MINNESOTA
HISTORICAL
SOCIETY

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

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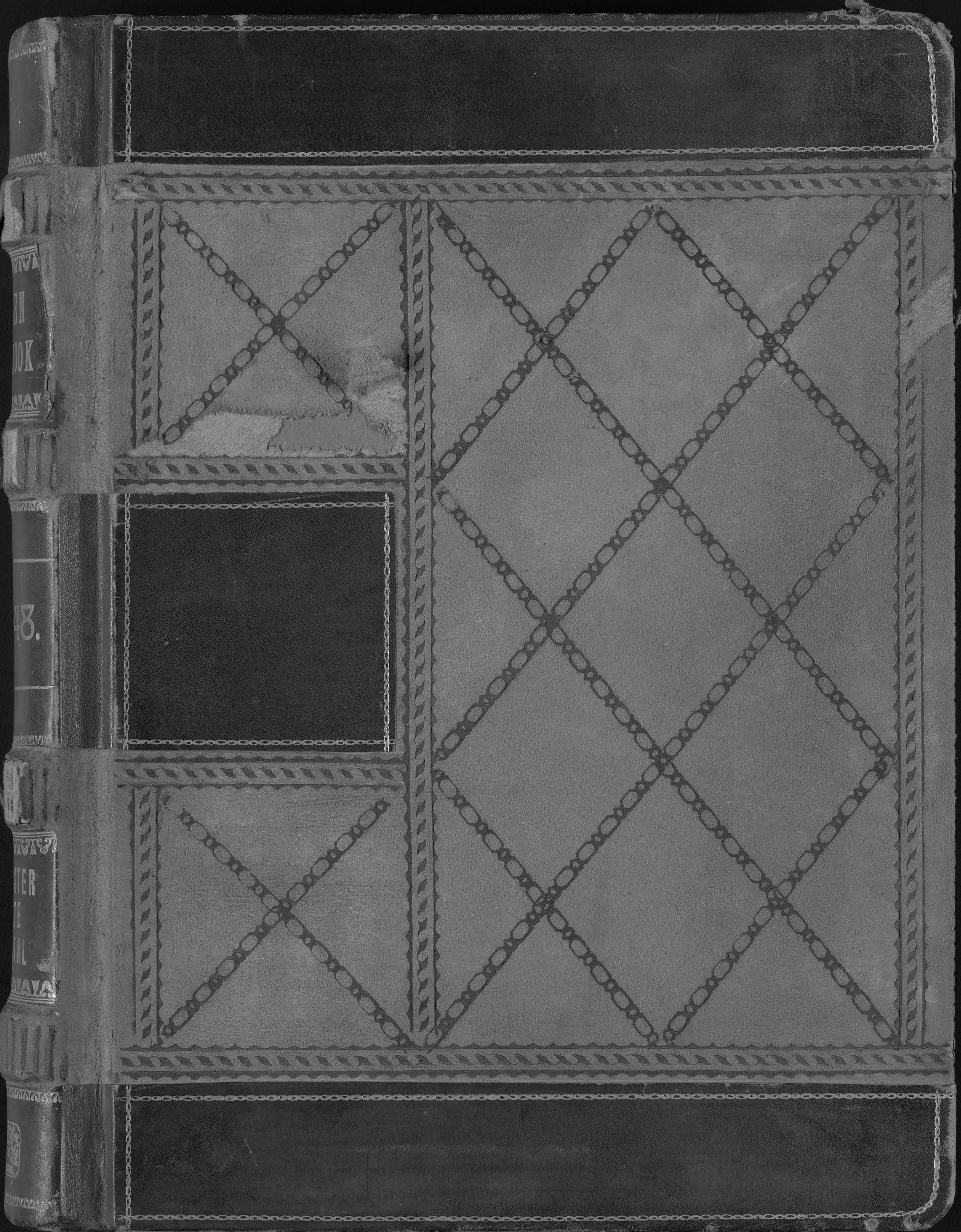

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PLEASE TAKE NOTICE.

