug 20 '99 to July 17 1900 (for further particulars see Vol. 43 fol 273 No. 5389) First symptoms of attack manifested recently by melancholia: Disease increasing & variable. Derangment now manifested by refusal to talk. Not disposed to injure anyone: No filthy nor destructive habits: No peculiarities previously manifested: No severe diseases nor injuries to head: No confinment nor restraint employed- No treatment pursued. On personal examination refuses to talk: has a melancholic appearance.

Nov 27 On admission put upon B3E (G.S.N. Rpt. Complexion dark: hair black: eyes brown: Skin in good condition: Vac marks on L. arm So dirty: One tooth broken off & one partly decayed in R. upper jaw: Behavior good: Exam. by M. J. Fahey)

" 28 Received on Ward: (2nd Commitment)- Is very stupid. Nov 29. Refused breakfast & seems in a delirious condition. Transferred to TW. Patient is constipated: Given enema- Dec 5 Found trying to choke himself: expectorated blood & refuses nourishment. Dec 10. Is 10 very stupid and in a cataleptic Condition. Jany 1901. 126#: Expresses various delusions. 1901 Jan 3/7 Is out of bed most of day. Jany 7. Given clothes — Jan 8-31. Has been given 1/31 Electrical treatment. Feby 1. Is dirty: very much demented. May 1. Shows some im- May 1 - provement, though he acts very childish. July 31. Patient shows some further improvement July 31 1901 in both mental & physical condition. Aug 1. Wt 173#. Jany 31/02. During period, Jan 31 has improved little or none. Talks rather silly; laughs to himself & is somewhat Feb 1 confused: has, at times, refused to eat. Feby 1/02. 174#. July 31. Patient silly: July 31 laughs & talks to self (Feby 24. Ate some of the disinfectant from closet: Feb 24 Stomach washed out: no bad results). Is dirty in habits: Jany 1/03. Wt-164# 1903 Jany 1 usually silly: Talks somewhat incoherent & foolish. Condition practically 31. the same throughout the year. (Jany 31/03)

Personal and Medical History of

Personal and Medical History of Ole A. Gudvangen.

Whole No. 5708

Residence, Mansfield Minn.

Date Admission, November 27, 1900

Admitted by Dr. E.J. Wanous hour,

How Sent, H. Blackmun J. of P. Freeborn Co.

Sex, male. Age, 49

Civil Condition, married.

Children, 13 Age Youngest Child, —

Occupation, Farmer.

Degree Education, fair in Norwegian

Profession of Religion, Lutheran.

Habits, Slightly intemperate.

Nativity, Norway. (Parents born in Norway)

Physicians Committing, O.A. Burton & G.M. Bauck.

Correspondents, Mrs. Betsy Gudvangen Scoville Iowa.

No. for Year, 71.

Insane Relatives, None.

Cause Exciting, Probably Rumatism.

Cause Predisposing, ~~Previous attack~~

Form, Acute Mania Chronic

Accompanying Bodily Disorder, None mentioned.

Suicidal or not, not.

Date of this Attack, 2 yrs. ago.

Duration, 2 yrs.

No. of Attack, 1

No. of Admission, 1 here

Age First Attack, 47 yrs.

Time of Leaving, Feby 16 – 1901.

Time in Hospital, 2 mos. 29 days –

Result, Recovered: Discd. April 30/1901

Examination on Admission by Dr. Wanous *Date of*

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish.

MEMORY, Past Events, good.

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

dull.

REASONING POWER, Ordinary Subjects, fair.

Special Subjects,

Own Mental State, thinks perhaps it is his mind

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, of poisoning Transitory,

Special Subjects,

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, dead. Cancer.

Paternal Relatives, no history of insanity

Mother, died lung trouble.

Maternal Relatives, no history of insanity

7 Brothers and 3 Sisters, all well.
13 children.

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

La Grippe - dyspepsia.

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, farming.

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, Constipated

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 8 in. PRESENT WEIGHT, 138# USUAL WEIGHT, NUTRITION, poor.

WOUNDS, Abnormalities, Condition of Skin, Sluggish-Bronzed

TONGUE, Coatings, Promptness of Movement, Coated - fissured.

PUPILS, Equality, Equal Size, normal. Response to Light, normal Accommodation, do.

SIGHT, Impaired.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, not distinct.

COORDINATION, Arms, normal Legs, do. Grasp,

TREMORS, Hands, none Tongue, Facial Muscles, General,

PATELLAR REFLEX, Exaggerated Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, hypersensitive.

HEART, Regularity, irregular - very rapid

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

Hardened.

LUNGS,

Chest symmetrical.
Expansion fair
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, Constipated.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

Patient appears depressed & melancholic. Says people put poison on his tobacco also on his tools - Says some man did so & made him sick so he had to stop smoking. Thinks it was chloroform. Has had considerable trouble with his stomach. So emaciated & has worried about himself. This is the probable cause of his melancholia

Personal and Medical History of Ole A. Gudsanger.

1900

This patient was brought here by Sheriff W. C. Mitchell, attended by James Sucha. in poor physical condition, with the following history:- No consanguinity nor heredity in family: First symptoms of insanity manifested about two years ago; accused his wife of trying to poison him. Disease appeared increasing for past year. So variable with irregular rational intervals: Derangement now manifested by angry spells: thinks someone is trying to kill his hogs & himself & that there are people hidden about premises: Has shown disposition to injure wife: No filthy nor destructive habits: No peculiarities previously manifested: Had injury to neck & back of head twelve years ago: No confinement nor restraint employed: No treatment pursued. On personal examination patient appeared nervous & rather morose.

Nov 27 On admission put upon B.C. (G.H. N.Rpt. Complexion fair: hair gray: eyes blue: skin in fair condition: Large wart on R. shoulder: Tarsone scars on R. leg: Is clean: One tooth badly decayed Behavior good: Exam. by Dr. J. Fahey).

" " Received on Ward: given bath & put to bed: Says he has thought some one was trying to poison him: Is very weak: bowels constipated: requires cathartics: put on treatment, and phy-

Dec 1/13 - sical condition improved; also mental. Dec 12. Visited by brother-in-law. Dec 13. Given
21 dress & got up. Dec 21. Transferred to F3 — Jany 1/1901 144# 180. Jany 14. Was
1901 Jany 4 transferred to A2. Feby 1. Patient agreeable, and shows marked mental improve-
Feb 1/2 - ment. Is rational on all subjects: takes an interest in work — Feb 2. Given
16 parole of Grounds. Feb 16. Visited by wife and taken home.

Discharged

Personal and Medical History of

Personal and Medical History of George C. Burnell.

Whole No. 5709

Residence, St. Paul, Minnesota.

Date Admission, November 28, 1900.

Admitted by Dr. C. L. Chapple hour, 7:20 P.M.

How Sent, Ewd. Bazille Jap. P. Ramsey Co.

Sex, male Age, 29 yrs.

Civil Condition, single.

Children, Age Youngest Child,

Occupation, Commercial traveler.

Degree Education, high school.

Profession of Religion, Presbyterian

Habits, -

Nativity, Wisconsin - (Parents born U.S.)

Physicians Committing, A.B. Aucker & A.W. Dunning

Correspondents,

No. for Year, 7th.

Insane Relatives, unknown.

Cause Exciting,

Cause Predisposing,

Form, Paresis

Accompanying Bodily Disorder, unknown.

Suicidal or not, not.

Date of this Attack, unknown.

Duration,

No. of Attack,

No. of Admission, 1st

Age First Attack, ?

Time of Leaving, October 22 - 1901

Time in Hospital, 10 Mos 24 Ds

Result, Died: Paresis

Examination on Admission by Dr. E. J. Wauous *Date of* Nov 29/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Rather sluggish

MEMORY, Past Events, Good
Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

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

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Exalted

DELUSIONS, Systematized, Grandiose Transitory,
Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead
Paternal Relatives, Insane
Mother, living
Maternal Relatives,
Brothers and Sisters, ?

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

no

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Agent

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Good Appetite, ? Bowels, ?

Personal and Medical History of

Parsons Disks vol 24 p 97

SOLDIER'S SAD FATE—George C. Burnell, a former member of Company D of the Thirteenth Minnesota volunteers, who served through the war in the Philippines, died Wednesday at the insane hospital. The body was sent to Milwaukee, where a relative resides. Mr. Burnell was sent to the hospital at the instance of his friends several weeks ago. It was said that he had been subject to hallucinations since his return from the Philippines and that he never rallied from the shock he received there.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 125# USUAL WEIGHT, NUTRITION,

s, no. Condition of Skin, oily

nptness of Movement, Clear: promptly

Equality, eq. Size, large Response to Light, sluggish Accommodation, no.

SIGHT, says good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, hesitating Legs, unstable Grasp, Fingers tremor, eyes shut.

TREMORS, Hands, Yes Tongue, Yes Facial Muscles, Yes General,

Some incoordination: Standing on one foot, unsteady: Stands drug, eyes shut, some swaying.

PATELLAR REFLEX, Lost Other Reflexes,

ARTICULATION, Slurred, Yes Hesitating, Yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular murmurs were noted

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES, normal

LUNGS,

Chest Symmetry, Sym
Expansion, good
Breath Sounds, normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient is rather confused, mind sluggish: is of an exalted type: "has lots of money" - Says "Dr. Aucker sent him here because he threatened to have him arrested for opening his mail" - Case is, perhaps, one of beginning Paresis.

Personal and Medical History of George L. Brunn.

Whole No. 5709

Residence, St. Paul, Minnesota.

Date Admission, November 28, 1900.

Admitted by Dr. C. L. Chapple hour, 7:30 P.M.

How Sent, Ed. Bazille Dept. Ramsey Co.

Sex, male Age, 29 yrs.

Civil Condition, Single.

Children, Age Youngest Child,

Occupation, Commercial traveler.

Degree Education, Highschool.

Profession of Religion, Presbyterian

Habits, ?

Nativity, Wisconsin - (Parents born U.S.)

Physicians Committing, A.B. Aucker & A.W. Dunning

Correspondents,

No. for Year, 7th.

Insane Relatives, unk

Cause Exciting,

Cause Predisposing,

Form, Paresis

Accompanying Bodily Disorder, unknown.

Suicidal or not, not.

Date of this Attack, unknown.

Duration, "

No. of Attack, "

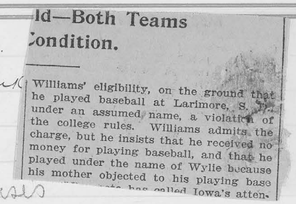
No. of Admission, 1st

Age First Attack, ?

Time of Leaving, October 22 - 1901

Time in Hospital, 10 Mos 24 Ds

Result, Died: Paresis



...ld—Both Teams
...Condition.

Williams' eligibility, on the ground that he played baseball at Larimore, S. D., under an assumed name, a violation of the college rules. Williams admits the charge, but he insists that he received no money for playing baseball, and that he played under the name of Wylie because his mother objected to his playing base... has called Iowa's atten-

Examination on Admission by Dr. E. J. Parsons *Date of* Nov 29/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Rather sluggish

MEMORY, Past Events, Good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, Poor

Special Subjects, "

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted

DELUSIONS, Systematized, Grandiose Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead

Paternal Relatives, Insane

Mother, living

Maternal Relatives,

Brothers and Sisters, 2

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

no

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Agent

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Good Appetite, ? Bowels, ?

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 5½ in. PRESENT WEIGHT, 125 lb. USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, no. Condition of Skin, oily

TONGUE, Coatings, Promptness of Movement, clear: promptly

PUPILS, Equality, eq. Size, large Response to Light, sluggish Accommodation, no.

SIGHT, says good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, hesitating Legs, unstable Grasp, fingers tremor, eyes shut.

Some incoordination: Standing on one foot, unsteady: stand drug, eyes shut, some swaying.

TREMORS, Hands, yes Tongue, yes Facial Muscles, yes General,

PATELLAR REFLEX, Lost Other Reflexes,

ARTICULATION, Slurred, yes Hesitating, yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular murmurs - none noted

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES, normal

LUNGS,

Chest Symmetry, Symm
Expansion, good
Breath Sounds, normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient is rather confused, mind sluggish: is of an exalted type; "has lots of money" - says Dr. Aucker sent him here because he threatened to have him arrested for opening his mail".
Case is, perhaps, one of beginning Paresis.

Personal and Medical History of George L. Burrell.

1900

This patient was brought here by Dep. Sheriff Hamm attended by Mr Van Smith in fair physical condition, with the following history: First symptoms of insanity manifested by delusions of riches & grandeur Disease appears increasing: not variable: Derangement now manifested by jumping hotel bills & living on his friends while boasting of his riches: Not disposed to injure anyone: Neither suicidal nor filthy nor distinct in its habits: No information concerning previous peculiarities: Patient intemperate: No severe diseases nor injuries to head: Has been in City & Co. Hospital since Nov. 27th 1900. Treatment pursued:- rest & nourishment. On personal examination knee jerk absent: tremor present: very voluble. On admission put upon B 3 E (Gen. H. N. Rpt. Complexion dark: hair black: eyes blue: Skin in good condition: Vac. marks on L. arm. Snake & dagger tattooed on L. forearm: moles on abdomen & back Is clean: Teeth good & 2 decayed in upper jaw: behavior good: Exam. by Mr J. Fahey)

Nov 28 " " Received on B 3. Patient is confused & very talkative: "Thinks his arrest was a great injustice": "that it was done for spite". Dec 11. - (14 day record up) - no change in condition from day to day. Dec 19. In bed all day: Complains of dizziness, sickness of stomach: vomited several times. Jan 4 1901. Wt 124#. P 84 - Jan 31. No change in patient's condition to note. Feb 1. Has "grandiose" ideas: writes a great deal: Shows much incoordination. July 31. Patient shows both mental & physical failure: (has lost 5 pds in July). - Aug 1. Wt 115#. Sept 1. Patient has been confined somewhat sickly: has received considerable medicine, and complains a good deal. Sept 26. Failing and growing filthy, where, before, he was neat. Oct 1. Wt 103#. Oct 7. Put to bed. To Tub: Is filthy, nearly every day. Visited by friends, today. Oct 16. Vomited, today. has been quite restless & troublesome. Oct 17. Is very noticeably weaker. Oct 19. Had 18 convulsions, during the day. Oct 20. Failing very rapidly. Oct 22. Died at 8.30 PM. having failed very steadily & rapidly.

Died

Personal and Medical History of

Personal and Medical History of Andrew Molvik (or Molvick)

Whole No. 5710

No. for Year, 73.

Residence, New Richland, Minn.

Insane Relatives, none.

Resident of State since 1883 of Co since Dec. '98.

Cause Exciting, unknown.

Date Admission, Dec. 1, 1900.

Cause Predisposing, "

Admitted by Dr. E. J. Manous hour, 7:30 PM

Form, Acute Delirious Mania

How Sent, G. A. Wilson & A. P. Wasioa Co.

Accompanying Bodily Disorder, none mentioned.

Sex, male Age, 48

Suicidal or not, not.

Civil Condition, widowed

Date of this Attack, Nov. 25, 1900

Children, Three Age Youngest Child, —

Duration, 5 days.

Occupation, Laborer.

No. of Attack, 1st

Degree Education, Common school.

No. of Admission, 1st

Profession of Religion, Not a church member.

Age First Attack, 48 yrs.

Habits, Intemperate.

Time of Leaving, August 15th 1901.

Nativity, Norway. (Parents also born there)

Time in Hospital, 8 mos - 14 ds.

Physicians Committing, D. J. McMahon - H. G. Blanchard

Result, Discharged Nov 22 - 1901

Correspondents, Aud. Rochigard. New Richland Minn. (or New Richmond Wis.)

Recovered

Examination on Admission by Dr. Dr E. J. Manous *Date of* Dec 2/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, Impaired

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, Poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead: Stomach trouble

Paternal Relatives, No hist. of Ins.

Mother, Dead, Lung fever?

Maternal Relatives, No hist. of Ins.

Brothers and Sisters, 6 one sister dead children 3 - all well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, Excess.

HEADACHES, VERTIGO, OR CONVULSIONS, No.

OCCUPATION, Healthy or not, Laborer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Poor Appetite, Poor Bowels, Irregular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft. 9 in. PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, apparently fair

WOUNDS, Abnormalities, R. hand, scar from husking machine. Condition of Skin, Muggish

TONGUE, Coatings, Promptness of Movement, Coated

PUPILS, Equality, dilated Size, normal Response to Light, sluggish Accommodation, slow

SIGHT, fair

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good

COORDINATION, Arms, normal Legs, normal Grasp, Standing, no foot, steady Eyes shut, steady

TREMORS, Hands, fine Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, " Hesitating, Slow, yes

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irritable

Strength, Sounds, weak

Size, normal

Apex Beat, "

Murmurs, none

ARTERIES, flabby

LUNGS,

Chest Symmetry, Sym.
Expansion good
Breath Sound, Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient appears depressed & sluggish; has various delusions. Says "people are accusing him wrongly". Seems to have been worrying and this has caused his trouble. Acute Melancholia.

Personal and Medical History of Andrew Molvik.

1900

This patient was brought here by Sheriff Frank Collins attended by Thomas Courtney, in fair physical condition, with the following history:- No consanguinity nor heredity: Patient addicted to use of alcohol: First symptoms of insanity manifested Nov. 25' 1900 by crying, praying & imagining that someone was about to do him bodily injury: Disease appears increasing: Is variable: Derangement now manifested by melancholia & fear: Is disposed to harm others: No filthy nor destructive habits: No peculiarities previously manifested: No severe diseases nor injuries to head: Has been confined in village lock-up with guard, since Nov. 28th. under restraint & sedative treatment. On personal examination looked melancholy & cried. On admission, but upon B3 E (G.H.N. Rpt. Complexion light: Hair dark brown; eyes gray: Skin in good condition: Large scar on back of R. hand & thumb: Old fracture of thumb not united Large scar on calf of L. leg. Small wound on back: Is clean: 1 tooth out & 1/2 broken off. Behavior good: Exam. M.J. Fahey.)

" " Received in Ward B3. Patient given bath: seems much confused: answers questions
4 quite readily: is rather depressed. Dec4. Says "he did wrong & that was why I was
8 sent here" - Assists onward, and now seems more contented. Dec8. Talks more rationally
14 and is less depressed - Dec14. - (6 day records) - "No special change noted -
1901 Jany 14 Wt 180# Pyr. Says "he is praying to be saved"; "that he frequently hears people
31 talking to him, day and night, but he cannot see them". Jany 31 No further
Febys 28 Change to report - Febys. Keeps in quite good physical condition. Feb28. Patient is
Mar 27 well-behaved: works onward: Shows mental improvement - Mar27. Transferred to A'.
Jul 31 Has been worrying over death of his wife. Thinks this was, perhaps, Cause of mental
Aug 15 condition. Aug 15 Was sent home.

Discharged

Personal and Medical History of

Personal and Medical History of Barney Breen

Whole No. 5713

Residence, Gifford, Wabasha Co. Minn. Became a resident of State & Co. 26 yrs. ago.

Date Admission, December 7. 1900.

Admitted by Dr. E. Z. Warners hour,

How Sent, M. Kennedy Jailer Wabasha Co.

Sex, male Age, 26.

Civil Condition, Single.

Children, — Age Youngest Child, -

Occupation, Farmer.

Degree Education, Common school.

Profession of Religion, Roman Catholic

Habits, Not intemperate.

Nativity, Minn. (Parents born in Ireland)

Physicians Committing, L. E. Claydon & E. R. Watson

Correspondents, Michael Breen. Zumbro Falls, P.O. Minn.

No. for Year, 76.

Insane Relatives, None.

Cause Exciting, Probably due to injury.

Cause Predisposing, Unknown.

Form, Ac-Melancholia

Accompanying Bodily Disorder, None mentioned

Suicidal or not, not.

Date of this Attack, 1st

Duration, 1 mo. 1 wk.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 26 yrs.

Time of Leaving, March 29 — 1901

Time in Hospital, 3 mos — 20 ds

Result, Recovered — Discd Apl 30/1901

Examination on Admission by Dr. E. Z. Warners *Date of* Dec 8/1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused & Sluggish

MEMORY, Past Events, Defective

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State, appreciates condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed

DELUSIONS, Systematized, of persecution & poisoning ~~Transitory,~~

Special Subjects,

HALLUCINATIONS, of hearing

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Living

Paternal Relatives, no hist. of Ins.

Mother, Living?

Maternal Relatives, no hist. of Ins.

Brothers and Sisters, 1 Bro. dead

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

2 years ago, fell out of lumber wagon, struck his head.

HABITS, Drinking and Smoking, Excess

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches

OCCUPATION, Healthy or not, Farmer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Irregular Appetite, good Bowels, Constipated

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, apparently poor

WOUNDS, Abnormalities, No Condition of Skin, browned, sluggish anaemic

TONGUE, Coatings, Promptness of Movement, clean, reddish

PUPILS, Equality, Eq. Size, Normal Response to Light, norm. Accommodation, norm.

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, "

COORDINATION, Arms, normal Legs, Normal Standing on one foot, unsteady Grasp, " eyes shut somewhat " "

TREMORS, Hands, Yes Tongue, Yes Facial Muscles, Yes General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, " Hesitating, Yes Slow, Yes

FACIAL EXPRESSION,

HEART, Regularity, irritable

Strength, Sounds, Quite loud

Size, normal

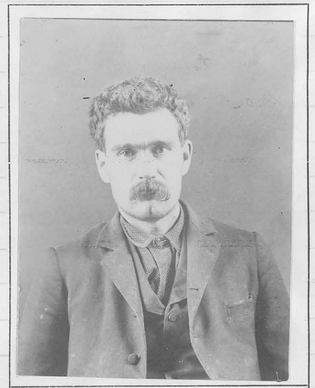
Apex Beat, "

Murmurs, None noted

ARTERIES, full

LUNGS,

Chest Symmetry, Sym.
Expansion fair
Breath Sounds, Normal



Sensibility,

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient seems languid and desirous of remaining in bed. At times, becomes very much disturbed & pugnacious. Thinks the nurses are his enemies, persecuting him. Is very delusional. Says "the people tried to poison him." Physically is Anemic & Emaciated. Is a masturbator. Condition is one of Melancholia, with delusions of persecution.

Personal and Medical History of Barney Breen.

1900

This patient was brought here by Sheriff G.G. Dickman attended by Fred Knapp in poor physical condition with the following history:- No consanguinity, heredity nor intemperance in family. First symptoms of insanity manifested Nov. 1st 1900 by delusions of persecution & loss of memory. Disease appears increasing. Is variable (worse nights) Derangement now manifested by thinking friends plot against his life. Not disposed to injure anyone. No filthy nor destructive habits. No peculiarities previously manifested. Two years ago fell from a wagon striking on head. Has never been confined nor restrained & no treatment pursued. On personal examination has delusions of sexual disease & persecution. is despondent.

Decy On admission, put upon S.D.E. (G.H.U. Ret. Complexion dark. hair black eyes brown. Skin in good condition. Is clean. One tooth gone from each lower jaw. Behavior good. Exam. by Drs Howe & Moore

" " Received on Ward. T 100. P 100. Is rather depressed & troublesome. Has "Spells" when he becomes

10 very much excited, but these last only a few minutes, at a time. Dec 10. During "Spell"

28 attacked nurse. Dec 28. Given clothes — Jany 1/1901. Transferred to D.S.3.E. Wt 131#. Bbs.

1901 Jany/ Is well behaved: answers questions hesitatingly — Jany 8. Given Electrical treatment

Febys Wt 137#. Patient is quiet: rather indifferent: no apparent delusions. Mar 13 Transferred to A.

Mar 13/ Seems more cheerful and is anxious to go home. March 26. Transferred to A.3

" 26 Visited by Brother and Taken home.

Discharged

Personal and Medical History of

Personal and Medical History of Conrad Stucky.

Whole No. 5714

Residence, Dodge Co. Minnesota.

Date Admission, December 7' 1900

Admitted by Dr. E. J. Parcons hour, 3 P.M.

How Sent, T. J. Hunt & aft. Dodge Co.

Sex, male Age, 60

Civil Condition, single

Children, — Age Youngest Child,

Occupation, Farmer.

Degree Education, Common school.

Profession of Religion, Catholic.

Habits, Not intemperate.

Nativity, Switzerland. (Parents born in Switzerland.)

Physicians Committing, C. L. Chambers & E. J. Brown.

Correspondents, George Stucky. Mantorville, Minn.

No. for Year, 77.

Insane Relatives, none.

Cause Exciting, unknown

Cause Predisposing, "

Form, Senility

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not.

Date of this Attack, Nov 4 1900

Duration, 9 mos.

No. of Attack, 2nd

No. of Admission, 2nd

Age First Attack, 55 yrs.

Time of Leaving, August 15 — 1901

Time in Hospital, 9 mos - 8 ds

Result, Improved — Discharged by Board of Control — May 26 - 1902

Examination on Admission by Dr. Dr E. J. Parcons *Date of* Dec 8/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events, Impaired

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather indifferent

DELUSIONS, Systematized, yes Transitory,

Special Subjects,

HALLUCINATIONS, hearing

ILLUSIONS, yes

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead: Tuberculosis

Paternal Relatives, no hist. of this.

Mother, Dead: Insane

Maternal Relatives, "

Brothers 4 and Sisters 6, all dead

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Umbilical hernia

Left inguinal hernia

HABITS, Drinking and Smoking, to excess

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Farmer

Detail Date, Duration, and Character of Previous Attack, if any,

5 years ago

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of

original with Service committed indorsed has returned & D J Hunt Sh. Dodge Co 3/26/1901.

M Conrad Stucky

Copy of Order for Hearing Petition of George Stucky for appointment of a Guardian for Conrad Stucky as guardian for Insane, an Inmate of this Hospital insane; served and service admitted 25th March 1901. Hearing for Apl 9/1901. at Court House Mantorville Minn

(Papers filed with commitment papers.)

no copy received

RACTERISTICS.

USUAL WEIGHT, NUTRITION,

Condition of Skin, sluggish

nse to Light, no. Accommodation, sluggish

ormal Grasp, " Standing no unsteadiness, steady Eyes shut "

TREMORS, Hands, marked Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, yes Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irregular

Strength, Sounds, irregular

Size, normal

Apex Beat, normal

Murmurs, none noted

ARTERIES, hardened

LUNGS,

Chest Symmetry, Sym.
Expansion Poor
Breath sounds normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair.

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient appears rather indifferent to his surroundings. Says his neighbors are troubling him; that they come around his house, at night. Is hallucinatory and, when alone, goes through various gestures, as if talking to some one. Patient was committed here about 5 years ago, with a similar history. Physical condition is generally sluggish, though fairly well nourished.—

Personal and Medical History of Conrad Stucky.

Whole No. 5714

Residence, Dodge Co. Minnesota.

Date Admission, December 7, 1900

Admitted by Dr. E. J. Parcons hour, 3 P.M.

How Sent, T. J. Hunt Sheriff Dodge Co.

Sex, male Age, 60

Civil Condition, single

Children, — Age Youngest Child,

Occupation, Farmer.

Degree Education, Common school.

Profession of Religion, Catholic.

Habits, Not intemperate.

Nativity, Switzerland. (Parents born in Switzerland)

Physicians Committing, C. L. Chambers & E. J. Brown.

Correspondents, George Stucky. Mantorville, Minn.

No. of Attack, 2nd

No. of Admission, 2nd

Age First Attack, 55 yrs.

Time of Leaving, August 15 - 1901

Time in Hospital, 8 mos - 8 ds

Result, Improved -

Discharged by Board of Control — Feb 26 - 1902

Examination on Admission by Dr. Dr. E. J. Parcons *Date of* Dec 8/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events, Impaired

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, Poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Rather indifferent

DELUSIONS, Systematized, Yes Transitory,

Special Subjects,

HALLUCINATIONS, Hearing

ILLUSIONS, Yes

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead: Tuberculosis

Paternal Relatives, no hist. of this.

Mother, Dead: Insane

Maternal Relatives, "

Brothers and Sisters, 4 all dead 6

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Umbilical hernia

Left inguinal hernia

HABITS, Drinking and Smoking, to excess

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Farmer

Detail Date, Duration, and Character of Previous Attack, if any,

5 years ago

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3½ PRESENT WEIGHT, 148½ USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, R. leg has been broken Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, Coated

PUPILS, Equality, Eq. Size, Small Response to Light, No. Accommodation, Sluggish

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good ?

COORDINATION, Arms, Normal Legs, Normal Grasp, " Standing on one foot, steady Eyes shut "

TREMORS, Hands, Marked Tongue, Facial Muscles, General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Yes Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irregular

Strength, Sounds, irregular

Size, Normal

Apex Beat, Normal

Murmurs, None noted

ARTERIES, hardened

LUNGS,

Chest Symmetry, Sym.
Expansion Poor
Breath sounds Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Fair.

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient appears rather indifferent to his surroundings. Says his neighbors are troubling him; that they come around his house, at night. Is hallucinatory and, when alone, goes through various gestures, as if talking to some one. Patient was committed here about 5 years ago, with a similar history. Physical condition is generally sluggish, though fairly well nourished.-

Personal and Medical History of Conrad Stucky

1900.

This patient was brought here by sheriff's deputy J Zucker attended by Fred Burdette in fair physical condition, with the following history:- No consanguinity, heredity nor intemperance in family: first symptoms of insanity manifested in Aug. 95. Was in this Hospital from Aug 5th 95 to Feb 18 97. See Vol. 31, Fol 185 No. 4174.) First symptoms of present attack manifested Dec. 4th attacked hired man with a knife Disease appears increasing: Is variable: Derangement now manifested on subject of religion principally. Threatens neighbors No filthy nor destructive habits: No peculiarities previously manifested: No severe diseases nor injuries to head sustained: No confinement nor restraint employed: no treatment pursued.
No further particulars noted on personal examination.

Dec 7 On admission put upon B3 C. (Ward Kept. Complexion dark: hair black: eyes blue: Skin in good condition. R. leg deformed below knee. Scars on forehead, back of neck, left hip. & R. instep. Is dirty: 2 teeth gone from lower jaw. only 7 left in upper. Behavior good. — Exam No. 3 Safety)

" " Received on B3 Ward. Quiet, well behaved: shows delusions & hallucinations of hearing. For some nights after admission, rested poorly: sleeping only about 5 hours, nights: later, began resting & sleeping much better: made no complaints. Neat in habits. Did a little work outward.

20 (14-day record up). Patient is well-behaved: Goes about talking to himself: Is quite rational on most subjects. Thinks he hears his relatives talking to him, at night:

1901 Jany 31 Wt 138#. P88 — Jany 31. No change noticeable: (visited by friends & relatives Jany 28)—

Feby 28 " 135#. P80. Feb 28. Is talkative: talks to himself. March 29 Transferred to A1 —

Apl 30 Had some Stomach trouble: treated & improved: July 1st. Visited by friends. July 31. Mental

Jly 31 condition seems somewhat improved. Is anxious to return to his farm. Health quite good.

Aug 15 Wt 146#. Aug 15. Very agreeable: habits cleanly: works well outward: Talks a good deal to himself. Physical condition good: Taken home, today, by friends. ———

Discharged

Personal and Medical History of

Personal and Medical History of Burnett Collins.

Whole No. 5716
Residence, St. Paul Minnesota
No. for Year, 79.
Insane Relatives, none.
Cause Exciting, Injury from fall + Sunstroke
Cause Predisposing, unknown.
Date Admission, December 11' 1900
Admitted by Dr. E. J. Wanous hour, 7 30 P.M.
Form, Senile Dementia
How Sent, E. W. Bazille & ap't. Ramsey Co.
Accompanying Bodily Disorder, Sunstroke, injury from fall. erysipelas.
Sex, male Age, 67 yrs.
Suicidal or not, not.
Civil Condition, married
Date of this Attack, June 1' 1900.
Children, five Age Youngest Child,
Duration, 6 mos.
Occupation, Park Superintendent.
No. of Attack, 1st
Degree Education, Common school
No. of Admission, 1st
Profession of Religion, Catholic.
Age First Attack, 67 yrs.
Habits, Quite intemperate.
Time of Leaving, Feb. 3' 1901.
Nativity, Ireland. (Parents also born there)
Time in Hospital, 1 mo. ~~2 mos.~~ 3 da.
Physicians Committing, W. Y. Richeson + E.N. Whitcomb
Result, Died. Senile Dementia.
Correspondents, Mrs Burnett Collins 784 Rondo St. St. Paul, Minn. (wife)

Examination on Admission by Dr. Wanous *Date of* Dec 12/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Sluggish
MEMORY, Past Events, Poor
Recent Events, Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull
REASONING POWER, Ordinary Subjects, Poor
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, rather depressed
DELUSIONS, Systematized, Regarding property Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead
Paternal Relatives,
Mother, Dead
Maternal Relatives,
Brothers and Sisters, 13 – Nothing known of condition
Children 7 Boys 8 Girls –
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, headaches
OCCUPATION, Healthy or not, Farming
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, Poor Appetite, poor Bowels, irregular

Personal and Medical History of Burnett Collins

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 in PRESENT WEIGHT, 124 lbs. USUAL WEIGHT, NUTRITION, Poor.
WOUNDS, Abnormalities, No. Condition of Skin, anaemic
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, normal Response to Light, Sluggish Accommodation, Sluggish
SIGHT,
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Impaired vision
HEARING, Deaf
COORDINATION, Arms, somewhat uncertain Legs, do Mother ~~Grasp~~, unsteady –
TREMORS, Hands, Tongue, Facial Muscles, General,
PATELLAR REFLEX, Other Reflexes,
ARTICULATION, Slurred, Hesitating, Yes Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity,
Strength, Sounds, Weak, hardly perceptible
Size,
Apex Beat, Displaced down & out
Murmurs, None noted
ARTERIES,
Sclerotic
LUNGS,
Chest Symmetry; Dyn: Expansion poor
Breath sounds normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Poor.
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

This patient's trouble is due this senility. Thinks people want to take away his property and that they have been trying to get him out of the way.

Physically, is emaciated; appears quite nervous; quite unsteady & weak.

Personal and Medical History of Burnett Callins.

1900

This patient was brought here by Sheriff's deputy Hanson in poor physical condition with the following history:- First symptoms of insanity manifested June 1st 1900. Disease appears increasing: Not variable: Derangement now manifested seemingly by approaching senile dementia: are subject of finance & by disconnected ideas. Is not disposed to injure anyone: habits not filthy. is inclined to be slightly destructive. No peculiarities previously manifested. No confinement nor restraint employed: no treatment pursued. On personal examination is weak & trembling, pale. enumbles incoherently.

Dec 11 On admission, put upon B³ E. (G.H.N. Rpt. Complexion light: hair gray: eyes blue: Condition of skin fair: Two sores on L. lip: Is dirty. 2 teeth remaining in upper jaw & one old stump - rest gone. Is nervous & excited but behavior good. Exam. by M. J Raheny)

" " 1901 Received on Ward: fullfeber: must be fed by nurses; is badly constipated: requires frequent

Jany 6 Enemas. Mentally, patient is stubborn and causes trouble: Jany 6 1901. Much inclined to

" 31 pick bed-clothing; is very feeble & demented: filthy. Jany 31. Patient had a "sinking fitt" from

Feby 1 which he recovered - Feby 1. Refused nourishment; is gradually failing. ——

" 3 Died at 11 30 Am.

Died -

Personal and Medical History of James Rogan

from 284.

Nov was quite anxious to know what his sentence would be.
Further investigation proved him to be "not insane" ——

" 24 Taken out by Sheriff ——

Discharged

Personal and Medical History of Frank Rouleau

Whole No. 5717

Residence, St. Paul. Minn.

Became Resident of State at Birth. of County. Same

Date Admission, December 15th 1900.

Admitted by Dr. L. L. Chapple hour, 7:30 P.M.

How Sent, E. W. Bazille. Jof C. Ramsey Co.

Sex, Male Age, 28

Civil Condition, Single

Children, Age Youngest Child,

Occupation, Railroad - Clerk

Degree Education, College Graduate

Profession of Religion, Catholic

Habits, Uses to Excessive Smoking

Nativity, St. Paul. Minn. Father Canada

Physicians Committing, J. F. Baker M.D. Morton Vermont and O. W. Archibald M.D.

Correspondents, Mrs E. M. Rouleau (mother) 211 Fuller St St Paul

N. J. Rouleau (Brother) Same address.

No. for Year, 80

Insane Relatives, None

Cause Exciting, Alleged excessive smoking

Cause Predisposing, Probably bad habits

Form, Melancholia Chr.

Accompanying Bodily Disorder, None Mentioned

Suicidal or not, Not

Date of this Attack, 2 years ago

Duration, 2 years

No. of Attack, 1

No. of Admission, 1

Age First Attack, 26

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Ramous *Date of* Dec 13/1900.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events, Marked loss of memory

Recent Events, " " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, Impaired

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed

DELUSIONS, Systematized, People working against him Transitory, Yes

Special Subjects,

HALLUCINATIONS, Yes

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead: Kidney trouble

Paternal Relatives, no history of Insanity.

Mother, Living: well

Maternal Relatives, no history of Insanity.

Brothers and Sisters,

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

Syphilis, 4 years ago. Mastoid trouble since 2 years ago: lung fever 15 years.

HABITS, Drinking and Smoking, Excess

HEADACHES, VERTIGO, OR CONVULSIONS, Recently Headache

OCCUPATION, Healthy or not, R. R. Clerk

Detail Date, Duration, and Character of Previous Attack, if any,

Has had attacks of depression for several years.

Sleep, Poor Appetite, Poor Bowels, Irregular

Personal and Medical History of Frank Rouleau

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9½ PRESENT WEIGHT, 173½ lbs USUAL WEIGHT, NUTRITION, Poor

WOUNDS, Abnormalities, mastoid operation Condition of Skin, anaemic

TONGUE, Coatings, Promptness of Movement, Coated and fissured

PUPILS, Equality, Equal Size, large Response to Light, Slow Accommodation, Slow.

SIGHT, Blurred.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Deaf in right ear

COORDINATION, Arms, Normal Legs, Normal Other tests, Grasp, readily & steady

TREMORS, Hands, Yes Tongue, Yes Facial Muscles, Yes General,

PATELLAR REFLEX, Exaggerated Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irritable, rapid

Strength, Sounds, Weak

Size, Normal

Apex Beat,

Murmurs, None noted

ARTERIES,

flabby

LUNGS,

Chest Symmetry: Sym.

Expansion: Poor

Breath Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Irregular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

This Patient is depressed & melancholic; cried during examination. thinks people have been working against him, especially railroad men. Says "people tried to make him marry a woman, that he did not want to marry". He had trouble with a girl in Milwaukee" Delusions are transitory. Condition is due to general physical weakening & worrying about his ear trouble.

Personal and Medical History of *Frank Rouleau*

1900

This patient was brought here by Deputy-Sheriff H. Hanson attended by H. J. Rouleau, in fair physical condition, with the following history. First symptoms of this attack manifested 2 years ago, by hallucinations and delusions. Disease is increasing; is variable, with rational intervals, but not at regular intervals. Derangement now shown in that he imagines everybody is conspiring against him. Not disposed to injure others, nor suicidal, nor of filthy or destructive habits. No insane relatives. No peculiarities previously shown, and no history of severe disease or no restraint or confinement has been employed. Usual Treatment has been given. On personal Examination, there appears depression and he shows an anxious appearance.