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Respectfully,

Egbert, Fidlar & Chambers.

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Avery	Mary J.	201	was at St Joseph's - also Detention Hospital
Anderson	Cecilia	309	

Benson	Clara B.	45	
Bartholmy	Josie	61	was at St. Peter, Fergus Falls & C&C Hosp St. Paul
Boe	Anna	129	was at C&C Hospital, St Paul
Bergdahl	Anna	313	

C D E F G H I J K L M Mc N O P Q R S T U V W Y Z

Caldwell	Debby	21	
Conley	Gertrude	189	2nd admission —
Carey	Della	193	was at Hudson, Wis. Hospl:
Cline	Mary E.	205	was at Detention Hospital:
Cohen	Clara	277	was at St. Paul City Hospl:

Delaney	Margt.	225	was at St. Joseph's Hospl.
Dethorn	Kate	237	at City Hospital - 10 Days.
Di Bene	Zata	265	was at Detention Hospl.
Dwyer	Winifred	301	2d admission

Ehrenfeld	Rosina	81	2nd admission.
(herebefore as Rose Arenfelt)		—	
Ellestad	Mary	149	2nd admission—
Eichhorn	Minnie	165	

Fitzgerald	Mary	29	
Fitzpatrick	Ellen	77	
Ferber	Mary	109	was at C&C. Hospital—
Frost	Hattie	221	
Fein	Rebecca	253	was at Bethesda Hospl.
Fitzpatrick	Mary Ann #2	261	2d admission

E F G H I J K L M Mc N O P Q R S T U V W Y Z

Green	Mary	13		
Guttormson	Margar~~et~~it	133		

Harmon	Bertha	57	in City + Co hospital, 10 days	
Heath	Harriet	93	was at St Josephs Hospl –	1 mo –
Healy	Nora	141	was at St Josephs Hospl –	
Hammer	Barbara	233		
Horsman	Mary E	245		
Hochwein	Mary	249		
Harper	Mary	289		

G H I J K L M Mc N O P Q R S T U V W X Y Z

Johnson	Ingeborg	105	
Jenson	Mary	145	Was at "Detention Hospital"

I J K L M Mc N O P Q R S T U V W X Y Z

Kriess	Jennie M.	173	2nd ad: (also at Detention Hosp'l)

Leske	Mary	89	
Luserke	Myrtle	97	10 Days in C&C Hospital -
Larkin	Anna	177	2nd admission.

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Morganstein	Elvina	33	2nd admission.
Melander	Annie	69	at City Hospital, 3 weeks -
Murray	Mamie J.	157	
Moodie	Priscilla	181	
Monson	Louisa	217	
Miller	Anna$^{\#2}$	137	

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McNamara	Mary #2	17	2nd admission
McCarron	Mary	273	was at St Luke's Hospital

Ormsby	Lizzie	153	
Olson	Anna #3	269	Was at Bethesda Hospl (St Paul)

Pickering	Betsey	5	
Paddock	Alice	37	3d admission
Pottgieser	Sophie	41	
Parsons	Elizabeth	73	
Proulx	Josephine	169	was at Detention Hospital -
Person	Lizzie	197	was in County Jail -
Proell	Mary	229	3d admission
Pringle	Stella A.	297	6 months in C&C. Hospl.
Pederson	Mary #1	305	2d admission
Peterson	Anna Margaret	65	

P Q R S T U V W X Y Z

Richards	Martha	101	at St Luke's hospl. 4 mos
Richardson	Mary K.	113	was cared for privately in Connecticut, 6 mos
Rietman	Jessie	125	
Redel	Minnie	281	