Dec 1st On admission, put upon B³ E. (G. H. N. R'y. Height 5-9½. Wt: 123½: Complexion dark: hair black: eyes brown: condition of skin good: marks from operation on right ear: a peculiar scar on the bottom of each foot. Is clean. As to teeth, one gone, left upper. Remainder with good condition - Behavior good. Dr. by M. J. Fahey.) - See letter Jany 2/01 of Dr. J. W. Bottinger, on file: last October he suffered from acute exacerbation of a chronic sup. of middle ear, of 25 years standing; after a few days the acute symptoms subsided somewhat and I operated Oct 30th - Mastoid operation - found a great amount of granulation tissue + dead bone; curetted it as thoroughly as possible + he made a good recovery from operation + was doing very nicely when he left. He has had no pain or other symptoms referable to ear, since the operation" -) Received on Ward: Patient is given bath: appears somewhat depressed + retiring: seems quite nervous + easily excited - (Is of a neurasthenic type) - frequently asks to go home. -

" 25 14 Days recd up - "Think people are making fun of him when working." "That was why he quit". Has had suppurating mastoid abscess, which was operated on before coming here - Complains of sore feet. Transferred to IW: two horny growths removed from plantar fascia.

1901 Jan 10 Is now up + about - Jan 21 Transferred to B³. Jany 31. No change noted in mental

13/31/31 condition of patient. Febys. Wt 119# 9/6. Apl 30. Patient worries because of confinement

Febys Apl 3 Easily excited + becomes very angry. July 31. Patient shows some improvement. Augs. 119#

Aug 21 to Sept 2. Was out Camping at Norwood. Has continued to make improvement.

Sept 10/96 Was sent home. Sept 26. Was returned from home: seems rather stubborn + talks

Decro to himself. Dec 20. Has gone out to work at store-room: has been, however, at times

1901 Jany 31 quite excited + troublesome - Jany 31/01. Has improved somewhat in behavior, but is becoming more restless - Feb. 1/02. 118#. Has been working a good deal in store room. Is restless + uneasy. May 27/02 Patient becoming more + more restless. Talks + mutters to himself. May 28/02 Eloped. May 29/02. Came back of his own accord, having lost his way.

Jan 14/03. Patient has been kept on ward since his return. Asks daily to go home. Otherwise quiet: has had a small abscess on the bottom of his foot recently.

Personal and Medical History of

Personal and Medical History of Robert Elmstrom

Whole No. 5718

Residence, Washington County.

Date Admission, 12th December 1900.

Admitted by Dr. C. L. Chapple hour, 7.30 Pm.

How Sent, Frank T. Wilson, J. of P. Washington Co.

Sex, Male Age, 21

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Clerk in Store

Degree Education, Common School

Profession of Religion, Lutheran

Habits, no history of intemperance

Nativity, Scandia, in said County. (Parents born in Sweden)

Physicians Committing, W. C. Wright M.D. J. H. Haines M.D.

Correspondents, Mrs Malena Elmstrom (mother) Scandia, Minn.
Andrew Dolin (Brother in Law) Scandia, Minn

No. for Year, 81

Insane Relatives, unknown

Cause Exciting, unknown

Cause Predisposing, previous attack

Form, Periodical Recurrent acute

Accompanying Bodily Disorder, None mentioned

Suicidal or not, Has spoken of killing himself

Date of this Attack, 2 months ago.

Duration, - 2 months -

No. of Attack, 2nd (one, 5 years ago.)

No. of Admission, 1

Age First Attack, 16 years

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Manous *Date of* Dec 13th 1900

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good
Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Rather alert

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

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
somewhat depressed

DELUSIONS, Systematized, Transitory, Yes
Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead

Paternal Relatives, no history of Insanity

Mother, living

Maternal Relatives, no history of Insanity

Brothers and Sisters, 4 all well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Jaundice, 5 years ago.

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Clerk

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, good Bowels, irregular

Personal and Medical History of Robert Elmstrom

Patient leaves "scrap" like this quite often in the office
June 5/01

3-4

Centre Dist.

Cassadaga

State Prison

Dept of Wars

PHYSICAL CHARACTERISTICS.

ESENT WEIGHT, 149 lbs. USUAL WEIGHT, NUTRITION, fairly nourished

Condition of Skin, oily

f Movement, Coated: tongue large

Size, Dilated Response to Light, Normal Accommodation, None!

nal

Senilis, or other troubles,

rmal Legs, Normal: other tests Grasp, readily & steady.

Tongue, fine Facial Muscles, General,

rmal. Other Reflexes,

Hesitating, Slow, Yes

Sensibility,

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

Size, Normal

Apex Beat, "

Murmurs, none noted

ARTERIES,
flabby

LUNGS,

Chest Symmetry: Sym.
Expansion: fair
Breath Sounds: Normal

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

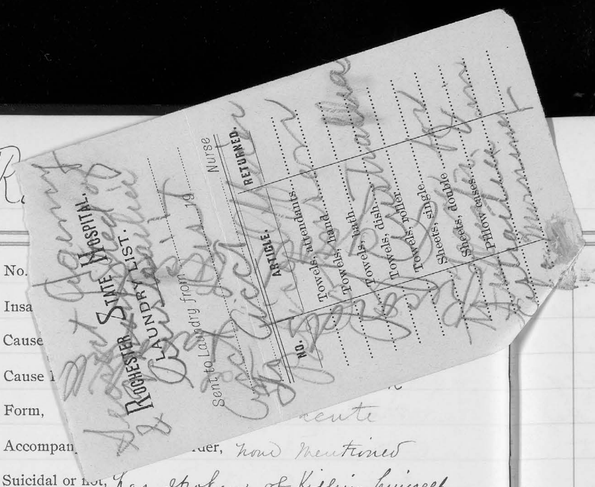
SLEEP, Present Amount and Character, good

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient appears depressed, but answers questions quite readily. Is somewhat peculiar in certain subjects and his answers are incoherent. Is rather of a neurasthenic type, which has been the cause of mild attack of Melancholia.

Personal and Medical History of R[illegible]



Whole No. 5718

Residence, Washington County.

Date Admission, 12th December 1900.

Admitted by Dr. C. L. Chapple hour, 7.30 Pm.

How Sent, Frank T. Wilson, J. of P. Washington Co.

Sex, Male Age, 21

Civil Condition, Single

Children, – Age Youngest Child, –

Occupation, Clerk in Store

Degree Education, Common School

Profession of Religion, Lutheran

Habits, no history of intemperance

Nativity, Scandia, in said County. (Parents born in Sweden)

Physicians Committing, W. E. Wright M.D., J. H. Haines M.D.

Correspondents, Mrs Valeria Elmstrom (mother) Scandia, Minn.
Andrew Dolin (Brother in Law) Scandia, Minn

No.

Insa

Cause

Cause

Form, acute

Accompan ier, None Mentioned

Suicidal or not, Has spoken of Killing himself

Date of this Attack, 2 months ago.

Duration, – 2 months –

No. of Attack, 2nd (one, 5 years ago.)

No. of Admission, 1

Age First Attack, 16 years

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Manous *Date of* Dec 13th 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quite clear –

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Rather alert

REASONING POWER, Ordinary Subjects, fair

Special Subjects, fair

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
somewhat depressed

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead

Paternal Relatives, no history of Insanity

Mother, living

Maternal Relatives, no history of Insanity

Brothers and Sisters, 4 all well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Jaundice, 5 years ago.

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Clerk

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, good Bowels, irregular

Personal and Medical History of Robert Elmstrom

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9¼ PRESENT WEIGHT, 149 lbs. USUAL WEIGHT, NUTRITION, fairly nourished

WOUNDS, Abnormalities, – Condition of Skin, oily

TONGUE, Coatings, Promptness of Movement, Coated: tongue large

PUPILS, Equality, Equal Size, dilated Response to Light, normal Accommodation, none?

SIGHT, normal

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good.

COORDINATION, Arms, normal Legs, normal: other tests Grasp, readily & steady.

TREMORS, Hands, fine Tongue, fine Facial Muscles, General,

PATELLAR REFLEX, normal. Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow, Yes

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, rapid

Strength, Sounds, weak

Size, normal

Apex Beat, "

Murmurs, none noted

ARTERIES,
flabby

LUNGS,
Chest Symmetry: Sym.
Expansion: fair
Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient appears depressed, but answers questions quite readily. Is somewhat peculiar in certain subjects and his answers are incoherent. Is rather of a neurasthenic type, which has been the cause of mild attack of Melancholia.

Personal and Medical History of Robert Elmstrom

1900

This patient was brought here by Deputy Oscar Anderson, attended by Andrew Dalin, in fair physical condition, with the following history. This is not 1st attack: had one 5 years ago, in mild form; duration 2 years: was treated by local physicians, and apparently cured. First symptoms of this attack manifested 2 months ago. Disease is increasing. He shows fears of bodily injury at hands of others. Is restless: incoherent talk at times. Is sleepless. Is not disposed to injure others. Has not attempted suicide, but has spoken of killing himself. No filthy or destructive habits. As to insane relatives, unknown. No peculiarities previously manifested. No history of intemperance or severe disease. Has not been restrained or confined. If under any treatment, unknown. He needs care & treatment, while under restraint.

Dec 19 On admission, was put upon B[3] E. (G. H. R. Rpt. Height 5.9¼: Wt 149 lbs: Complexion light, hair, light brown, eyes blue. Condition of skin good: scars on right leg, just above knee. Is clean. Teeth: one gone in left upper, and r. left lower, few. Is inclined to be stubborn. (Sc. by M. F. Fahey) - See letter on file, from Mrs Malina Elmstrom, dated Dec 19/1900: "anything wrong with him was first noticed 5 years ago, (when he had the "yellowvanes"): seemed to get over it alright, but a little afterward, he started to worry: said "something told him that it should grow long hair all over his body". Became anxious, and I took him to a Doctor, but he did not seem to do him any good: tried another one, Dr. Stevens, at Lake Elmo. After a while, he said "he was well" & continued until this Summer, in August, it broke out again. I have tried 3 Doctors, but there was no way to get him to take medicine & (1) his bowels are all dried up. (2) he seemed to freeze, when others would sweat; (3) he always kept thinking to himself; sometimes cry & sometimes laugh: said "there were voices told him what to do or not to": whenever he would say anything, it was always something wrong: sometimes he would say he was a "Captain": another time a "lawyer", there was always something great about it, & sometimes he would say "he had a large amount of money coming to him". Was thinking of getting a Patent on a boat or ship &, in July, he found it in the Paper that it was already made by some one else, & I believe that was what broke him down. He worked in a grocery store & he claims that he got over heated one day & another thing was he smoked so much. And the most he seemed to worry over was that he thought he changed in color, both in face & hair: Sometimes he would say he was black, sometime red, & so on." — — — — — —

" " Received on Ward: given bath: expresses various peculiar ideas. Is well-behaved. Says "his Employers wanted to make him manager" - Dec 17. Tried to elope. Dec 25. 14 days record up. no change to note. Dec 29. Attempted to elope while at walking - Jany 1/01 - 143 lbs. Bo
Jany 31 1901 No change to report. Feby 1. Wt 143 lbs. P80. Mar 10. Manifests no delusions.
Mar 10 " Seems anxious to get away. Mar 15. Visited by brother. Apl 30 No change
Apl 30 " Specially to report, in patients' Condition. - May 1. Wt 137 lbs. May 15: have sent to B[7]: habits tidy: works onward: habits good: bowels & urine regular: behavior good, but watches opportunities to run away. Still somewhat confused & delusive.
June 30 " Same as above. July 15. Attempted to elope from crowd. July 31. Condition
July 31 " the same: health good: habits neat & clean: assists with work on the ward.
Aug 1 " Wt 144 lbs: Nov 1 Wt 146 lbs: Jany 31/02. Little change in condition: talks considerably to
1902 himself: is quite irrational & incoherent in speech: habits tidy: works onward and about
Jany 31 " building: does not cause any trouble. Takes little interest in anything.

Personal and Medical History of Robert Elmstrom

Feb 1/02 Wt 146 lbs; June 8 Has been quite well behaved - worked in dining-room - well behaved. Eloped to day; Went to Owatonna. June 9 Returned.
Nov 1 Wt 145 lbs.
Jan 31 '03 Still works in C.D.R.; incoherent & silly; listless in manner.

Personal and Medical History of *Eugene Adams*

Whole No. 5719.

Residence, Verona, Faribault Co.

Date Admission, 13th December 1900. (Comtd 7th Dec. 1900)

Admitted by Dr. L. L. Dafoe hour, 8 45 P.M.

How Sent, Harry L. Cullis, Jeff. Faribault Co.

Sex, Male Age, 72

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School.

Profession of Religion, not a church member

Habits, Excessive Tobacco-user: unclean

Nativity, Connecticut: parents also born there.

Physicians Committing, F. L. Durgin & A. J. Hammond

Correspondents, with reference to this case, address.

Geo. Adams, Huntley: F. T. Moore Winnebago City, Minn

No. for Year, 82.

Insane Relatives, none, as far as known

Cause Exciting, Tobacco in excess & "hermit habits" &c

Cause Predisposing, " "

Form, Senile Dementia

Accompanying Bodily Disorder, great weakness & exercise, no control on sphincters

Suicidal or not, Not

Date of this Attack, 1 yr. 2 mos.

Duration, 1 yr. 2 mos

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 71

Time of Leaving, Jan. 2 1901.

Time in Hospital, 19 da. (in St)

Result, Died Interstitial Nephritis.

Examination on Admission by Dr. Wanous *Date of* Dec 14/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events, Poor

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, Poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed

DELUSIONS, Systematized, Thinks he was poisoned. Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead: rheumatism

Paternal Relatives, none known

Mother, Dead

Maternal Relatives, None known

Brothers 1 and Sisters 3, well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, no (?)

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, farming

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, Constipated

Personal and Medical History of *Eugene Adams*

PHYSICAL CHARACTERISTICS.

HEIGHT, —— PRESENT WEIGHT, —— USUAL WEIGHT, NUTRITION, Poor

WOUNDS, Abnormalities, Hacked both legs broken above ankles. Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, Coated: fissured.

PUPILS, Equality, equal Size, Normal Response to Light, Slow Accommodation, Slow

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Deaf

COORDINATION, Arms, very unsteady Legs, Grasp,

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, weak

Size, normal

Apex Beat, "

Murmurs, None noted

ARTERIES,

Sclerotic

LUNGS,

Chest symmetry: Sym.

Expansion: Poor

Breath sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearauce,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The Patient is in bed. It is very difficult to obtain any information, because of his defective hearing. Says "he thinks people want to poison him" as he could not eat the food at home." Apparently, has been worrying a great deal. Physical condition appears good.

Personal and Medical History of *Eugene Adams*

1900

This patient was brought here by Sheriff Sandy McDonald and F. J. Anderson, in poor physical condition, with the following history. First symptoms of insanity manifested one year ago, last October; wandered off and was found unconscious; disease is increasing, variable, with rational periods; starts to talk rationally; suddenly wanders off. Derangement now shown on every subject: at times, does not recognize members of his own household; exercises no control over sphincters. Is not disposed to injure others; not suicidal; habits somewhat filthy; no history of insanity in relatives, as far as known: no previous peculiarities shown: he chews tobacco to excess: no severe disease or head-injury: has not been restrained or confined, but watched. Supposed cause of the disease is his having "batched" for years, irregular habits, uncleanliness, and excess of tobacco: only ordinary care by way of treatment, given him. On personal examination, it is found to be a case of Senile Dementia. —

Dec 13 On admission, was put upon T.E. (G. H. N. R'ft. Complexion light; hair gray; Eyes gray; Condition of skin poor: body, covered with light-colored spots resembling scars: both legs have been broken below, just above the ankles; several small abrasions at base of spine: large discolored spots on right side of spine, in middle of back: feet and legs swollen. Is sixty. Teeth all gone, except one old stump in upper right jaw. Behavior good. He is very weak. (Sgd: by E. Moore & H. Case) —

" " Received on ward: Given bath & put to bed: seems very weak & unsteady: much confused-
18/23 and sluggish: bowels constipated. Dec 18. Given clothes & up on ward. Dec 23. Fell, while in
28 closet, bruising nose & causing small cut. Dec 28. Seems quite weak & very unsteady, and
30 has to be fed by nurses. Dec 30. Patient has bruise on left hip, caused by falling
1900/1901 Jan 1 out of bed. Jany 1/1901. Is rapidly failing: refuses nourishment. ——
2 Died at 8 PM.

Died

Personal and Medical History of

Personal and Medical History of Thomas Bradley

Whole No. 5720

Residence, Cherry Grove Twp. Minn.
Became resident of State of Minn. in 1863.

Date Admission, 18th December 1900

Admitted by Dr. C. L. Chapple hour, 7 30 PM.

How Sent, Axel Haller, Jof P. Goodhue County

Sex, Male Age, 41

Civil Condition, Single

Children, None Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School.

Profession of Religion, Catholic

Habits, not intemperate

Nativity, Lowell, Mass: father, Ireland, Mother, Ireland

Physicians Committing, J. O. Anderson & A. W. Jones

Correspondents, None given

Information & Proof of Residence made by Jas. E. Bradley, of County of Goodhue, Minn

No. for Year, 83.

Insane Relatives, None

Cause Exciting, not known

Cause Predisposing, not stated

Form, Chronic Melancholia

Accompanying Bodily Disorder, None mentioned

Suicidal or not, not

Date of this Attack, about 10 years ago

Duration, about 10 years

No. of Attack, 1

No. of Admission, 1

Age First Attack, 31 (about)

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. Manous *Date of* Dec 19/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused, at times

MEMORY, Past Events, Impaired

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Illusive

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather indifferent

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead: don't Know cause

Paternal Relatives, no history of Insanity

Mother, Living

Maternal Relatives, no history of Insanity.

Brothers 2 and Sisters 3, all well

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
no sickness: Masterbator

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, farmer

Detail Date, Duration, and Character of Previous Attack, if any,

no

Sleep, irregular Appetite, good Bowels, irregular

Personal and Medical History of Thomas Bradley

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 PRESENT WEIGHT, 142 lbs USUAL WEIGHT, NUTRITION, Emaciated

WOUNDS, Abnormalities, Patient needs to be circumcised. Condition of Skin, oily; sluggish

TONGUE, Coatings, Promptness of Movement, coated; fissured.

PUPILS, Equality, Equal Size, normal Response to Light, sluggish Accommodation, sluggish

SIGHT, Good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, normal Legs, normal ~~Grasp~~, other tests quite good

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irritable

Strength, Sounds, weak

Size, enlarged

Apex Beat, ~

Murmurs, None noted

ARTERIES,

LUNGS,
Chest Symmetry; Sym
Expansion; poor
Breath Sounds; Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, Constipated.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient appears rather indifferent, but is mixed in his speech and his utterances are without meaning, as "hold a little itself, Creation itself too much killed" - "life, just held time". Physically, fairly nourished.

Personal and Medical History of *Thomas Bradley*

Personal and Medical History of

1900

This patient was brought here by Deputy P. J. Lundquist attended by A. V. Lundquist. in fair physical condition, with following history. No history of Consanguinity or Insanity. This is first attack: first symptoms manifested about ten years ago, by deluding himself, thought there was grease on his hands that he could not wash off. Disease is about stationary: is variable, but no rational intervals. Derangement now manifested by incontrolable temper and evidently acts under impression of persecution. Is disposed to injure others, but is not suicidal: no filthy or destructive habits, at present; about 9 years ago used to break windows, with his fist. No previous peculiarities manifested: no history of intemperance in patient or parents, nor of any severe disease, heading re; no restraint or confinement has been employed, but it has been considered necessary to watch him closely. Cause of the disease not known: has had very little, if any, treatment. On personal examination, the following found; rapid pulse, tongue a little tremulous, a rather suspicious air, and irritable disposition, characterized by instability, and has a weak memory.

Dec 18. On admission, was put on B^3 (G.H.N.Kpt. Complexion dark, hair black & gray; eyes blue, condition of skin fair; vaccinations (2) in left arm; small scars on left side of abdomen; is sixty; teeth in poor condition; 5 gone on left upper, one gone & 3 broken off, right upper; two gone, right lower, one gone, left lower. Behavior good. Examined by M. F. Fahey.) —

" " Received on Ward: very dull; answers questions hesitatingly. Interests himself in nothing.

" 21 Patient very restless, thought thought: comes out of room frequently: Dec 31. 14 Day

1901 Jan 1/31 record up — Jan 1/1901. 137$^{\#}$ Pso. Jan 8/1901. Even electrical treatment — Jan 31. No

Mar 31 31 change specially noted. Mar 31. Condition shows no special change. Has delusions.

May 1/31 Wt 142$^{\#}$. May 1st. Transferred to B^2: very quiet and well-behaved: has very little to do with anyone else, and rarely does any work. Is very indolent: has religious delusions. May 31 —

" 31 Scarcely any change noticeable. June 30. Is about the same. July 15. Attempted to

July 31/31 strike Andrew Orrei with chair: had to be held in floor. July 31. Condition same:

Aug 1 31 answers questions, but is very dull & indolent. Aug. Wt 142$^{\#}$: Nov 1. Wt 145$^{\#}$. Dec 19 Was

1902 Jan 31 visited by friends — Jan 31/02. No change of importance: does a little work on ward — but is quite indolent: much pre-occupied by delusions: frequently kneeling and going through the motions of prayer — rather slouchy but clean — Seems inclined to cause any trouble.

Feb. 1 Wt. 148$^{\#}$. May 1 Wt. 140$^{\#}$ Works some on ward: rather untidy in appearance; delusional; talks irrationally. Aug 1 Wt. 139$^{\#}$. Oct. 1 Visited by Priest.

1903 Jan. 31 Has been failing in physical health of late; thought to be Tubercular.

Personal and Medical History of Paul. C. Kelly.

Whole No. 5748

Residence, St Paul, Minnesota.

Became resident of State in 1891. Of County in 1891

Date Admission, 20th December 1900.

Admitted by Dr. F. J. Kilbourne hour, 7 30

How Sent, C. W. Bazille, J. of P. Ramsey County

Sex, Male Age, 23

Civil Condition, Single

Children, – Age Youngest Child, –

Occupation, Clerk

Degree Education, College education

Profession of Religion, Catholic

Habits, Drink &c. From age of seven, has been alcoholic

Nativity, Ohio: Father's, Maryland. Mother's, Ireland

Physicians Committing, O. W. Archibald & Arthur Sweeney

Correspondents, none given in papers

No. for Year, 85

Insane Relatives, None

Cause Exciting, Alcohol and Morphine

Cause Predisposing, Alcoholic since age of 7.

Form, Hallucination à Paralysis

Accompanying Bodily Disorder, None mentioned

Suicidal or not, not

Date of this Attack, about 5 years ago

Duration, Probably Continuous

No. of Attack, 1 " "

No. of Admission, 1 (at "Keely Cure" for a year)

Age First Attack, — 18 —

Time of Leaving, 26th Jany 1901.

Time in Hospital, 1 mo. 6 D.

Result, Discharged April 30/1901 – Recovered –

Examination on Admission by Dr. Ranous *Date of* Dec 21/1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear

MEMORY, Past Events, Good

Recent Events, good Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct

REASONING POWER, Ordinary Subjects, good

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Living: well

Paternal Relatives, No history of Insanity

Mother, Living; well

Maternal Relatives, no history of Insanity

Brothers and Sisters, 3 all well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Scarlet fever at 7 years of age; gonorrhoea, Morphinism

HABITS, Drinking and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Clerk

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Insomnia Appetite, Fair Bowels, Irregular

Personal and Medical History of Paul. C. Kelly

PHYSICAL CHARACTERISTICS.

HEIGHT, ✓ PRESENT WEIGHT, ✓ USUAL WEIGHT, NUTRITION, Fair

WOUNDS, Abnormalities, No Condition of Skin, Anaemic

TONGUE, Coatings, Promptness of Movement, Coated

PUPILS, Equality, Equal Size, Large Response to Light, Sluggish Accommodation, Sluggish

SIGHT, Good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, Normal Legs, Normal ~~Grasp~~, Thermesthesia good.

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, Slow,

FACIAL EXPRESSION,

Sensibility, Normal

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest Symmetry; Sym.

Expansion; Good

Breath Sounds; Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient, on examination, appears quite normal, though a little restless and nervous. Has been a heavy drinker at which time he used Morphine to "quiet him". Would lose control over himself and become destructive. Physically, is quite anaemic. –

Personal and Medical History of *Paul C. Kelly.*

1900

Patient was brought here by Deputy A. Hauson, in fair physical condition, and with following history of case. There is no history of consanguinity or insanity in parents &c. This is first attack: first symptoms manifested about 5 years ago; he then became destructive and irrational: disease appears to be increasing; variable and with rational periods: is, at times, rational, but, under the influence of alcohol and morphine, he becomes violent. Derangement now shown by destruction of furniture setting fire to bed-clothing and excessive indulgence in morphine and alcohol. He is not disposed to injure others; not suicidal: Destroys furniture and bed clothing. From the age of seven he has been alcoholic. Father drinks excessively. No mention of anyserious disease &c or head-injury. He has been restrained or confined at "Keeley-Cure" for a year. Supposed cause of the disease is Alcohol and Morphine; treatment unknown: On personal Examination, patient is apparently rational, but, at times, he is destructive, without his knowledge, and is liable to do irrational things, of which he has no subsequent knowledge.

Dec 20. On admission, was put upon I.E. [G.H.N. Rpt. Complexion dark: Hair black: Eyes dark brown; condition of skin good: pimples on back and chest; also on face; Penis discharging some; says that he has had Gonorrhoea for a year. Teeth in good condition. Behavior good. Ex^d by H.A. Cau & W^m Elvery)

" 21 Received on Ward: given bath & put to bed: appears very nervous: slept none. Dec 21. Given hot bath & Sleep-dose, at night: bowels constipated: patient has chronic gonorrhoea. —

" 22 Transferred to A1: is well-behaved: Converses freely: interests himself in games. (Condition was due to chronic alcoholism) - Jany 19/1901. Given parole of grounds.

1901 Jany 19 Patient sent home — recovered.

Discharged

Personal and Medical History of

Personal and Medical History of Geo. H. Morrow

Whole No. 5727

Residence, St Paul, Minn.

Resident of State Sept 25/98: of County Sept 25/98

Date Admission, 27th December 1900.

Admitted by Dr. A. J. Kilbourne hour, 8 P.M.

How Sent, E. W. Bazille, Jo. P. Ramsey County

Sex, Male Age, 31

Civil Condition, Single

Children, none Age Youngest Child, —

Occupation, Office - clerk

Degree Education, Academic

Profession of Religion, not a church member

Habits, not good: Taken at Keely's - (mothers, Maryland

Nativity, Philadelphia, Pa: Fathers, Chlmsford Del. and

Physicians Committing, A. W. Denning & H. Sanderson

Correspondents, None mentioned in papers -

No. for Year, 90

Insane Relatives, Father's sister & father's uncle

Cause Exciting, Hereditary & habits

Cause Predisposing, Heredity

Form, Mania à Potu -

Accompanying Bodily Disorder, None mentioned

Suicidal or not, has made frequent threats.

Date of this Attack, probably recent

Duration, probably not long this time

No. of Attack, 3rd probably

No. of Admission, 1st (Taken at St Luke's + twice at Keely's - Phila.

Age First Attack, 30 last

Time of Leaving, July 13 - 1901.

Time in Hospital, 1 mo 17 ds

Result, Discharged April 30 - 1901 - Recovered -

Examination on Admission by Dr. Mavous *Date of* Dec 29th 1900

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear

MEMORY, Past Events, Good

Recent Events, " Special Subjects, "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct

REASONING POWER, Ordinary Subjects, Good

Special Subjects, "

Own Mental State, Says "he is well".

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Normal

DELUSIONS, Systematized, No Transitory,

Special Subjects,

HALLUCINATIONS, No

ILLUSIONS, No

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead: Bright's Disease

Paternal Relatives, Sister & uncle

Mother, Dead: tuberculosis

Maternal Relatives, No history of insanity

Brothers and Sisters, All well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

No

HABITS, Drinking and Smoking, Excess: Smokes drinks

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Office work

Detail Date, Duration, and Character of Previous Attack, if any,

has had several drinking spells"

Sleep, Insomnia Appetite, good Bowels, Regular

Personal and Medical History of Geo. H. Morrow

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, No. Condition of Skin, Clear

TONGUE, Coatings, Promptness of Movement, Slight Coating

PUPILS, Equality, Equal Size, Large Response to Light, Normal Accommodation, Sense?

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good

COORDINATION, Arms, Normal Legs, Normal Grasp,

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, ~~Slurred~~, Normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, Normal

HEART, Regularity, normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest symmetry; Sym

Expansion; Good

Breath Sounds; normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Disturbed

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient appears rational & intelligent: says "his trouble arose from alcoholic debauchories". Cannot ascertain anything in examining him which would give any insane symptoms. Physically, is well.

Personal and Medical History of *Geo. H. Morrow*

1900

This patient was brought here by Deputy H. Hanson, in fair physical condition, and with following history of case. No history of consanguinity, but some of heredity, as father's sister and father's uncle have been insane. This is not first attack; others occurred in May 1899 and July 1899, duration 3 weeks and 1 week; he has been at St Luke's, and improvement made. When first symptoms of this attack manifested, is not stated; disease is gradual with increasing tendencies; is variable & there are rational intervals, occurring regularly, about every six months. Derangement now manifested by prevarication, deception and various "drug-habits". Patient is not disposed to injure others; has not attempted suicide, but has made frequent threats. No filthy or destructive habits; No marked peculiarities previously shown. Father was intemperate. There is no mention of any severe disease &c or head-injury. He has been for above periods in hospital; also four weeks attendance at "Keely's Institute" in Philadelphia. The supposed cause of the disease is hereditary & habits; treatment, as stated above. —

Dec 27 On admission, was put upon I.E. (G.H.N Rpt. Complexion dark: hair black: eyes dark brown, condition of skin good: vaccination-marks on left arm; eruptions on upper part of body: teeth, 2 gone, upper left jaw, 2 gone, lower right jaw; 2 gone, upper right. Behavior good. (Ex.ed by L.D. Page). —

1901 Received on Ward: given bath & put to bed: answers readily; seems rather nervous
Jan 2/3 and excited - Jan 2/1901. Given clothes. Jan 3. Patient works in the dinning-room -
9/11 seems agreeable & much improved mentally. Jan 11 (14 day record up) -
27/31 Transferred to A. Jan 31. Seems to have recovered both mentally & physically:
Feb 13 Given parole. Feb 13. Sent to St Paul, Minn.

Discharged

Personal and Medical History of

Personal and Medical History of William Hunter

Whole No. 5728

Residence, Northfield, Minn.

Date Admission, 31st December 1900.

Admitted by Dr. C L Chapple hour, 4.45 P.M.

How Sent, James Hunter J. of P. Rice County.

Sex, Male Age, 45 years

Civil Condition, married

Children, one Age Youngest Child, —

Occupation, Tinner

Degree Education, Common School

Profession of Religion, not a church member

Habits, used to drink to excess, 10 years ago: not drinking of late

Nativity, Canada: father's, Scotland; mother's, Canada

Physicians Committing, W.A. Hunt & A.A. Dodge

Correspondents, John Hunter (father) Northfield, Minn
% W.C. Barnard.

No. for Year, 91.

Insane Relatives, None

Cause Exciting, overheated, winter '99-'00 while as engineer

Cause Predisposing, probably drink-habits

Form, Paretic

Accompanying Bodily Disorder, None Specially Mentioned

Suicidal or not, not

Date of this Attack, June 1900

Duration, about six months.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 44 past

Time of Leaving, August 23-1901

Time in Hospital, 1 yr 7 mo 23 ds

Result, Died: Paresis (since here) - 1 yr - 8 mos

Examination on Admission by Dr. Manous *Date of* Jany 2/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Sluggish

MEMORY, Past Events, } much impaired
Recent Events, } Special Subjects, talks about a little girl that was drowned.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, poor.

Special Subjects,

Own Mental State, does not appreciate condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Apparently Depressed

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Living — well

Paternal Relatives, no history of insanity

Mother, Living — well

Maternal Relatives, no history of insanity

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

No

HABITS, Drinking and Smoking, used to drink to excess

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Engineer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Good Appetite, good Bowels, Regular

Personal and Medical History of William Hunter

Hunter Wm Jany 9/1901

Inpocket-Book in vault among other things is a paper bearing these remarks:
name - J. F. Hunter - 207 - 32nd ave Seattle Wash.
Church preference: Francis Street and Michigan ave Jackson Mich:

Remarks: Ella Hunter

ERISTICS.

WEIGHT, NUTRITION, Poor physical

Condition of Skin, sluggish + oily

ish

ght, sluggish Accommodation, slow

[illegible] fingers to nose, Eyes shut, Locomotion: Staggering on foot Grasp, cannot stand by himself Standing, eyes shut, very unstable: must be held

Muscles, Marked General, Keep from falling.

r Reflexes,

ARTICULATION, Slurred, Yes Hesitating, Yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, Normal

Size, normal

Apex Beat, Normal

Murmurs, None noted

ARTERIES, Pulse weakened

LUNGS,

Chest Symmetry - Dyn
& Pansion - Good
Breath Sounds - Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Normal

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient is very forgetful, confused & has various peculiar ideas: says "his little girl was drowned & that he had her life insured; that he has her money in the bank" - Is very incoordinate in gait & speech. The case is one of Paresis. Appears very nervous & his physical condition is very poor.

Personal and Medical History of [illegible] Hunter

Whole No. 5728

Residence, Northfield, Minn.

Date Admission, 31st December 1900.

Admitted by Dr. C. L. Chapple hour, 4.45 P.M.

How Sent, James Hunter, J. of P. Rice County.

Sex, Male Age, 45 years

Civil Condition, married

Children, one Age Youngest Child, —

Occupation, Tinner

Degree Education, Common School

Profession of Religion, not a church member

Habits, used to drink to excess, 10 years ago: not drinking of late

Nativity, Canada: father's, Scotland; Mother's, Canada

Physicians Committing, H. A. Hunt & A. A. Dodge

Correspondents, John Hunter (father) Northfield, Minn
J. W. C. Barnard.

No. of Attack, 1

No. of Admission, 1st

Age First Attack, 44 past

Time of Leaving, August 23 1901

Time in Hospital, 1 yr 7 mo 23 dys

Result, Died: Paresis (since here) - 1 yr - 8 mos

Examination on Admission by Dr. Hanous *Date of* Jany 2/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Sluggish

MEMORY, Past Events, much impaired

Recent Events, Special Subjects, talks about a little girl that was drowned.

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, Poor.

Special Subjects,

Own Mental State, does not appreciate condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Apparently Depressed

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Living — well

Paternal Relatives, no history of insanity

Mother, Living — well

Maternal Relatives, no history of insanity

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

No

HABITS, Drinking and Smoking, used to drink to excess

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Engineer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Good Appetite, Good Bowels, Regular

Personal and Medical History of William Hunter

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8. PRESENT WEIGHT, 152 lb USUAL WEIGHT, NUTRITION, Poor physical

WOUNDS, Abnormalities, Condition of Skin, sluggish + oily

TONGUE, Coatings, Promptness of Movement, Coated: sluggish

PUPILS, Equality, Equal Size, normal Response to Light, sluggish Accommodation, slow

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good

COORDINATION, Arms, Incoord. Legs, Incoord. Grasp, cannot steady himself. Standing, eyes shut, very unstable: must be held. Fingers to nose, Eyes shut, hesitatingly: Standing on one foot

TREMORS, Hands, marked Tongue, marked Facial Muscles, marked General, Stoop for falling.

PATELLAR REFLEX, Spastic Other Reflexes,

ARTICULATION, Slurred, Yes Hesitating, Yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, Normal

Size, normal

Apex Beat, Normal

Murmurs, None noted

ARTERIES, Pulse weakened

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

LUNGS,

Chest Symmetry — Dyn
Expansion — Good
Breath Sounds — Normal

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Normal

BOWELS, Present Condition, Regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient is very forgetful, confused & has various peculiar ideas: Says his little girl was drowned & that he had her life insured; that he has her money in the bank" — Is very incoordinate in gait & speech. The case is one of Paresis. Appears very nervous & his physical condition is very poor.

Personal and Medical History of *William Hunter*

Personal and Medical History of

1900

This patient was brought here by Sheriff W. E. Hibbard, attended by John Hunter, in fair physical condition & with following history. There is no history of consanguinity or heredity: this is 1st attack: has not been in a hospital. First symptoms of this attack manifested in June 1900: there were mental wandering & general nervousness and trembling. Disease appears increasing: but is variable & with rational intervals, but these do not occur regularly. As to derangement now, nothing special manifested. Patient is not disposed to injure others, nor suicidal: no filthy or destructive habits. No peculiarities previously shown: Patient used to drink to excess, 10 years ago, for about 3 years; has not drank at all, of late. He has not been restrained or confined. Supposed cause of disease is that he became over-heated, winter of '99 & '00 in basement, while Engaged as Engineer. He has had medical treatment, but no appreciable effect.

Dec/31 On admission, was put upon B3 (G.A.H. Rpt. Complexion dark; hair black; eyes brown; condition of skin good; both shins discolored, apparently from a bruise: slight bruise, right knee; bruise on little finger of left hand: teeth in fair condition. Behavior good; Ed by John Howe & Dr. F. Fahey).

"1901"
Jan 1/ Received on Ward: given bath: is quite agreeable: seems very nervous: and speech slow & hesitating
2 Transferred to IW: out of bed frequently. Jan 14 — (14 day recordup) — Patient seems very
2 quietable. Says he seems somewhat better physically & is given clothes. Has various delusions
2/31 Transferred to B3: Jan 31. no change noted in patient's condition. Hlys. Is very restless,
Feb 1 and confused. Mans. appears to be failing physically. Transferred to T.W. Apl 23. Left
Apl 23 side of face, badly swollen: some discoloration: (Cause unknown): June 30. Continues
June 30 to remain in bed: is failing, both mentally & physically: July 31. Is still in bed.
Sep 31 (July Wt 125#). Mental condition very poor: rarely speaks: articulation very confused: mum-
bling: habits filthy: appetite good: quite restless, at night. Is slowly failing: very
Aug 3 paretic: at times, very noisy & confused. Stools & urine regular. Aug 3. Wt 126#
15 Appetite good: is on regular diet: requires salts, occasionally. Mental condition
31 failing: Aug 31. about as above described. Sept 1. Wt 122#. Sep 19. Has been quiet
Oct 1 in bed; has some diarrhoea today: Oct 1. Wt 120#. very unsteady: hardly able to walk.
Nov 1 Speech sluggish: habits filthy: Is kept in bed: Nov 1. Seems weaker. Dec 1. Wt 110#
Dec 1 Lies quietly in bed: Jany 1902. Wt 118#. Still lies quietly in bed: much tremor and
Jany 1 contracture of muscles noted. Jany 31. Visited by wife: Patient seems to be
31 failing somewhat. Feb 1/02 Patient is on Inf. W. Lies in bed in a helpless way. Has a small bed sore and occasionally a slight rise of temperature Mar 1/02 Semi paretic - and shows some contraction of the muscles of the limbs. May 1/02 Had sores bandaged daily - Still has slight rise of temperature. Seems very paretic. July 1/02 Patient is still more helpless Sores are dressed every day - He has to be fed. Aug 1/02 - 98# Very emaciated. Aug 23/02 Patient died at 1.45 A.M. His general condition was unchanged up to the time of his death - had continuous rise of temperature - slow & steady emaciations & weakness.

Personal and Medical History of Geo. H. Shiere

Whole No. 5779.

Residence, St Paul, Minnesota

Became resident of State in 1854: of County, 1856

Date Admission, 27th January 1901.

Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.

How Sent, E.W. Bazille Jof P. Ramsey County

Sex, Male Age, 92

Civil Condition, Married

Children, one Age Youngest Child, —

Occupation, None given

Degree Education, Common Schools

Profession of Religion, Baptist

Habits, no history of intemperance.