Swanberg	Emma	25	2nd admission
Staples	Catherine	85	has been in County Hosp
Sievert	Sarah nee Sarah Moran	117	6th admission
Siberson	Mary	121	{was in Mayo's hospital, Rochester and Palmyra Sanitarium}
Strong	Avelys Z.	161	
~~Spates~~	Belle W	185	
Swanson	Hannah	213	was in Bethesda Hosp
Schmelzer	Emma	317	2nd (here before as Emma Siegel)
Smith	Sarah	257	

S T U V W X Y Z

Tully	Mamie	9							

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Vaughn	Sarah A.	53	2nd admission

Westerberg	Britta	1	2nd admission here —
Webber	Sophie	49	In Gaol, 3 days.
Wegner	Augusta	241	3d ad: also in Faribault Hosp.
Waugestad	Anna	293	

V
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Young	Estelle O	209	was in C & C Hospital
Ziebell	Minnie	285	Was at Winona Genl. Hosp

Personal and Medical History of

Personal and Medical History of

Personal and Medical History of Britta Westerberg

Whole No. 6132.
Residence, St. Paul, Minn.
Resident of State 6 yrs: of County 6 yrs.
Date Admission, 18th June 1902
Admitted by Dr. C. L. Chapple hour, 650 Am
How Sent, E. W. Bazille, Jdg P. Ramsey County
Sex, Female Age, 74 years.
Civil Condition, Widow
Children, Two Age Youngest Child, 36 years
Occupation, Housework.
Degree Education, Commonschool
Profession of Religion, Lutheran
Habits, Not intemperate
Nativity, Sweden: parents also born there.
Physicians Committing, Louis A. Nelson and Olof Sohlberg
Correspondents, Mrs. Lena Anderson (Daughter)
920 - E Jessamine Street -
St Paul - Minn

No. for Year, 244.
Insane Relatives, None
Cause Exciting, Domestic troubles
Cause Predisposing, "Chronic"
Form, Senile Dementia
Accompanying Bodily Disorder, Insomnia &c
Suicidal or not, Yes, by choking -
Date of this Attack, 34 years ago
Duration, Seems continuous
No. of Attack, Not 1st (numerous).
No. of Admission, 2nd
Age First Attack, about 40.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale - *Date of* June 19-1902

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,
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,
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 Britta Westerberg

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft PRESENT WEIGHT, 113# USUAL WEIGHT, — NUTRITION, Good
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: white coating -
PUPILS, Equality, Yes Size, normal Response to Light, fair Accommodation, fair
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, — Legs, — Grasp, —
TREMORS, Hands, tremor Tongue, tremor Facial Muscles, — General, —
PATELLAR REFLEX, — Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, fairly strong
Size, normal
Apex Beat, normal
Murmurs, None
ARTERIES,
Sclerotic
LUNGS,
Chest symmetry: Yes
Expansion: fair
Breath Sounds: normal.
Passed June 20-1902: Ex? June 20th

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, ℥xx $\frac{11}{4}$ Sp. g. 1022 Reaction, acid ~~Color~~ Reddish yellow and Appearance, clear
Albumen, Heat 0 : nitric acid: 0 - Tanret's 0 - Sugar, Fehling's Sol: a trace : Bismuth: a trace
Casts and Crystals, — — — — — — — — — — —

GYNECOLOGICAL EXAMINATION, Slight laceration of perinæum: mucous membrane of urethra congested & prolapsed; Uterus retroverted & adherent: cervix somewhat atrophied.
MENSTRUATION,
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 is old & demented & is not able to understand nor appreciate well, what is said to her, nor where she is at.