Nativity, New York: Parents born in United States

Physicians Committing, E.A. Whitcomb & O.W. Archibald

Correspondents, none given on papers.

No. for Year, 92.

Insane Relatives, None

Cause Exciting, old age

Cause Predisposing, senility & chronic

Form, Senility

Accompanying Bodily Disorder, great feebleness

Suicidal or not, not

Date of this Attack, 4 years ago

Duration, 4 years

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, 88 Years

Time of Leaving, Jan. 27, 1901.

Time in Hospital, 25 da.

Result, Died - Valvular endocarditis.

Examination on Admission by Dr. E. Z. Wanous *Date of* Jany 4/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, Poor

Recent Events, " Special Subjects, Poor

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, Poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead

Paternal Relatives,

Mother, Dead

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Appetite, Bowels,

Personal and Medical History of Geo. H. Shiere

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, Condition of Skin,

TONGUE, Coatings, Promptness of Movement,

PUPILS, Equality, Equal Size, Normal Response to Light, Sluggish Accommodation,

SIGHT,

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, Legs, Grasp,

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Very irregular

Strength, Sounds, weakened first Sound

Size, Dilated

Apex Beat, displaced & right

Murmurs, mitral & aortic Murmurs

ARTERIES,

Sclerotic

LUNGS,

Chest Symmetry: Sym

Expansion: Poor

Breath Sounds; Rales over

left lung; also dullness.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character,

BOWELS, Present Condition,

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

This patient is one of senile dementia; very incoherent & demented; could obtain nothing from him on examination; could not answer questions. Is deaf; also has a marked valvular lesion of the heart.

Personal and Medical History of Geo. H. Shriver

1901

Patient was brought him by Deputy Hanson, attended by S.B. Linsted, in poor physical condition, with the following history of case. There is no history of Consanguinity or heredity. This is 1st attack: first symptoms manifested four years ago by senile dementia; is increasing; not variable; no rational intervals: Derangement now shown by Senile dementia. Patient is not disposed to injure others, nor suicidal; is of filthy & destructive habits. If any previous peculiarities, unknown. There is no history of intemperance in self or parents, nor of any severe disease or of head-injury. He has not been restrained or confined. Supposed cause of the disease is old-age: Has had no treatment. On personal Examination, Senile dementia is evident. ——— "

Jan 2 On admission, was put upon T.W. (Complexion dark; hair gray: eyes blue; condition of skin good: 3 small bruises on back; 1 small bruise on right leg, back of knee: teeth all gone, except 2 in lower left jaw: behavior good: he is very feeble). ———

" " Received on Ward: has 3 small bruises on back, and one on leg, back of knee: is given bath. Seems very unstable: will not remain in bed. Jan 5. Has severe diarrhoea - Jan 15: Has bed-sore on back. Jan 16. (14 days record up) - Bed-sore requires dressing - Jan 27. Refuses nourishment: is rapidly failing. Died at 3¼ P.M.

5/9
16/27

- Died -

Personal and Medical History of

Personal and Medical History of Henry G. Young

Whole No. 5730.

Residence, St Paul; Minn.

Became Resident of state 1885: of County, 1895

Date Admission, 3rd January 1901.

Admitted by Dr. E. J. Watrous hour, 7:30 PM

How Sent, E.W. Bazelle, Jail P. Ramsey County

Sex, Male Age, 58

Civil Condition, Widowed

Children, 3 Age Youngest Child, —

Occupation, Ry Employee

Degree Education, College Graduate.

Profession of Religion, Not a Church member

Habits, Drank heavy '85-90: very light since then

Nativity, United States: (Parents also born there)

Physicians Committing, C. F. Sweezy & Eugene Stubbell

Correspondents, Percie A. Young
468 Robert St.

No. for Year, 93.

Insane Relatives, None

Cause Exciting, Mourns loss of son in 1895.

Cause Predisposing, previous attacks

Form, Chronic mania.

Accompanying Bodily Disorder, insomnia & nervousness

Suicidal or not, Not: but disposed to injure others.

Date of this Attack, 2 weeks ago

Duration, — 2 weeks —

No. of Attack, Not 1st: has probably had many.

No. of Admission, 1st here (was at Hastern)

Age First Attack, about 50.

Time of Leaving, April 26 - 1902

Time in Hospital, 1 year 3 mo 23 ds

Result, Died: Ethi w chronic mania

Examination on Admission by Dr. E.J. Watrous *Date of* Jany 8/1-1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Sluggish

MEMORY, Past Events, poor

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Indifferent

DELUSIONS, Systematized, Grandeur Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, Excess.

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

General

Sleep, Appetite, poor Bowels, Irregular

Personal and Medical History of Henry G. Young.

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION fairly nourished

WOUNDS, Abnormalities, Condition of Skin, Quite Clear

TONGUE, Coatings, Promptness of Movement, Coated; marked tremor

PUPILS, Equality, Equal Size, Small Response to Light, No Accommodation, No

SIGHT,

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, incoordinate in Legs, - cannot do other test Grasp, is very unsteady

TREMORS, Hands, Marked Tongue, Facial Muscles, General,

PATELLAR REFLEX, Lost Other Reflexes,

ARTICULATION, Slurred, Yes Hesitating, Yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest symmetry; Sym

Expansion; Fair

Breath Sounds; Bronchitis

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient is very incoordinate; has ideas of grandeur; thinks he is a great man; has great powers. - Speech hesitating & slurred. Is a case of Paresis in the late stage. Has several marks on legs, which are perhaps syphilitic.

Personal and Medical History of *Henry G. Young.*

1901

This patient was brought here by Deputy Hanson, attended by F. H. Zarske, in fair physical condition, and with following history of case. There is no history of consanguinity or heredity: This is not 1st attack: he has had them at intervals, for past 8 years; duration 3 or 4 Days: was at St. Peter Hospital & improved. First symptoms of this attack manifested 2 weeks ago, by irritability, melancholy & delusions. The disease appears increasing; is variable, with rational intervals, but these are irregular. Derangement now shown by being raving & furious; tears clothes from body; imagines he is Christ: talks of suspects. Is disposed to injure others, but not suicidal: is of filthy and destructive habits. Peculiarities manifested only at time of attacks. Patient drank heavy from 1885 to 1890 (but very light since then). There is no history of any severe disease &c or head-injury. No restraint or confinement has been employed, except when at St. Peter; of what kind and for how long, the witnesses do not know. Supposed cause of the disease is that he mourns loss of Son, 1895. Has been treated by physician for Insomnia and Nervousness, during past two weeks; effect "Nil". On personal Examination, there are observed vacant stare to eye, self-inflicted injuries over body and Entrails(?), mental wandering, body denuded from all clothing. —

Jan 3 On admission, was put upon T.W. (S. H. N. Rpt. Complexion light; hair gray; eyes gray; condition of skin, dirty; 2 moles on right Shoulder; old ulcers & scars on both legs below knee; 2 small scars on back; scar, 3 inches long, on right thigh, also a small round scar; small scar on left arm and small scar on left hip. Is very dirty. Teeth in very poor condition, several old snags & badly decayed. He is " " very restless. Ed. by John Howe and L. D. Page). Patient is demented & in poor physical Condition
9 Is very restless & noisy & frequently out of bed. Jany 9. noisy, through the night. —
17/30 (14 Day record up) — no change noted in either mental or physical condition. Jan 30. Given doubt
31 and is improving. Jan 31. Physically, much improved: mentally, no change —
Feb 5 Transferred to D3. Restless, noisy & destructive, day & night. Habits very untidy. Feb 5. Trans-
26 ferred to C1: very confused & noisy. Feb 26. Continues very destructive and filthy: very confused
Mar & restless: March 2. 163#. Gait unsteady: very agitated in manner. Apl 2. 166#. Apl 17. T 102°
Apl 17/ Transferred to TW: very confused & noisy: put on liquid diet: urine & stools regular. Apl 27. Appears
30 as well as usual: up & dressed: still restless & noisy. Transferred to B1. Apl 30. Slight improve-
May 1 -ment, past few days. May 1. 166#. June 1. Very little change. Almost constantly noisy:
June making sort of moaning sound. Is confused & agitated: July 31 Continues noisy,
July 31 restless & destructive. Augt. Wt 166#: Nov 2 Wt 166#: Dec 12 Transferred to D2.
Dec 12 Becoming more dirty & destructive in habits. Jany 31/02. Shows some mental and
1902 physical failure: is very noisy, restless & destructive: never talking so as to be
Jany 31 understood.

Feb. 1 Wt. 141#; Apr. 1 continues noisy & restless; physical condition poor; Apr. 12. Trans. to D.W. Received injury by falling into window hole. Is quite feeble; very restless eats little. Apr. 25 Gradually failing; unable to take nourishment. Died at 4 P.M.

Personal and Medical History of

Personal and Medical History of John Marsh

Whole No. 5737.

Residence, Forest Lake, Washington Co. Minn

Date Admission, 4th January 1901.

Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.

How Sent, Frank. T. Wilson, Jo P. Washington Co.

Sex, Male Age, 42

Civil Condition, married

Children, none Age Youngest Child, -

Occupation, Laborer: well-digger.

Degree Education, Common School.

Profession of Religion, not a church member

Habits, Drinks heavily & father also intemperate

Nativity, Minnesota; Parents born in Germany.

Physicians Committing, T. C. Clark & Geo. N. Watier

Correspondents,

none mentioned in papers.

No. for Year, 95.

Insane Relatives, unknown

Cause Exciting, Injury to skull, 4 years ago.

Cause Predisposing, Intemperance & said injury

Form, [illegible]

Accompanying Bodily Disorder, Effects from above injury &c

Suicidal or not, Homicidal: & will injure others.

Date of this Attack, probably recent

Duration, probably short -

No. of Attack, Not 1st

No. of Admission, 1st

Age First Attack, about 38.

Time of Leaving, Jan 24, 1901. Home.

Time in Hospital, 20 days.

Result, Recovered. Discharged July 26/01

Examination on Admission by Dr. E. Z. Wanous *Date of* Jany 5/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct: rather alert, at times

REASONING POWER, Ordinary Subjects, good

Special Subjects, "

Own Mental State, says "he is all right"

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

somewhat depressed

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead

Paternal Relatives, no history of insanity

Mother, Dead

Maternal Relatives, no history of insanity

Brothers and Sisters, all well

Children (2) Step children

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Stomach trouble: struck on head with iron pulley causing cut.

HABITS, Drinking and Smoking, at times, & Excess.

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Carpenter

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, disturbed Appetite, poor Bowels, regular

Personal and Medical History of John Marsh

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 10½ PRESENT WEIGHT, —— USUAL WEIGHT, NUTRITION, fairly nourished

WOUNDS, Abnormalities, Scar on head Condition of Skin, reddish - brown

TONGUE, Coatings, Promptness of Movement, slight coating

PUPILS, Equality, Equal Size, normal Response to Light, normal Accommodation, normal

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Impaired.

HEARING, good

COORDINATION, Arms, normal Legs, normal Grasp, Arm tests quite good.

TREMORS, Hands, no Tongue, no Facial Muscles, General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, regular

Strength, Sounds, normal

Size, normal

Apex Beat, normal

Murmurs, none noted

ARTERIES,

full, compressible

LUNGS,

Chest symmetry: Sym

Expansion: good

Breath sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient has had considerable trouble with his family: his wife left him & he has worried about it: has, at intervals, gone out on "sprees", during which times he has been violent. Twice in hospital, has had no symptoms of mental derangement. Admits being confused during previous drinking debauches. Physical condition good.

Personal and Medical History of John Marsh

1901

This patient was brought here by Deputy Ignatius Jacinsin, in good physical condition and with following history of case. As to any consanguinity or heredity, unknown. This is not 1st attack; they have occurred at intervals during past 4 years. First symptoms of this attack were manifested by moroseness, violent passion, headaches, responsive to stimulants. Disease seems increasing; variable. Derangement now shown by passion, threats to kill, violent headaches, moroseness; feeling that others are "down on him". Is disposed to injure others & has attempted suicide, by taking poison in glass beer, concealed poison in bed; propensity now active. He has made destruction of furniture, dishes &c of which he afterwards has no recollection. Patient always had a violent temper; drank intoxicants which merely made him "jolly" and good natured, prior to said injury, but, since, has had opposite effect. Father was intemperate; patient drinks & trouble very much aggravated by drink. He received a severe injury, 4 years ago, from falling pulley. He has not been restrained or confined. Supposed cause of the disease is above injury. Has had no treatment. On personal examination, there is observed this injury to skull. "We recommend the commitment of said John Marsh to a hospital for the insane, because he is dangerous to himself and others, and in the judgment of the Jury needs an operation to relieve pressure upon brain." —

Jan 14 On admission, was put upon B.[3] (G.H.N. Rft. Complexion fair; hair light; eyes blue; skin in fair condition: some pimples on body; large scar on top of head: vaccination scar on left arm; small scar on right knee; small scar on inside of right foot; 2 small scars on inside of left foot; small scar on left knee: is clean: teeth in fair condition, none missing. Behavin good. Ex.[d] by M. F. Fahey). —

" Received on board. Given bath: converses freely & intelligently. Tells of domestic troubles — says "his wife was induced to leave him by his step-children, which caused him to worry and form a protracted spree" — Jan 17. (14 Day record up) — Patient is well-behaved & 17
23/24 agreeable & rational — Jan 23. Visited by cousins. Jan 24 — Taken home by them.

Discharged

Personal and Medical History of

Personal and Medical History of Michael Sirek

Whole No. 5733.

Residence, Wesley, Minnesota

Date Admission, 5th January 1901.

Admitted by Dr. O. L. Greendale hour, 4:30 P.M.

How Sent, James Hunter, Jo P. Rice County

Sex, Male Age, 39

Civil Condition, married.

Children, 8 Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession of Religion, Catholic

Habits, not stated but father used to use liquor

Nativity, Minnesota; (parents', Old Country, Bohemia)

Physicians Committing, A.A. Dodge and F.M. Rose

Correspondents, (Brothers address) Mr. John Sirek, Wesley, Minn

Letter Jan 5/1901 letters from New Prague - remitted to

No. for Year, 95.

Insane Relatives, not known

Cause Exciting, Sunstroke

Cause Predisposing, not stated

Form, Subacute Delirium Mania

Accompanying Bodily Disorder, None Mentioned: through he has been treated for Hypertrophy, Constipation & Urinary System

Suicidal or not, not: threatens to injure others.

Date of this Attack, Aug 15th 1900

Duration, about 5 months

No. of Attack, 1st —

No. of Admission, 1st (was in private Hospital, 10 days)

Age First Attack, 38+

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. J. Warren *Date of* Jany 8/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

rather Confused

MEMORY, Past Events, Good

Recent Events, good Special Subjects, "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, fair

Special Subjects, "

Own Mental State, doesn't appreciate condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather Exalted

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS, of hearing

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead

Paternal Relatives, no history of insanity

Mother, Dead: paralysis

Maternal Relatives, no history of insanity

Brothers and Sisters, all well

children (8) all well (especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

Small-pox

HABITS, Drinking and Smoking, at times to excess

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, farmer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, Constipated

Personal and Medical History of Michael Sirek.

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 in PRESENT WEIGHT, 162½ lbs USUAL WEIGHT, NUTRITION, Fair

WOUNDS, Abnormalities, No Condition of Skin, oily, sluggish

TONGUE, Coatings, Promptness of Movement, coated

PUPILS, Equality, Equal Size, normal Response to Light, sluggish Accommodation, slow

SIGHT, Good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, normal Legs, normal Grasp, Fingers tremor eyes shut readily. Staggers gray shut readily. Standing on one foot, somewhat unsteady

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, Normal

HEART, Regularity, irregular

Strength, Sounds, loud

Size, enlarged

Apex Beat, down, & to left

Murmurs, None noted

ARTERIES,

full

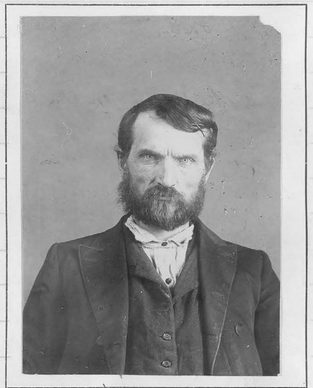
LUNGS,

Chest symmetry: Sym

Expansion; Good

Breath Sounds: normal

3/28/01 2:30 P (Passed) —
3/28/01 3:30 P (Examined)



CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, — Sp. g. 1020 Reaction, Neutral Color and Appearance, Yellow with Sediment

Albumen, None (Nitric acid test) Sugar, None (Lieut. Fehling's Sol. + Bismuth)

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient is hallucinatory & has transitory delusions: is rather exalted & has a peculiar staring & pressing of the eyes: says "people are trying to get the best of him": "that people frequently use his name in the newspaper": "that others are making fun of his name": "but he has no idea why they should do it". Physically, emaciated & anaemic.

Personal and Medical History of *Michael Sirek*

1901

This patient was brought here by Deputy Sheriff J.B. Thompson attended by Harry McMoanie, in fair physical condition, and with following history of case. There is no history of Consanguinity, and none that is known, of Heredity. This is the 1st attack; was in private hospital for 10 days; he eloped at night; this was in the beginning of this attack. First symptoms of this attack manifested Aug 15. 1900: he was weak; head was not right; he thinks the heat had something to do with it. The Disease varies, but stationary: is variable, and they seem to be at regular intervals. On what subject or in what way Derangement is now manifest, not stated. Is disposed to injure others by threats. Is not suicidal, nor of filthy or destructive habits. No peculiarities previously shown. Father used to use liquor. No mention of any nerve disease &c, or head-injury. Has not been restrained or confined (except as stated). Supposed cause of the Disease is Sun-stroke: he has been treated for neurasthenia, constipation + indigestion, for 10 days. On personal Examination, nothing further noted. —

Jan 5. **On admission**, put upon P.D.[3] (G.H.N.R'bt. Complexion Sallow; hair brown; eyes blue; condition of Skin good: small scar on thumb of left hand + scar on back of left hand: small scar on left knee. Is clean. Teeth: 4 gone in left upper jaw and 1 in front of lower jaw. Behavin good. Ed. by McFarlane

" " **Received on ward**: given bath: patient says "he has not felt well for some time": "his head feels peculiar" - "thinks other patients are talking and reading his name out of papers". Does no work.

18 (14 Day record up) — Patient has electrical treatment with no apparent effect. —

31 No change in condition & report. - Feby 1. Very irritable: complains of pains in head: "thinks everybody is making fun of him" - Apl 25. Visited by brother: July 22. Transferred

Apl 25 to A[2]. July 31. Very quiet on ward: somewhat restless when active. Condition shows

July 31 Aug. Wt. 170#: Aug 26. Went to work at farm; has been quite well - behaves, thinks clearly in manner.

Sep 30 No special Change. - Dec 30. Transferred to H.W. put to bed: patient confused + impaired

Oct 24 in general health (Wt 151#) - Oct 24. Up, on ward: patient improved. Nov 1. Wt 164#: moved

Jan 31 to B[2]. Jany 31/02. Has worked some on ward, and outside: Mental Condition variable: at times, quite rational, and, at others, confused and incoherent: occasionally fractious + always rather irritable. Evinces little interest in surroundings.

Feb 11. Wt. 164#. Aug. Wt. 157#. Continues very inactive; sullen at times; delusion of persecution; Nov. 1 Wt. 173#. Still does nothing; tidy; behaves quite well; thinks he is being worked upon by electric currents. Dec. 21 Visited by daughter.

1903
Jan 31. Condition about same.

Personal and Medical History of

Personal and Medical History of Thomas Edgar Kenyon

Whole No. 5734.

Residence, Summit, Minn

Date Admission, 11th January 1901

Admitted by Dr. E. J. Wanous hour, 11 00 am.

How Sent, W. A. Eggleston, Jeff. Steele County

Sex, Male Age, 54

Civil Condition, married

Children, Two Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School.

Profession of Religion, not a church member

Habits, not intemperate

Nativity, Otsego Co. Mich (Father's Otsego Co. N.Y. Mother's N.Y. State)

Physicians Committing, E. C. Bigelow & S. M. J. Carlin

Correspondents, A. E. Kenyon (son) Geneva Minn (Freeborn Co)
W. E. Kenyon (bro) Owatonna "
Dr. W. A. Tinfort (Grandfather) Owatonna Minn

No. for Year, 97.

Insane Relatives, None

Cause Exciting, not known: General Debility

Cause Predisposing, not stated

Form, a c Melancholia

Accompanying Bodily Disorder, great feebleness.

Suicidal or not, Suicidal pretensions: will injure others and homicidal propensity active

Date of this Attack, November 1900.

Duration, about 2 months

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 53+

Time of Leaving, October 18 - 1901.

Time in Hospital, 9 mos. 7 Ds

Result, Died: Dysentery

Examination on Admission by Dr. E J Wanous *Date of* Jany 12th 1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, good

Recent Events, Impaired Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State, Does not appreciate condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, None obtained Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, 4 months ago

ONSET, Gradual or Sudden, Gradual

(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead: pneumonia

Paternal Relatives, father's sister insane

Mother, Dead: gastric trouble

Maternal Relatives, no history of insanity

Brothers and Sisters, 4 all well 2

Children 2. Daughter not well (especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

no

HABITS, Drinking and Smoking, not to excess

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, farmer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, Constipated

Personal and Medical History of Thomas Edgar Kenyon

PHYSICAL CHARACTERISTICS.

HEIGHT, —— PRESENT WEIGHT, —— USUAL WEIGHT, NUTRITION, Emaciated

WOUNDS, Abnormalities, Condition of Skin, clear, normal

TONGUE, Coatings, Promptness of Movement,

PUPILS, Equality, Equal Size, normal Response to Light, slow Accommodation, normal

SIGHT, wears glasses.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, good

COORDINATION, Arms, cor Legs, cw unsteady Grasp, on other tests

TREMORS, Hands, fine Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

hardened

LUNGS,

Chest symmetry; Gym
Expansion: fair
Breath Sounds; Bronchitis

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient's son stated he had been worrying about his finances. Thought every one had gone back on him": "felt as though I was drowning, and some one pushed him under". Cannot sleep nor eat: "thought mind was leaving him".

On examination is forgetful; rather illusive, but denies the above statement: Case is one of premature senility. He has considerable trouble with bowels: - refuses nourishment.

Personal and Medical History of *Thomas Edgar Kenyon*

1901

This patient was brought here by Deputy Charles Mergen, attended by A.E. Kenyon, in poor physical condition and with following history of case. There is no history of consanguinity or heredity. This is 1st attack; first symptoms manifested in November 1900, by unnecessary worry over small matters. Disease appears increasing & variable & with rational intervals, but these not regular. Derangement now manifested by a dread he may injure others and himself. He has shown a disposition to injure others; has not attempted suicide, but has suicidal pretensions and propensity now active. No filthy or destructive habits. No peculiarities previously shown. No history of intemperance in self or parents, nor of any severe disease &c or head injury. He has not been restrained or confined. Supposed cause of the disease is General Debility; cause not known: — Has been on tonic treatment. On Personal Examination, nothing further ascertained.

Jan 11 On admission, was put on T.W. (Complexion dark; hair gray; eyes brown; condition of skin fair; something wrong with left testicle: small scar on back; small scars on both knees: is dirty; Teeth: 3 gone from lower jaw, and 3 from upper jaw. Behavior good. Condition is very weak. E & Ely to John Howe & D.E. Howe). — " " Received on ward: given bath & put to bed: very restless all night: appears badly confused — 19 seems quite stubborn, about eating. Jan 21. Given clothes & got up on ward. Jan 31. No 31 mental improvement manifested. Febr 1. Patient very delusional; "continually asking Febr 1/28 "to be shot". Seems very much excited & confused by spells. Feb 28. Visited by friends. Mar 1/31 Patient continues worried & restless. Mar 31. Patient still destructive and filthy. — Apl 1 Still confined to bed: badly confused & very much excited, at times: very obstinate. May 3. Given May 3 clothes & got up. Is very troublesome & maniacal. July 5. Returned to bed. July 9 Develops July 9/18 "Hematoma auris": Treated with collodion. July 18. Is up on ward again. — 31 No improvement noted in condition. Augs. Wt 111#. Sept. Wt 105#. Patient has Sept 1 been rather troublesome: struggles: is restless & excited: kept in room, a good deal of time. Oct 1/11 Wt 100#: Is noted as getting considerably weaker. Oct 11. Has diarrhoea & was 15 transferred to T.W. (2) Oct 15. Patient seems to be failing: Temperature usually subnormal. 17 Is restless. Oct 17. Has, again, considerable diarrhoea & growing gradually weaker. 18 Died at 7.30 PM: (He had vomited, at times, and his Temperature has been steadily sub-normal). ———— His general condition was one of "agitated melancholia" & a general catarrhal condition of the system. For a long time, required catheterization, & had more or less Dysentery. He has been noted as having also considerable trouble with his throat, (in the way of hacking and spitting): The most prominent symptom, towards latter part of his stay, was Dysentery, which was quite severe, and persistent. He had been failing somewhat in strength, for the months preceding, but, during the last week, failed quite rapidly. —

Dr't

Personal and Medical History of

Personal and Medical History of Nick Heimer

Whole No. 5735.

Residence, Johnsberg, Mower Co. Minn

Date Admission, 12th January 1901.

Admitted by Dr. C. L. Chattle hour, 10 45 am

How Sent, A. C. Page, Court Commr. Mower County

Sex, Male Age, 35

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession of Religion, Catholic

Habits, Patient is a hard drinker

Nativity, Minnesota; parents born in Germany

Physicians Committing, Homer at. Person & Allen

Family Physician Correspondents, Dr. Henslen LeRoy, Minn.

Henry Heimer (Bro) Johnsburg, Minn
6 miles from Adams (Telephone)

No. for Year, 98.

Insane Relatives, Sister

Cause Exciting, Drinking liquor

Cause Predisposing, Drink habits & heredity

Form, Mania à Potu

Accompanying Bodily Disorder, None mentioned

Suicidal or not, Suicidal & will injure others

Date of this Attack, January 8th 1901

Duration, — 3 Days —

No. of Attack, Not 1st (occurring during last 5 years)

No. of Admission, 1st

Age First Attack, about 30.

Time of Leaving, July 13th 1901

Time in Hospital, 1 Mos. 1 05

Result, Recovered: Discharged 7/13/1901

Examination on Admission by Dr. E. Manous *Date of* Jany 12/13 - 1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good
Recent Events, " Special Subjects, "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

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

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
normal

DELUSIONS, Systematized, of Persecution Transitory, during
Special Subjects, "Drinking Spell"

HALLUCINATIONS, of sight, during debauchery

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Living
Paternal Relatives, no history of insanity
Mother, living: well
Maternal Relatives, no history of insanity
Brothers and Sisters, 3 Sister dead: been in asylum

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
No

HABITS, Drinking and Smoking, Drinks to excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Farmer

Detail Date, Duration, and Character of Previous Attack, if any,
"Periodical Drunks"

Sleep, Impaired Appetite, poor Bowels, Regular
no sleep for 1 week.

Personal and Medical History of Nick Heimer

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, — NUTRITION, well

WOUNDS, Abnormalities, Left arm has been broken Condition of Skin, Normal

TONGUE, Coatings, Promptness of Movement, Clear

PUPILS, Equality, Equal Size, Response to Light, normal Accommodation, normal

SIGHT, Good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, normal Legs, normal Grasp,

TREMORS, Hands, Coarse Tongue, Coarse Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest symmetry; Sym
Spasm; Good
Breath Sounds; Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good

BOWELS, Present Condition, Loose

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient had been in a "Drinking Spell" & was suffering from alcoholic Delirium, when admitted. Says "he had not been able to sleep for a whole week, neither could he eat anything." On examination, seems perfectly rational and in good physical condition. Admits having previously had "Delirium Tremens"

Personal and Medical History of Nick Heimer

1901

This patient was brought here by Deputy N. Nicholson, in fair physical condition & with following history. There is no history of consanguinity, but he has a sister insane. This is not first attack; they have occured during last 5 years; their duration 3 or 4 days: has not been in Hospital. First Symptoms of this attack manifested on Janry 8th 1901 by having Hallucinations; fancying he was about; constant fear of injury: Disease seems increasing; is variable & there are rational intervals, these follow a "Spell" of continual drinking. Derangement now shown in that his mind is never clear until he drinks some stimlant: after drinking, sometimes becomes violent, threatening harm and once suicide. He has shown a disposition to injure others and has also attempted suicide, with a butcher knife. Propensity not now active only after drinking bout. At these times he is of filthy and destructive habits. No previous peculiarities noted. Patient is a hard drinker. No mention of any brain disease &c or head injury. He has been restrained & confined; has had constant watching and force has been used during these "Spees" (Spells). Supposed cause of the disease is drinking liquor. No treatment has been given, except to quiet at times. On Personal Examination patient claims "his head is not right": knows his weakness & feels the need of some outside assistance. Appears quite rational at the Examination. Reasons for Commitment are, to receive medical treatment, while under legal restraint & for safety of others. —

Jan 12 On admission, patient T.W. (G.H.R.R'ft. Complexion light; hair light; eyes blue; condition of skin good: vaccination scar on left arm: scars on left upper arm & scar on left lower arm: bruises on right upper arm. Left arm has been broken. Teeth. 1 out of left upper jaw. Behavior good. Examination made by John Howd & E.E. Moore). — —

" 13 Received on ward: given bath & put to bed. Jan 13. Visited by brother. Is well-behaved &

17/18 seems quite well physically. Jan 17. Given clothes. Jan 18. Asks for work. —

21 Transferred to B3. Patient has been a hard drinker & this accounts for his condition.

26 (14 Days recom up) — Feby 1. 169# 95. Patient converses freely: is rational. Works in

Feb 8/13 Centre Dining-room. Feb 8. Transferred to B2 — Feb 13. Patient sent home. —

Discharged

Personal and Medical History of

Personal and Medical History of Julius Wendt

Whole No. 5737.

Residence, Wiscoy, Winona County, Minn

Became resident of State, about 30 years ago (1870) : of County about 1879

Date Admission, January 18 - 1901.

Admitted by D. E. Z. Ivanous hour, 4:00 P.M.

How Sent, D.E. Vance. Jo P. Winona County

Sex, Male Age, 35

Civil Condition, Single

Children, None Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession of Religion, Lutheran

Habits, no history of Intemperance

Nativity, Germany; (parents also born there).

Physicians Committing, L. L. Gates & E.D. Keyes

Correspondents, (Father), Carl Wendt Witoka Minn

No. for Year, 100.

Insane Relatives, None

Cause Exciting, unknown

Cause Predisposing, unknown

Form, Dementia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, — not —

Date of this Attack, about 2 months ago

Duration, about 2 months —

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, — 35 —

Time of Leaving, Sept 2 - 1901

Time in Hospital, 7 months - 15 Days.

Result, Died; Phthisis pul.

Examination on Admission by Dr. E.Z. Ivanous *Date of* Jany 21/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, Impaired

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects, " "

Own Mental State, Says "he is partly Crazy."

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather depressed

DELUSIONS, Systematized, Transitory, yes

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Living; well

Paternal Relatives, Dont know

Mother, Living; well

Maternal Relatives, Dont Know

Brothers and Sisters, one sister ailing for 3 yrs. (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

PROMINENT DISEASES, pleurisy, 3 years ago

HABITS, Drinking and Smoking, at times, Excess.

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Farmer

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, good Bowels, irregular

Personal and Medical History of Julius Wendt

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 3/4 PRESENT WEIGHT, 119 lb USUAL WEIGHT, NUTRITION, Poor

WOUNDS, Abnormalities, no Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, Coated; Sluggish

PUPILS, Equality, Equal Size, Normal Response to Light, Slow Accommodation, Slow

SIGHT, Good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, Normal Legs, Normal Grasp, Wrist tests good

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Hesitating, Yes Slow, Yes

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irregular

Strength, Sounds, first sound exaggerated

Size,

Apex Beat, Displaced into nipple line

Murmurs, None noted

ARTERIES, Normal

LUNGS, Chest Symmetry; Sym Expansion; Poor Breath Sounds; normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good —

BOWELS, Present Condition, Irregular.

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient is of very low mental development; rather a defective; Expresses transitory delusions: "thinks he is half a man only"; "that he is partly dead"; "that he is half man and half beast". Is emaciated & anaemic. Heart is somewhat displaced, caused by lateral dilatation.

Personal and Medical History of *Julius Wendt*

1901

This patient was brought here by Sheriff A. W. Fuhrmann, attended by Chauncey Harcey, in poor physical condition, with following history & case. No Consanguinity, or heredity, no history so far as known. This is 1st attack; first symptoms manifested about 2 months ago, by delusions and hallucinations. Disease appears stationary; not variable; no patiniel intervals. Derangement now manifested in that he thinks he is going to be injured or killed; thinks he is accused of all sorts of unnatural acts and crimes. Patient is not disposed to injure others, nor suicidal: no filthy or destructive habits: no noticeable peculiarities before accession of the disease: no history of intemperance; nor of any severe disease &c or head-injury: he has been confined at home with attendant. Cause of the disease is unknown: treatment given, elimination & sedatives. On personal Examination there are observed vacant expression of the eyes, anaemia & apathy. —

Jan 18 On admission, was put on 15$ (G. H. & Rpt. Complexion dark: hair dark brown; eyes blue; excretion of skin, face has wart or mole on left shoulder: scar, 1 inch long, on back of head: is rather dirty. Teeth: 2 gone & 3 snags in right upper: 2 gone & 1 snag, left upper; 1 gone & 2 snag on left lower jaw. Behavior good. Pgg. 8. Pyr. K 20
" " Examined by John Howe & M. F. Bailey). - Received on ward: given bath: is confused: —
" 29 Says "he is half-man and half-animal" - wants to go home - Jan 29. While at walking.
" 31 refused to come back. Jan 31. no change in condition - July 1 (14 days recd up)
July 1 "thinks he is part man & part beast": Appr. Seems more dull & confused: Is failing -
May 19 Eft 106°. Pg 6 - May 9. Patient attempted to elope. July 31. Is failing rapidly. -
July 31 Transferred to TW and put to bed. (Is suffering from pulmonary trouble). Aug 31. Has
Aug 31 Continued to fail steadily. Sept. Continued to fail and died to day (11. am).

Died

Personal and Medical History of

Personal and Medical History of John Gay

Whole No. 5740.
Residence, St Paul, Minn.
Resident of State, always: of County, always.
Date Admission, 24th January 1901.
Admitted by Dr. E. E. Y. Warnous hour, 3 30 P M
How Sent, E. W. Bazelle, Jo P. Ramsey County
Sex, Male Age, 28
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Laborer; father, a merchant
Degree Education, Noneducated
Profession of Religion, Catholic
Habits, has some drink - habits
Nativity, St Paul: (father's, New York: Mother's, Ireland)
Physicians Committing, Arthur Sweeney & C. E. Riggs
Correspondents, none seen in "Inspn"

No. for Year, 103.
Insane Relatives, none mentioned
Cause Exciting, unknown
Cause Predisposing, previous attack
Form, Imbecile
Accompanying Bodily Disorder, injury head 5 years ago
Suicidal or not, not (?)
Date of this Attack, not stated; probably short time ago
Duration, probably long -
No. of Attack, 2nd (had one in 1895)
No. of Admission, 2nd (was here before)
Age First Attack, about 22.
Time of Leaving, Eloped April 30/90
Time in Hospital, this time 1 Yr 3 mos 6 Ds
Result, Unimproved. Disd Nov 22-1900 by Bd of C

Examination on Admission by Dr. E. E. Y. Warnous *Date of* Jany 25/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quite Clear
MEMORY, Past Events, Good
Recent Events, " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct
REASONING POWER, Ordinary Subjects, Poor
Special Subjects, "
Own Mental State, Thinks he is well
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather indifferent
DELUSIONS, Systematized, Perhaps ~~Transitory~~,
~~Special Subjects~~, of persecution
HALLUCINATIONS, No
ILLUSIONS, No
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead: Paralysis
Paternal Relatives, no history of Insanity
Mother, Living
Maternal Relatives, no history of Insanity
Brothers and Sisters, all well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Rheumatism, 3 years ago
HABITS, Drinking and Smoking, at times to excess
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
3 years ago Committed to Rochester Hosp
Sleep, " Appetite, " Bowels,
all right

Personal and Medical History of John Gay

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 5in PRESENT WEIGHT, 132 lbs USUAL WEIGHT, NUTRITION, Fairly nourished
WOUNDS, Abnormalities, Slight scar on L. arm and one, back of head Condition of Skin, quite normal
TONGUE, Coatings, Promptness of Movement, Clear; prompt.
PUPILS, Equality, Equal Size, Normal Response to Light, Normal Accommodation, Normal
SIGHT, Impaired
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Strabismus
HEARING, good
COORDINATION, Arms, Normal Legs, Normal Grasp, other tests good.
TREMORS, Hands, fine Tongue, fine Facial Muscles, General,
PATELLAR REFLEX, Normal Other Reflexes,
ARTICULATION, ~~Slurred~~, Normal Hesitating, Slow,
FACIAL EXPRESSION, Sensibility, Normal
HEART, Regularity, Normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES,
Compressible
LUNGS,
Chest Symmetry; Sym
Expansion; Good
Breath Sounds; Normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character,
BOWELS, Present Condition,

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient has been previously Committed: he is quite talkative and finds fault with everything & everybody. Thinks his sister has sent him here to get property coming to him. That everybody is against him. Refused to work in Camp, because some man was dismissed & he thought he would be asked to leave.

The patient is a high-grade imbecile. Physically is emaciated & nervous, due to dissipation. —

Personal and Medical History of John Gay

1901

Patient was brought here by Deputy Johnson, in poor physical condition, with following history. There is no history of consanguinity, or heredity. This is not first attack; one occurred in 1895, when he was committed to this (Rochester) Hospital. (Results stated above). When first symptoms of this attack were manifested is not mentioned: they were shown by degeneracy. Disease seems increasing. Derangement now shown by delusions of persecution. Is not disposed to injure others, nor suicidal (?); is careless in regard to personal appearance. He always had a violent temper. Patient drinks considerably; had injury to head 5 years ago; was confined at Rochester Hospital 19 months: Cause of disease is unknown; treatment unknown. On personal examination it is found he believes that unknown people are trying to injure him. (N.B. See Vol 31: page 269; No 42214; for history of patient, who was here from Oct 10/95 to May 31/97 and discharged Nov 3/97, improved). —

Jan 14 On admission, was put on B3 (G.H.N. Rpt. Complexion dark; hair black; eyes gray; condition of skin good; slight scar on right arm; small scar on back of head: is clean: teeth: 1 old decay in upper jaw; Habits good. Es'ly by John Howe & James Sheehan). —

" Received onward. Patient is very talkative; exalted: says he was sent here by his people to cheat him out of property. — Feb 6. Is working in Centre-dining room: Still very talkative, Feb 6 7 (14-day record up): Is well-behaved, but still very talkative and somewhat elated: boastful; Imbecile in appearance & actions. No insane ideas noticed, except that he seems to think that he was sent here to be cheated out of his property. Habits hog: Works in dining-room. Physical condition Good. Feb 8. At work with painter. Transferred to B3. Mar. Wt 140# 8 Still working with painter. Is on Parole. Apl 30. No change noticeable. Health good. Apl 9/ 30 May 14 Is now working in barn; seems in quite good mental & physical condition. May 14. To A1. July 19 Transferred to A3. Works now with Express-man. July 19. Stayed 3 days at Camp: Last 27 trouble & returned. July 27. Went out to work with farmer, nearby: Aug 2. Returned to Ward. Aug 27 Strangulation of hernia: Hernia reduced. Aug 12. Transferred to A3. (Was not Camping Dec 3 at Honeoye July 19 to July 25 - and sent out on trial 7/27 - as above). Dec 3. Patient has changed more: has various delusions & is considerably feeble-minded: was to day sent home 1901 on trial: Jan 30 for. Returned (to B3). Jan 31. Is working outside, again, about Jan 30 the barn. No noticeable change in condition: Health seems good. Habits are cleanly.