Personal and Medical History of Britta Westerberg

1902

This patient was brought here by Emanuel Johnson, attended by Mrs. Matilda Bredahl, in fair physical condition, with following history of case. No history of Consanguinity, nor of heredity: This is not 1st attack: others occurred 34 years ago, & at irregular intervals: duration varying: Was sent ~~to this~~ ×Rochester Hospital: Sep 28 - 1898, Committed & discharged February 7 - 1900 - First symptoms of this attack manifested by melancholia, 34 years ago. - Disease seems increasing: variable & with rational intervals, but these not regular. Derangement now shown by homesickness, insomnia, restlessness. Is disposed to injure others: Attempted suicide by choking; propensity not active now: No filthy nor destructive habits. No history of any previous peculiarities, nor of intemperance, severe disease &c, or head injury. Has not been restrained nor confined. Supposed cause of the disease is domestic troubles. Treatment, none. On personal examination, restlessness, continually talking.

×Note: 2nd admission: here before from Sep 28 - 1898 to July 4 - 1899 & discharged February 7 - 1900, as improved. Form then "Chr. melancholia" (sec. dem): had numerous attacks. For further particulars see Volume 38 page 389 No - 5143. —— ——

June 18 On admission, was put on 7.VI. (G. H. N. Rpt. Complexion dark: hair gray: eyes blue: condition of skin normal: no marks, eruptions or bruises noted: two small scars on back: Is clean: patient has 4 upper and 3 lower teeth and a few roots. Resisted being undressed: does not speak or seem to understand English.) ——

Summary of 14 day record Dict. by Dr. O. C. Heyerdale.

June 18th 1902. Admitted on Inf. West bathed and put to bed: the case is one of senile dementia: her general health is quite good but is rather feeble: does not talk rationally or intelligently: During 14 days Tem. Pl. and Res. were about normal: took regular diet: bowels regular: is usually quiet: sleeps quite well: at times is somewhat restless: disturbed and noisy.

To Feb 1st 1903. Although not robust in health has had no special physical ailment with the exception of an attack of diarrhoea Nov 20th which lasted several days. She sleeps normally, appetite has been at times quite poor, unless watched secretes food about her person and afterwards strews it about the ward. Habits are untidy and at times filthy. Weight Nov 29th 132 lbs.

Patient is unable to speak English - talks incoherently to herself, takes no interest in any kind of work - attends no amusements but goes out for exercise.

See Files.

Personal and Medical History of

Personal and Medical History of Betsey Pickering

Whole No. 5141.
Residence, Fillmore County, Minn —
Resident of this (Fillmore) County, more than 40 yrs
Date Admission, 30th June 1902
Admitted by Dr O. C. Heyerdale hour, 9.45 Am
How Sent, E. V. Farrington, Jof P. Fillmore County
Sex, Female Age, 77 (about)
Civil Condition, single —
Children, None — Age Youngest Child, —
Occupation, Housekeeper
Degree Education, Good: Common school
Profession of Religion, M. E
Habits, not known, as to intemperance —
Nativity, N. H. — parents also born there —
Physicians Committing, J. D. Utley and Cyrus. B. Eby.
Correspondents, (Sister) Mrs Lydia Churchill
Spring Valley Minn

No. for Year, 253.
Insane Relatives, not known to be —
Cause Exciting, none developed
Cause Predisposing, probably age
Form, Senile Dementia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, never attempted —
Date of this Attack, about 6 years ago
Duration, " " — probably
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, about 71 —
Time of Leaving, 19 July 1902
Time in Hospital, 19 Days
Result, Died: Chronic Nephritis —