Feb. 1 Wt. 133#; Feb. 2 Trans. to A1. Feb. 24 Eloped after supper; in fairly good mental condition.
Apr. 22 Returned to day. Apr. 26 Sent out to work with painter; quiet; rational; agreeable.
Apr. 30 Eloped.

Personal and Medical History of

Personal and Medical History of Isaac Silverstein

Whole No. 5741

Residence, St. Paul, Minn.

Because) resident of State, 19 years ago: of County, 19 yrs ago

Date Admission, 25th January 1901.

Admitted by Dr. L. C. Linton hour, 7:30 Pm

How Sent, E.W. Bazille, Jofl. Ramsey County

Sex, Male Age, 28

Civil Condition, single

Children, — Age Youngest Child, —

Occupation, Clerk (father's, a Carpenter)

Degree Education, Common School.

Profession of Religion, Hebrew

Habits, no history of intemperance

Nativity, Russia; parents also born there.

Physicians Committing, C.C. Miller & S.S. Hesselgrave

Correspondents, Dora Silverstein, cor. 13th & Jackson Sts. St Paul, Minn or Henry Kelly.

No. for Year, 1014.

Insane Relatives, None

Cause Exciting, Unknown

Cause Predisposing, previous attack

Form, ~~Epileptic~~ Maniacal

Accompanying Bodily Disorder, None mentioned

Suicidal or not, not

Date of this Attack, 6 months after his return.

Duration, about 9 months.

No. of Attack, 2nd (+probably has had more).

No. of Admission, 2nd

Age First Attack, 26 years.

Time of Leaving, March 7-1902

Time in Hospital, 1 Yr 1 mos 10 ds

Result, Improved. Disgd. Sept 11-1902 By Bofl C.

Examination on Admission by Dr. E.J. Wanous *Date of* Jany 26/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, poor

Recent Events, much impaired Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State, Does not appreciate condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

– Depressed by Spells –

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, Six Months

ONSET, Gradual or Sudden, Sudden

HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,

Father, Living; well

Paternal Relatives, no history of Insanity

Mother, Living; well

Maternal Relatives, no history of Insanity

Brothers 5 and Sisters 3, all well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

gonorrhoea; perhaps Syphilis

HABITS, Drinking and Smoking, to excess, at times.

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches

OCCUPATION, Healthy or not, Clerk

Detail Date, Duration, and Character of Previous Attack, if any,

June 13th 1899 Confined in R.S.H. 8 months

Sleep, good Appetite, fair Bowels, Constipated

Personal and Medical History of Isaac Silverstein

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8 PRESENT WEIGHT, 127 lbs USUAL WEIGHT, NUTRITION, Fairly well:

WOUNDS, Abnormalities, left pectoral region scarred: umbilical hernia Condition of Skin, Sluggish + oily

TONGUE, Coatings, Promptness of Movement, Coated; sluggish

PUPILS, Equality, Equal Size, Normal Response to Light, Slow Accommodation, Slow

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, No

HEARING, Good

COORDINATION, Arms, Normal Legs, Normal. Hesitating Grasp, + unsteady, other tests.

TREMORS, Hands, Noted Tongue, noted. Facial Muscles, General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Yes Hesitating, Yes Slow,

FACIAL EXPRESSION, Sensibility, Lessened

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest symmetry: Sym

Expansion: Good

Breath Sounds: Sym

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient was committed before. This commitment, he manifests more dementia; a great loss of memory for both old + recent events + quite exalted; speech somewhat incoherent at times; goes from subject to subject, without finishing his line of thought. Gives history of specific trouble, which is probable cause of disease.

Personal and Medical History of *Isaac Silverstein*

1901

This patient was brought here by Henry Gallick, in good physical condition, with the following history. There is no history of Consanguinity or heredity; this is not first attack; one occurred June 13/1899: duration Eight months (?), when he was committed to Rochester; result improvement. First symptoms of this attack manifested six months after his return. Disease seems Stationary; there are variable rational intervals, but these are irregular. Derangement now manifested by continuous talking. Patient is not disposed to injure others, nor suicidal; no filthy or destructive habits. Previously, he showed peculiarities. There is no history of intemperance in patient or his parents; no severe disease or no head-injury mentioned. Has been confined, as above stated, for 8 months (?) at this (Rochester) hospital. Cause of Disease, unknown. No treatment pursued except when he was here last. On personal Examination, patient is found to be mentally dull. (N.B. see Vol. 43 Page 149 No 5339 for previous history of patient, who was here from June 15/99 to October 9/99. Discharged May 2/1900. Improved). —

Jan 25 On admission, was put on B.3 (G. H. R. R/ft. Complexion dark; hair brown; eyes blue; condition of skin good: large scar on left side; vaccination scar on left arm: Is clean, teeth. 3 gone, right upper jaw; 2 gone, left lower jaw. Behavior good. Ex^d by M. F. Fahey) —

" " Received on Ward. (Is returned for the 2^nd time) — Mind seems quite clear; answers

28 questions intelligently — Jan 28. Walks the hall, talking & laughing to himself — Jan 29. He

31 takes no interest in his surroundings. Jan 31. no change in condition to report —

Feb/1/28 Wt 146^lbs. Ht. Feb 1. Patient talks readily, but evasively. Physical condition good.

March Had injected thumb. April. no apparent change in condition. May 1. Wt 143^lbs —

May 15 Transferred to B^a. Is well behaved. Talks at times to himself: occasionally abusively

31 & insolent. Does nothing. Shows no interest in anything: surly & evasive in manner.

Says "he supposes he was not right mentally" — May 31. Condition same as above given. No

Dec 30 noticeable change — July 30-31. Visited by lady. No apparent change, mentally or

July 31 physically: attends amusements: talks considerably to himself: has no ambition,

Aug 1 1902 and take no interest in his surroundings. Aug. Wt 148^lbs; Nov. Wt 150^lbs. Jan 31/02. Has

July 31 shown little change, since here: converses freely but shows incoherence & delusions.

When by himself, soliloquizes: habits tidy: well-behaved.

Feb. 1/02 Wt. 153^lbs. Feb. 5 Visited by mother.

Mar. 7. Not improved much; noisy; troublesome maniacal at times. Sent home.

Personal and Medical History of

Personal and Medical History of Harlow Van Vliet

O.S. Pine Rd. Soldiers Home, Granite Falls, was last Physc.

Whole No. 5743.

Residence, Soldiers Home. continuous residence in Minnesota since 1858, & is a resident of Dakota County, Minnesota, living with brother near Farmington and became an Inmate of State Soldier's Home, November 27/1900

Date Admission, January 26th 1901.

Admitted by Dr. E. J. Warnus hour, 7.30 P.M.

How Sent, F.C. Harvey. Jail P. Hennepin County

Sex, Male Age, 67.

Civil Condition, Bachelor

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Common school

Profession of Religion, Not a church member

Habits, Has been intemperate in drink.

Nativity, New York: (Parents also born there)

Physicians Committing, O. S. Pine & W. G. W. Tupper

Correspondents, Cyrus Van Vliet (brother) Farmington, Minn

No. for Year, 106.

Insane Relatives, Not as known

Cause Exciting, Unknown

Cause Predisposing, "Chronic".

Form, Senile Dementia

Accompanying Bodily Disorder, Epilepsy

Suicidal or not, Not: but will injure others.

Date of this Attack, probably 2 weeks ago

Duration, probably 2 weeks.

No. of Attack, — Many — (Epileptic more than 20 yrs)

No. of Admission, 1st

Age First Attack, about 45

Time of Leaving, Feb. 10/1901.

Time in Hospital, 15 da.

Result, Died. Chr. Interstitial nephritis.

Examination on Admission by Dr. E. J. Warnus *Date of* Jany 28/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

REASONING POWER, Ordinary Subjects, Poor

Special Subjects,

Own Mental State, Quite Normal

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather indifferent

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead: no history of Insanity

Paternal Relatives, no history of Insanity -

Mother, Dead

Maternal Relatives, no history of Insanity

Brothers and Sisters, well -

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Epilepsy: Large scar on top of head: left leg has been broken.

HABITS, Drinking and Smoking, Excess

HEADACHES, VERTIGO, OR CONVULSIONS, Epilepsy

OCCUPATION, Healthy or not, Farmer

Detail Date, Duration, and Character of Previous Attack, if any,
has had "Epileptic Spells" for past 20 years

Sleep, poor Appetite, good Bowels, Constipated.

Personal and Medical History of Harlow Van Vliet

Harlow Van Vliet

Brother

C Van Vliet - P.O. Farmington

Telegraph Address Castle Rock -

ERISTICS.

WEIGHT, NUTRITION, Poorly

Loud Condition of Skin, Pathy anaemic

sivest. —

ight, R. Yes Accommodation, Yes

t respond to light, caused by old inflam-
ris

inate; Is by Grasp, unsteady; Cannot stand up.

l Muscles, General,

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, Yes Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, 2nd Sound Exaggerated

Size, Normal

Apex Beat, "

Murmurs, None noted.

ARTERIES,
Sclerotic

LUNGS,
Chest Symmetry: Sym
Expansion: good
Breath Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient gives a history of Epileptic trouble, which has been troubling him the past 20 years. He was recently sent to "Soldiers' Home", but became very troublesome & confused, after "Spells," becoming destructive & pugnacious.

The case is one of mild dementia, following Epilepsy, which becomes more marked with the frequency of his "Spells" —

Personal and Medical History of Harlow Van Vliet

O.S. Pine Md. Soldiers Home, Granted Leave until last of Sept.

Whole No. 5743.

Residence, Soldiers Home. continuous residence in Minnesota since 1858, is a resident of Dakota County, Minnesota living with brother near Farmington and became an Inmate of State Soldier's Home, November 23/1900

Date Admission, January 26th 1901.

Admitted by Dr. E. J. Wanous hour, 7:30 P.M.

How Sent, F. C. Harvey, Jo. P. Hennepin County

Sex, Male Age, 67.

Civil Condition, Bachelor

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Common school

Profession of Religion, Not a church member

Habits, Has been intemperate in drink.

Nativity, New York: (Parents also born there)

Physicians Committing, O. S. Pine & W. G. W. Tapper

Correspondents, Cyrus Van Vliet (brother) Farmington, Minn

No. of Admission, 1, 51

Age First Attack, about 45

Time of Leaving, Feb. 10/1901.

Time in Hospital, 15 da.

Result, Died. Chr. Interstitial nephritis.

Examination on Admission by Dr. E. J. Wanous *Date of* Jany 28/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State, quite normal

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather indifferent

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Dead: no history of Insanity

Paternal Relatives, no history of Insanity

Mother, Dead

Maternal Relatives, no history of Insanity

Brothers and Sisters, well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Epilepsy: Large scar on top of head: left leg has been broken.

HABITS, Drinking and Smoking, Excess

HEADACHES, VERTIGO, OR CONVULSIONS, Epilepsy

OCCUPATION, Healthy or not, Farmer

Detail Date, Duration, and Character of Previous Attack, if any,
has had "Epileptic Spells" for past 20 years

Sleep, poor Appetite, good Bowels, Constipated

Personal and Medical History of Harlow Van Vliet

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poorly

WOUNDS, Abnormalities, "tattoo-mark" in back of left hand. Condition of Skin, rather anaemic

TONGUE, Coatings, Promptness of Movement, Coated; Dry; Protrudes. —

PUPILS, Equality, Size, Response to Light, R. Yes Accommodation, Yes

SIGHT, Impaired.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Left eye does not respond to light, caused by old inflammation of iris

HEARING,

COORDINATION, Arms, uncoordinate Legs, uncoordinate; Leaves Grasp, unsteady; Cannot stand up.

TREMORS, Hands, Coarse Tongue, Coarse Facial Muscles, General,

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, Yes Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, 2nd Sound exaggerated

Size, normal

Apex Beat, "

Murmurs, None noted.

ARTERIES,
Sclerotic

LUNGS,
Chest-Symmetry: Sym
Expansion: good
Breath-Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient gives a history of Epileptic trouble, which has been troubling him the past 20 years. He was recently sent to "Soldiers' Home", but became very troublesome & confused, after "Spells," becoming destructive & pugnacious.

The case is one of mild dementia, following Epilepsy, which becomes more marked with the frequency of his "Spells"—

Personal and Medical History of *Harlow Van Vliet*

1901

Patient was brought here by Sheriff Wegarden, in poor physical condition, with following history. As to consanguinity, unknown. Patient has been an epileptic for more than 20 years; now has paroxysms about once a week; shows violence, especially at night. Disease appears increasing: he is rational, except for a few hours, following epileptic attacks; and lately, at night, irrational without attacks of Epilepsy. Derangement now shown by fits of violence, after epileptic attacks; confusion of ideas, at times; incoherence in speech; for past week, has shown violence toward self & others, without epileptic fits. Is disposed to injure others after epileptic fits; is often violent for 3 or 4 hours: has not attempted suicide: no filthy or destructive habits. No insane relatives known. Case is one of progressive epilepsy. Patient has been intemperate in drink — He has been confined & restrained at "Soldier's Home" for two weeks. Cause of the disease, unknown. Has been treated by general care & bromides. On Examination, he said little; was stupid and dull: appearance & manner, dull & feeble. Commitment made for reasons that he perpetrates acts dangerous to self, after spasms, by pounding head: by his threats & otherwise that he has dangerous tendencies: would, if permitted, wander about & be exposed to want of food or shelter & to accidents: His disease is of such a nature & in such a stage, as to require, for his recovery, care and treatment while under legal restraint. —

Jan 24 On admission, was put on T.W. (G.H.N. R'pt. Complexion dark: hair gray & bald; eyes dark blue; condition of skin fair; back covered with small sores or spots; eagle tattooed on back of left hand; scar on left wrist; scar on top of head: Is clean: Eyes very weak; teeth all out: behavior good; " " is quite feeble: Ed'y J. Howe & W. F. Knutson). — Allowed on ward: appears very nervous, unsteady & has various delusions. Saw Dr. Is destructive & filthy: albumen in urine.
" 29 Given dress, for the day. Feb 1 Is again in bed — Feb 4 125# — Is very restless & destructive
" 31 Patient is suffering from nephritis — Feb 9. very restless & weak: unable to move. Feb 10. Continues to fail and Died at 7.05 P.M. —
Feb 9/10

— Died —

Personal and Medical History of

Personal and Medical History of Frank Richardson

Whole No. 5746.

Residence, Cannon Falls, Minn.

Became resident of State about 1890: Resident of County, abt. 1890.

Date Admission, January 28th 1901.

Admitted by Dr. E. J. Wanous hour, 7.30 P.M.

How Sent, Axel Staller. Sheriff. Goodhue County

Sex, Male Age, 43

Civil Condition, Married

Children, 4 Age Youngest Child, —

Occupation, Gardener

Degree Education, Partially College

Profession of Religion, Methodist

Habits, No history of intemperance.

Nativity, Kenyon, Minn: (Parents born in U.S.)

Physicians Committing, B. Jachnig + L. L. Wayland

Correspondents, Mrs. Alice Richardson Cannon Falls, Minn

No. for Year, 109.

Insane Relatives, None so far as known

Cause Exciting, Influenza

Cause Predisposing, previous attacks

Form, Acute Melancholia

Accompanying Bodily Disorder, Seems very feeble

Suicidal or not, Suicidal propensity active.

Date of this Attack, Jany 14th 1901.

Duration, about 14 Days

No. of Attack, 3rd. (one, 12 yrs ago: one, 8 years ago)

No. of Admission, 1st time (was at Yankton, Dak)

Age First Attack, about 31.

Time of Leaving, May 11 - 1901.

Time in Hospital, 3 yrs 13 Ds

Result, Recovered. Discharged Nov 22/1901

Examination on Admission by Dr. E. J. Wanous *Date of* Jany 29/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events, —

Recent Events, — Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Illusive

REASONING POWER, Ordinary Subjects, —

Special Subjects, —

Own Mental State, —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS, Yes

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, 2 weeks

ONSET, Gradual or Sudden, Sudden

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

2 sisters + 1 brothers of father died with Consumption

Father, Living; very nervous

Paternal Relatives, no history of Insanity

Mother, Mother died of malaria

Maternal Relatives, no history of Insanity

Brothers and Sisters, 3 Quite well

Children - 4 - well.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

Patient was 'very nervous' in childhood.

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

3d attack: first 12 years ago.

Sleep, Appetite, Bowels,

all good up to time of beginning trouble

Personal and Medical History of Frank Richardson

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, Poorly.

WOUNDS, Abnormalities, No Condition of Skin, Sluggish. Cyanosed

TONGUE, Coatings, Promptness of Movement, Coated; Sluggish.

PUPILS, Equality, Eq. Size, Eq. Response to Light, Sluggish Accommodation, No.

SIGHT, Impaired.

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING,

COORDINATION, Arms, Very unsteady in Legs, Grasp,

TREMORS, Hands, Marked Tongue, Facial Muscles, General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Will not talk Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, Normal

HEART, Regularity, Rapid, regular CRANIAL MEASUREMENTS.

Strength, Sounds, Normal Circumference Horizontal,

Size, " Circumference Verto-Mental,

Apex Beat, " Naso-Occipital Arc,

Murmurs, None noted Binauricular Arc,

ARTERIES, Ant-Post Diameter,

Transverse Diameter,

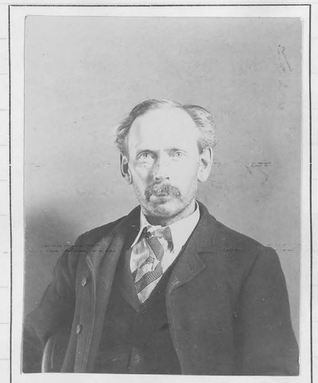
LUNGS, Binauricular Diameter,

Chest symmetry; Sym Facial Length,

Expansion; — Length-Breadth Index,

Breath Sounds; Normal Volume,

Peculiarities in Shape,



EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia.

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient does not talk; acts rather fearful + as though controlled by some delusion. Indications of hallucinations are also present. Patient has been committed before. His wife states that this attack came on with an attack of La Grippe. Patient has had much trouble with Constipation + Insomnia. —

Personal and Medical History of *Frank Richardson*

Personal and Medical History of

1901

This patient was brought here by Deputy Sheriff Lundquist, attended by Alice Richardson, in poor physical condition & with following history. As to consanguinity not known: this is not 1st attack; he accurred 12 years ago; another, 8 years ago; duration 6 months, first, and 6 weeks, second: has been at Yankton, Dakota & was legally discharged in first attack. First symptoms of this attack were manifested January 14th 1901; an attack of Influenza, followed by mental aberration. Disease seems stationary; is variable; but intervals not regular. Derangement is now manifested by incoherent ideas; mind seems to be a blank; he fears personal injury & not disposed to injure others. Suicide attempted, not in this attack; tried to take poison; propensity now active. No filthy or destructive habits; no insane relatives, as far as known; as to any previous peculiarities, not known; no history of intemperance in patient or parents; nor of any severe disease &c or head-injury; has not been restrained or confined; Cause of the disease is influenza; has been under treatment by sulfonal and opium: favorable from first; negative from last: On personal Examination, there seems to be indication of General Paresis.