Examination on Admission by Dr. L. A. Lenton — *Date of* June — 1902

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,

Nothing determined

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,

Nothing dependable could be obtained from patient

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, ✓

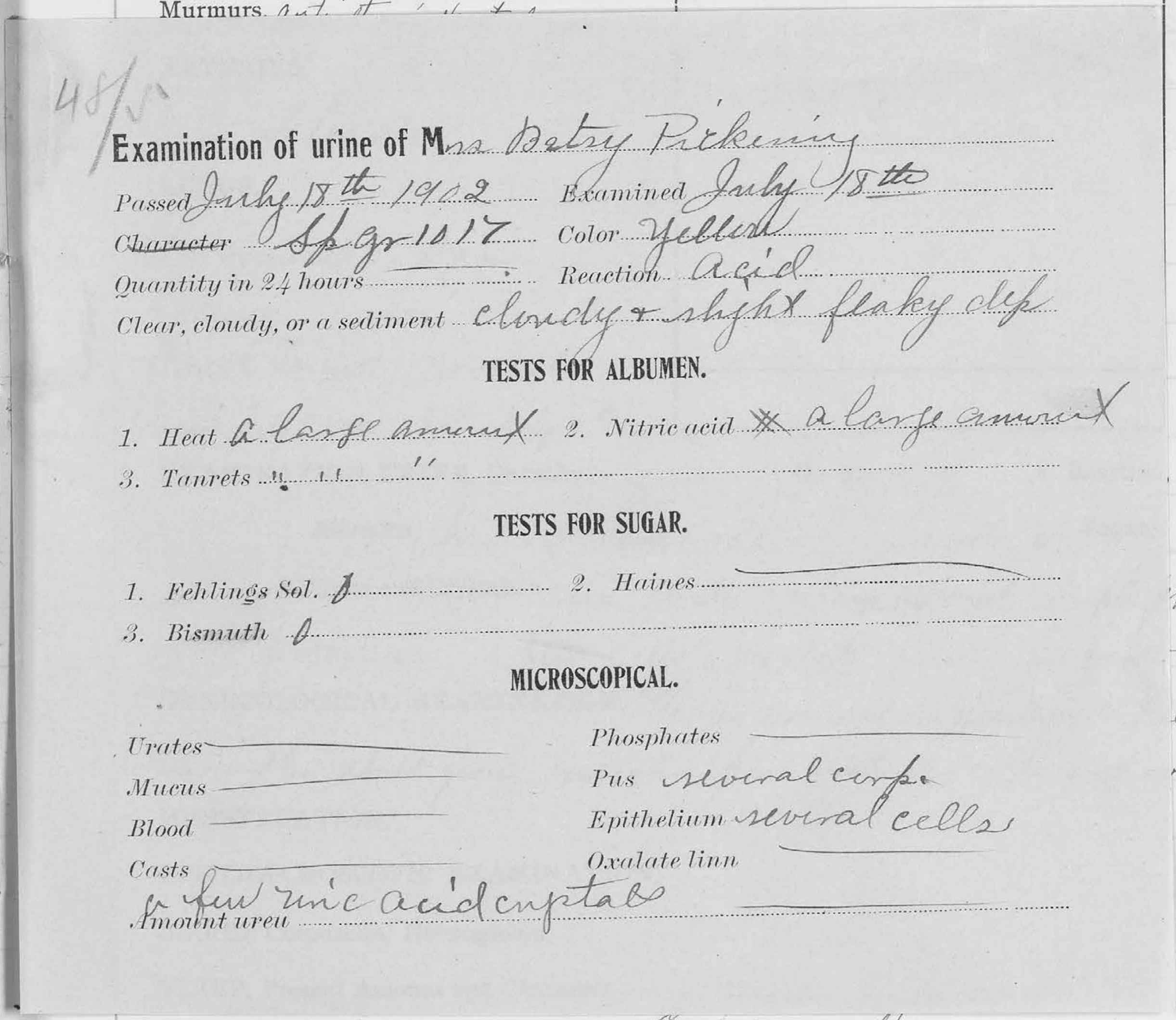
Personal and Medical History of Betsey Pickering

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 3in PRESENT WEIGHT, 169lbs USUAL WEIGHT, ✓ NUTRITION, Good
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, rough, dry, thick brownish Coating — prompt —
PUPILS, Equality, unequal (left larger) Size, Contracted Response to Light, Slow Accommodation, yes —
SIGHT, Says "she does not wear glasses" —
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal.
HEARING, Seems good —
COORDINATION, ~~Arms,~~ Too feeble to — Legs, attempt — Grasp, —
TREMORS, Hands, nothing Tongue, nothing Facial Muscles, nothing General, nothing —
PATELLAR REFLEX, absent — Other Reflexes, absent.
ARTICULATION, Slurred, ✓ Hesitating, ✓ Slow, Slow
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, irregular
Strength, Sounds, weak
Size, enlarged
Apex Beat, lowered to left
Murmurs, [illegible]

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,



48/5

Examination of urine of Miss Betsy Pickering
Passed July 18th 1902 *Examined* July 18th
~~Character~~ Sp gr 1017 *Color* Yellow
Quantity in 24 hours — *Reaction* acid
Clear, cloudy, or a sediment cloudy & slight flaky dep

TESTS FOR ALBUMEN.

1. *Heat* a large amount 2. *Nitric acid* a large amount
3. *Tanrets* " " "

TESTS FOR SUGAR.

1. *Fehlings Sol.* 0 2. *Haines* —
3. *Bismuth* 0

MICROSCOPICAL.

Urates —
Mucus —
Blood —
Casts —
Phosphates —
Pus several corp.
Epithelium several cells
Oxalate lime —
a few uric acid crystals
Amount urea —

alkaline Yellow Color and Appearance, Cloudy & flaky dep.
Fehlings' Sol 0 : Bismuth 0 —
phosphates, a large no. pus, a few corp-
crystals.
e: external hæmorrhoids: labia major oedema-
rine. —

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, since admission, has been quiet: is rather dull & sluggish: disinclined to make any physical effort. She suffers from incontinence of urine, so that she is untidy, and has been kept confined to bed, in consequence. —

Personal and Medical History of Betsey Pickering

Whole No. 5141.

Residence, Fillmore County, Minn –
Resident of this (Fillmore) County, more than 40 yrs

Date Admission, 30th June 1902

Admitted by Dr. O. C. Heyerdale hour, 9.45 Am

How Sent, E. V. Farrington, Jo. of P. Fillmore County

Sex, Female Age, 77 (about)

Civil Condition, Single –

Children, None – Age Youngest Child, –

Occupation, Housekeeper.

Degree Education, Good: Common school

Profession of Religion, M.E

Habits, not known, as to intemperance –

Nativity, N. H. – parents also born there

Physicians Committing, J. D. Utley and Cyrus. B

Correspondents, (Sister) Mrs Lydia Church
Spring V

No. for Year, 253.

Insane Relatives, not known to be –

Cause Exciting, none developed

Cause Predisposing, probably age

Form, Senile Dementia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, never attempted –

Date of this Attack, about 6 years ago

Duration, – – — probably

No. of Attack, 1st –

No. of Admission, 1st –

Age First Attack, about 71 –

Time of Leaving, 19 July 1902

Time in Hospital, 19 Days

D. I. Chronic Nephritis –

Examination on Admission by Dr. L

MENT

MENTAL ACTIVITY, Clear or Confused, Quick or Sl

MEMORY, Past Events,

Recent Events, Special Sul

PERCEPTIVITY, Alert or Dull, Correct or Illusiv

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent

DELUSIONS, Systematized, Transitory,

Special Subjects,

Nothing [illegible]

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

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 Betsey Pickering

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3 in PRESENT WEIGHT, 169 lbs USUAL WEIGHT, – NUTRITION, Good

WOUNDS, Abnormalities, none Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, rough, dry, thick brownish coating – prompt –

PUPILS, Equality, unequal (left larger) Size, contracted Response to Light, Slow Accommodation, yes –

SIGHT, Says "she does not wear glasses" –

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

HEARING, seems good –

COORDINATION, ~~Arms,~~ Too feeble to — Legs, attempt — Grasp, –

TREMORS, Hands, nothing Tongue, nothing Facial Muscles, nothing General, nothing –

PATELLAR REFLEX, absent Other Reflexes, absent.