Jan 28 On admission, was put on T.W. (G.H.N.R)pt. Complexion fair; hair brown & gray; eyes blue; condition of skin fair; large red spots on back & abdomen; small scar on right knee; vaccination on left arm; red pimples-rash on buttocks & thigh. Scabies. Sutbin for condition. Could not ascertain if there were any gone. Is restless & quite unsteady on legs. (By E.E. Moore)

" " Received on Ward: given bath & put to bed: Is extremely restless, destructive, maniacal refused nourishment. Jan 30. Is stubborn & must be fed - Feb 1. Patient appears

30 very much Confused & bewildered: has various delusions & hallucinations. Thinks

Feb 1 he destroyed "his entire family". Mistakes people on the ward for acquaintances - Says he hears people calling to him - Feb 11 (14-Day record up) = Feb 12. Transferred to

11 Mar 5 Was visited by wife & son: Seems bewildered & depressed: frequently refuses nourishment.

May 11 Seems much brighter - partly recovered - Taken home by wife.

Discharged

Personal and Medical History of Isaac. (D) Bryenton

Whole No. 5750.

Residence, Stillwater, Minnesota.

Became resident of State, 15 years ago: of County do do

Date Admission, 4th February 1901.

Admitted by Dr. E. J. Wanous. hour, 7.30 P.M.

How Sent, Frank. T. Wilson, Jof P. Washington Co

Sex, Male Age, 35

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Lumberman

Degree Education, Common School

Profession of Religion, Methodist

Habits, no history of intemperance

Nativity, Born New Brunswick: fathers England: Mother Scotland

Physicians Committing, P. J. Merrill and G. N. Watier

Correspondents, Mrs Geo. S. Dufor (Geo Bubar?)
619 Rice St. Stillwater Minn
(Daughter)

No. for Year, 113.

Insane Relatives, none

Cause Exciting, unknown

Cause Predisposing, probably head-injury

Form, Acute Delirious Mania

Accompanying Bodily Disorder, admitted Syphilis: not certain

Suicidal or not, not

Date of this Attack, about 2 years ago

Duration, about 2 years

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 33

Time of Leaving, Feb. 16' 1901.

Time in Hospital, 1 da.

Result, Died. Acute Del. Mania.

Examination on Admission by Dr. E. J. Wanous *Date of* July 5/1901.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects,

Special Subjects, will not reason

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Exalted

DELUSIONS, Systematized, None of Transitory, "

Special Subjects, " Expressed

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, 3 days (?)

ONSET, Gradual or Sudden, Sudden

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Living — well — ~~no history of insanity~~

Paternal Relatives, No history of insanity

Mother, Living

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

10 years ago, struck on head
4 " " again " "

HABITS, Drinking and Smoking, not of late

HEADACHES, VERTIGO, OR CONVULSIONS, no (?)

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, — Appetite, — Bowels,
good up to a month ago

Personal and Medical History of Isaac. (D) Bryenton

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, Poorly

WOUNDS, Abnormalities, no, except scar on head Condition of Skin, anaemic

TONGUE, Coatings, Promptness of Movement, Coated

PUPILS, Equality, L. Dilated Size, Response to Light, Normal Accommodation, Normal

SIGHT, Good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,

HEARING, Good

COORDINATION, Arms, some incoordination Legs, Fingers knows, eyes shut, hesitating, Grasp, Etc; Standing, Gen Unst, compensates Standing, unsteady

TREMORS, Hands, Marked Tongue, Facial Muscles, General,

PATELLAR REFLEX, Lost Other Reflexes,

ARTICULATION, Slurred, Hesitating, Yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, (Rapid) very rapid

Strength, Sounds, Clear

Size, Normal

Apex Beat, "

Murmurs, None noted

ARTERIES,

LUNGS,
Chest symmetry; Sym
Expansion; Fair
Breath Sounds; Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient, since Committed, has become very maniacal, & perhaps delusional; at times acts very fearful; has to be restrained; temp. very high, most of the time. Condition came on 3 days before commitment, though his friends had noticed him as acting "peculiar" for a years & months previous to attack was still more marked.

Personal and Medical History of *Isaac (P) Bryenton*

Personal and Medical History of

190

This patient was brought here by Deputy Ignotius Lazendin, attended by George Bular, with following history. Patient is in poor physical condition. There is no history of consanguinity, heredity or intemperance. This is first attack: first symptoms manifested about 2 years ago, by slight change in manners & habits. Disease seems increasing: not variable; no rational intervals. Derangement now shown by acts & mania. Patient is disposed to injure others, but not suicidal. No filthy or destructive habits: before accession of the disease there was nothing marked: only a gradual change in habits, temper & disposition; also pursuits. No severe disease noted, only injury to head - ten years ago - struck on head with a spreader stick: was unconscious for a time; went to work next complained of head, for several months afterward. No restraint or confinement has been employed. Cause of disease is unknown - Admitted specific disease (Syphilis): not certain. Has been treated by nerve sedatives & Iodides. On personal examination nothing with

Febr 8 On admission, was put on T.W. (G.H. Pettit. Complexion dark: hair black: eyes brown: condition of skin fair: one nail on right shoulder: large red spot on calf of each leg: 3 scars on back of neck: slight eruptions on body: is clean. Teeth: 3 out of upper right: 2 gone upper left: 1 gone lower right jaw. Is inclined to be pugnacious: was brought in cuffs: Ex'd by L.D. Page, E.E. Moore and John Howe). ———

" " Received on Board: Is very maniacal: must be put in protection Sheet: resists any attention given by nurse: when out of protection-sheet, throws himself about in the room —

8/10 Ordered Sponge-bath. Febro - must be put in protection-sheet to keep him from

12 injuring himself. Febyr. No change: Continues restless & maniacal. Kept in

15 protection Sheet. (Acute Delirious mania) - Febyr. No improvement noted.

16 Failed rapidly & died today.

Died

Personal and Medical History of Henry Hamann

Whole No. 5755.
Residence, Empire, Dakota Co: Minn.

Date Admission, 9th February 1901.
Admitted by Dr. E. Z. Wambus hour, 7:30 Pm
How Sent, Thomas. O. Moran. Jeff. Dakota Co.
Sex, Male Age, 32 years
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Country Schools
Profession of Religion, Methodist
Habits, no history of Intemperance
Nativity New Market Minn: parents born in Germany
Physicians Committing, Dr. Vanbapperlen & J. C. Fitch
Correspondents, address Joseph Hamann (a brother) Farmington, Minn

No. for Year, 118
Insane Relatives, none
Cause Exciting, Dont Know
Cause Predisposing, not stated
Form, ac Mania
Accompanying Bodily Disorder, has had Dyspepsia for long time
Suicidal or not, not: but injured 2 brothers with revolver.
Date of this Attack, 2 or 3 weeks ago
Duration, 2 or 3 weeks
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, — 32 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. Z. Wambus *Date of* Febry 11/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish
MEMORY, Past Events, impaired
Recent Events, — Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
rather Dull
REASONING POWER, Ordinary Subjects,
Special Subjects,
Own Mental State, Appreciates Condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather indifferent
DELUSIONS, Systematized, of persecution Transitory,
Special Subjects,
HALLUCINATIONS, of hearing
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living
Paternal Relatives, no history of Insanity
Mother, dead: Dropsy
Maternal Relatives, none Insane
Brothers and Sisters, well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Stomach trouble: Typhoid, 2 years ago
HABITS, Drinking and Smoking, to excess.
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Farming
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, poor.

Personal and Medical History of Henry Hamann

5755
47/393
M. Henry Hamann
Copy of Order for Hearing Petition of Peter Hamann a resident of said Co of Dakota for appointment of as guardian for the Person & Estate of Henry Hamann insane; served and service admitted 14th February 1901
(Papers filed with commitment papers.)

PHYSICAL CHARACTERISTICS.

USUAL WEIGHT, NUTRITION, Fair
Condition of Skin,
nse to Light, ns Accommodation, slight
ead: ready & Grasp, steady
TREMORS, Hands, Tongue Facial Muscles, General,
PATELLAR REFLEX, sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, normal
Strength, Sounds, normal
Size, normal
Apex Beat, "
Murmurs, none noted
ARTERIES, Normal
LUNGS, Chest Symmetry: Sym Expansion: Good Breath Sounds: normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Insomnia
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient is of a very low mental development: has delusions of poisoning: says his brothers tried to get rid of him: that they put poison into his food: that he heard them talking against him. Patient is always suspicious. Case is one of Paranoia. Physically, well nourished.

The dilated pupil he says he has had since Childhood. A difference of pigmentation of eye is also noted.

Personal and Medical History of Henry Hamann

Whole No. 5755.
Residence, Empire, Dakota Co: Minn.

Date Admission, 9th February 1901.
Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.
How Sent, Thomas. O. Moraw. Jeff. Dakota Co.
Sex, Male Age, 32 years
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Country Schools
Profession of Religion, Methodist
Habits, no history of Intemperance
Nativity, New Market, Minn: Parents born in Germany
Physicians Committing, Dr. Vanbappelen & J. C. Fitch
Correspondents, address Joseph Hamann (a brother) Farmington, Minn

No. of Attack, 1st
No. of Admission, 1st
Age First Attack, — 32 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* Febry 11/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish
MEMORY, Past Events, impaired
Recent Events, — Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
rather dull
REASONING POWER, Ordinary Subjects,
Special Subjects,
Own Mental State, Appreciates Condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather indifferent
DELUSIONS, Systematized, of persecution Transitory,
Special Subjects,
HALLUCINATIONS, of hearing
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living
Paternal Relatives, no history of insanity
Mother, Dead: Dropsy
Maternal Relatives, None insane
Brothers and Sisters, well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Stomach trouble: Typhoid, 2 years ago
HABITS, Drinking and Smoking, to excess.
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Farming
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, poor.

Personal and Medical History of Henry Hamann

PHYSICAL CHARACTERISTICS.

HEIGHT, Not taken PRESENT WEIGHT, Not taken USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, Condition of Skin,
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, no Size, left dilated Response to Light, no Accommodation, slight
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good
COORDINATION, Arms, good by tests Legs, made: ready × Grasp, steady
TREMORS, Hands, slight Tongue, Facial Muscles, General,
PATELLAR REFLEX, sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, normal
Strength, Sounds, normal
Size, normal
Apex Beat, "
Murmurs, none noted
ARTERIES, Normal
LUNGS, Chest Symmetry: Sym Expansion: Good Breath Sounds: Normal

CRANIAL MEASUREMENTS.
Circumference Horizontal,
Circumference Verto-Mental,
Naso-Occipital Arc,
Binauricular Arc,
Ant-Post Diameter,
Transverse Diameter,
Binauricular Diameter,
Facial Length,
Length-Breadth Index,
Volume,
Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Insomnia
BOWELS, Present Condition, Constipated

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient is of a very low mental development: has delusions of poisoning: says "his brothers tried to get rid of him: that they put poison into his food: that he heard them talking against him". Patient is always suspicious. Case is one of Paranoia. Physically, well nourished.

The dilated pupil he says he has had since childhood. A difference of pigmentation of eye is also noted.

Personal and Medical History of *Henry Hamann*

1901

This patient was brought here (in restraint), by Deputy J. J. Grisim, attended by W. H. Brownell, in fair physical condition, with following history of case. There is no history of consanguinity, or insanity, previous peculiarities, intemperance, or head injury; but he has had dyspepsia for a long time. This is the first attack; first symptoms manifested about 2 or 3 weeks ago; started talking that neighbors wanted to poison his horse. Disease seems increasing; not variable; no rational intervals; derangement now shown in that he claims that his brothers want to poison his milk and flour, and very incoherent talking. Is disposed to injure others: has shot at his brothers; slightly injured two of them, with a revolver; has not attempted suicide; propensity not active; no filthy or destructive habits. Has not been restrained or confined. Dont know cause of the disease: no treatment: On personal Examination, patient is very excited; talks incoherently about several things, not being able to concentrate his attention on anyone subject. —

Feb 9 On admission, was put on T.W. (G.H.N. Rpt. Hair, dark brown; complexion dark; eyes blue; condition of skin good: mole on left hip; third toe on right foot missing; is dirty: teeth: 3 out in right upper and 2 in left upper jaw: Behavior good. Patient was brought in with muff and straps on his ankles.) —

" " Received on ward: Given bath. Is quiet: well-behaved: answers questions readily:
14 Is delusional: says "brothers tried to poison him". Feb 14. Continues well-behaved.-
23 Assists with work. Feb 23. (14-day record up). Is clean in habits. Still
28 delusional: good physical health: Feb 28. Inclined to be stubborn. March acted
March peculiar: refused to do work: attacked nurse Herzog.: had to be held on floor. —
May 29 Wt 166#. May 29. Attacked nurse: had to be held: refused to be shaved. July 31. Is quiet,
July 31 but still has "delusions of persecution". Aug. Wt 163#. Aug. Attempted to elope-
Aug 7 Is stubborn + unruly: will not talk much. Jan 1/01. Wt 177#. Jan 31/01. Restless, most
Jan 31 of time, careless + indifferent: health good: will talk harsh. Aug. Feb. 1/02 - 175#.
Aug 30/02 Dull + listless; stubborn.
June 27/03. Usually dull + listless; does no work. Today was inclined to fight and was held for a few minutes.

Personal and Medical History of

Personal and Medical History of Geo. E. Gillott

Application based on the grounds that his case has been referred to the State Board: Insane case at once.

Whole No. 5756. not resident of Minnesota

Residence, Charles City, Iowa. — " of Mower Co.
(see note in margin)

Date Admission, 10th February 1901.

Admitted by Dr. E. J. Wanous hour, 2.30 P.M.

How Sent, S. E. Washburn, Jof P. Mower Co.

Sex, Male Age, 21

Civil Condition, married

Children, None Age Youngest Child, —

Occupation, Laborer

Degree Education, Common School

Profession of Religion, not church member

Habits, No history of Intemperance

Nativity, Iowa (near Charles City); Father's U.S. Mother's Iowa

Physicians Committing, A. W. Allen & Homer D. Pierson
Family Physician not known

Correspondents, Mr. Edward E. Gillott
(Father) Austin, Minn.

No. for Year, 119.

Insane Relatives, none

Cause Exciting, not known

Cause Predisposing, previous attack

Form, Acute mania without delusions

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not; but threatens injury to others

Date of this Attack, not stated

Duration, — not stated —

No. of Attack, 2nd

No. of Admission, 1st time (was at Independence Iowa 6 mos - in 1898.

Age First Attack, about 18 —

Time of Leaving, May 29 — 1902 —

Time in Hospital, 1 Yr 3 mos 17 Dys

Result, Improved: Disp. Nov. 8 - 1902 by Bd of C

Examination on Admission by Dr. E. J. Wanous *Date of* Febry 1/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

REASONING POWER, Ordinary Subjects, Fair

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Exalted

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS, Is very talkative & thinks he

SUMMARY, has not been treated well.

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Living — well

Paternal Relatives, No history of Insanity

Mother, Living — well

Maternal Relatives, No history of Insanity

Brothers and Sisters, 5 6 well

Children — no

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

no

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Laborer

Detail Date, Duration, and Character of Previous Attack, if any,

1898 - 6 months in Independence Hospital

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of Geo. E. Gillott

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8 PRESENT WEIGHT, not taken USUAL WEIGHT, NUTRITION, fairly

WOUNDS, Abnormalities, Condition of Skin, reddish

TONGUE, Coatings, Promptness of Movement, clear: prompt.

PUPILS, Equality, Equal Size, normal Response to Light, normal Accommodation, normal

SIGHT, Good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, no

HEARING, Good

COORDINATION, Arms, normal Legs, normal Grasp, other tests good

TREMORS, Hands, slight Tongue, slight Facial Muscles, General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irritable

Strength, Sounds, clear & distinct

Size, normal

Apex Beat, "

Murmurs, None noted

ARTERIES,
full

LUNGS,
Chest symmetry; sym
Expansion; normal
Breath Sounds; normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, regular

Give condensed statement of the present Mental and Physical Condition (the nearest type of Insanity, the most probable cause, the degree of invasion, estimate of previous mental grade, and any physical impairment).

The patient was committed at Independence in '98. Is very talkative & Exalted: speech is rambling & talks about being a "cow-boy", a "detective" "a great fighter" - says "he could not get along with his folks". Physically, fairly well-nourished; somewhat anaemic.
Condition is one of simple mania

Personal and Medical History of Geo. E. Gillotte

Application based on the Governor's that his case has been

1901

This patient was brought here by Deputy John C. Johnson in fair physical condition and with following history of case. As to any consanguinity, not stated. There is no history of insanity, previous peculiarities, intemperance, severe disease or on head-injury; this is not the 1st attack; one occurred in 1898; duration 6 months; was at hospital at Independence Iowa; discharged improved, we understand. When first symptoms of this attack were manifested is not stated; they were in various ways, but mostly in visionary projects: Whether, increasing, decreasing or stationary, is not known: not variable: no rational intervals. Derangement now shown by his accounts of himself which are improbable and he makes statements of various kinds, not supported by relatives & friends. Patient has threatened only to injure others; is not suicidal: no filthy or destructive habits. He has been confined for 6 months at Independence. Cause of disease not known: the only treatment was at Independence, we understand. On personal Examination, patient becomes very much excited on all subjects; his friends & relatives are in fear of him; he rises at nights & wanders about the house & acts, in many ways, mentally unsound. He needs medical treatment, while under legal restraint. ——— . ———

Feb 10 On admission was put on B^3 (G.H.N.A.P.H.) Complexion light; hair light; Eyes gray; condition of skin fairly clean: mole on left leg: 3 small scars on left leg: one scar on left elbow; scar on left wrist; one scar on forehead: is clean: teeth good. Behavior good: Examination made by James Sheehan. ——— . ———

" 11 Received on Ward. Is very talkative & elated: complains of some headache. Feb 11 Was
17 transferred to IW and put to bed. Feb 17. Seems much brighter and is given clothes.
18/ Transferred to D^3. Feb 23. Transferred to C^1. Mar 1. T 101° P 104: very delusional:
Mar 2/3 much disturbed: must be put in protection-sheet. Mar 3. Patient much improved.
7 Is up & dressed awhile, through the day. Mar 7. Given hot bath for sedative effect.
9/26 No result. Mar 9. Must again be put in protection sheet, up to March 26. Patient has been very restless & excited: seems now improved somewhat: taken out for regular
Apl 1/30 walk, each day. Apl 1. Still violent & troublesome: also filthy. Apl 30. Still continues as above: also destructive: has vomiting spell 4 to 5 days. Has been on milk diet, twice.
May 1 Patient put to bed: very much confused. T 101 6: on medicine. Teaspoonful T.I.D.
8/9 appetite good. May 8. Vomited several times, today. May 9. Refused to eat: was
10 fed by nurse. May 10 Continues to vomit (induces it by thrusting finger down
11/17 throat). Put in mufts: also masturbates. May 11. Given high enema. May 17 Up
onward: Eats well: bowels & urine regular: sleeps fairly well: Still noisy and excited
June 5 and uses obscene language. June 5. Transferred to B^3. July 31. But little change.
July 31 Physical condition good: inclined to pugnacity. Usually kept in "bay".
Aug 1 Wt 159#: Nov 1 Wt 156#. Nov 30. Has been, quite frequently, pugnacious, during
Nov 30 last three months, but works quite well onward: habits tidy: talks incoherently &
Dec 1/2 abusively. Dec 12. To B^2. Jany 3/02. Has improved considerably in mental and
1902 physical condition. Works well on ward: is very quiet: says he does not feel well
Jan 31 when questioned, but otherwise, does not complain: no indications of illness.

Personal and Medical History of

Feb 1 Wt. 157# Works on ward; quiet & well behaved.
May 1. Wt. 158½# Doing well; neat in person; works in kitchen. May 21 Visited by brother — sent home.

Personal and Medical History of

Whole No.

Residence,

Date Admission,

Admitted by hour,

How Sent,

Sex, Age,

Civil Condition,

Children, Age Youngest Child,

Occupation,

Degree Education,

Profession of Religion,

Habits,

Nativity,

Physicians Committing,

Correspondents,

No. for Year,

Insane Relatives,

Cause Exciting,

Cause Predisposing,

Form,

Accompanying Bodily Disorder,

Suicidal or not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. ..... *Date of* .....

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,

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not,

Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Appetite, Bowels,