ARTICULATION, Slurred, – Hesitating, – Slow, Slow

FACIAL EXPRESSION, Sensibility, –

HEART, Regularity, irregular

Strength, Sounds, weak

Size, enlarged

Apex Beat, lowered to left

Murmurs, aortic stenosis & mitral regurgitation

ARTERIES,
Sclerotic

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,

Passed July 5/1902: Ex. July 5th

EXAMINATION URINE, Quantity, — Sp. g. 1019 Reaction, alkaline Color and Appearance, Yellow Cloudy & flaky dep.

Albumen, Heat 0: nitric acid: 0: Tanret's 0 Sugar, Fehling's Sol 0: Bismuth 0 –

Casts and Crystals, amo. urates: a large amount: Triple phosphates, a large no.: pus, a few corp. Epithelium, a few cells: oxalate lime a few crystals.

GYNECOLOGICAL EXAMINATION, Uterus normal in position & free: external hæmorrhoids: labia major oedematous: skin about groin, excoriated from constant dripping of urine. –

MENSTRUATION,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, needs hypnotics –

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, since admission, has been quiet: is rather dull & sluggish: disinclined to make any physical effort. She suffers from incontinence of urine, so that she is untidy, and has been kept confined to bed, in consequence. –

Personal and Medical History of Betsey Pickering

1902

This patient was brought here by Geo. Churchill, attended by Olive Churchill, in fair physical condition, with following history of case. Parents were Cousins: not known to be any insane relatives: This is 1st attack: not sent to hospital before: First symptoms of this attack manifested, about 6 years ago she fell, after wandering around during one afternoon, and remained out, all night, in the field: Disease seems increasing: not variable: no rational intervals: Derangement now shown in that she sees imaginary people: tries to get away, in order to go + see her parents, who have been dead a long time: she trots "a rag doll" + calls it a "baby": no disposition to injure, others - never attempted suicide: Propensity not active now: disposed to filthy + Destructive habits: no previous peculiarities manifested: as to intemperance, not known: no severe disease + or head-injury mentioned. Has been confined in room since December 1901. - Confined in second story of house: As to cause of disease, none developed: Treatment none. On personal examination, patient cannot remember: has delusions + admits it. - Commitment recommended, because she wanders about + is exposed to want of food or shelter or to accident. And she has been a resident of this County for more than 40 years. —

June 30 On admission, was put on I.W. (G.H.N. Rpt: Complexion dark: hair brown - part gray: Eyes blue: Condition of skin normal: no marks, eruptions or bruises noted: Small scar on right leg: is rather dirty: moles on back, face, arms + legs: has no teeth: Behavior quiet: has delusions). —— . ——

Summary of 14 day record Dict. by Dr. L. A. Linton

June 30th. 1902. Admitted on Inf. West. bathed and put to bed: small brown moles all over her body and limbs: small scar on right leg: skin on both legs thick and brown do to erysipelas: has incontinence of urine with albumin and casts: at first answered questions intelligently but did not voluntarily converse: was quite helpless and was kept in bed: is quite weak: put on liquid diet with frequent cathartics: at times quite resistive to treatment refused medicines and nourishment: tongue very badly coated: stomach washed out daily: During 14 days maximum Tem 100.4: Pl. 90: Res. 22. Patient slept without hypnotics: gradually failed and became comatose July 16 and died July 19 at. 1:45 A. M of Chronic Nephritis.

— Dead. —

Personal and Medical History of Mamie Tully

Whole No. 6142.
Residence, Faribault Co. Minn
Since Nov 6th 1901: In Minn: 4 yrs-
Date Admission, 1st July 1902.
Admitted by Dr L. A. Suitor hour, 4 oc P.M.
How Sent, John W. Vance, J of P. Faribault Co.
Sex, Female Age, 17-
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Servant girl
Degree Education, 6th grade-
Profession of Religion, Not a Church-member
Habits, not intemperate -
Nativity, England: that of parents unknown.
Physicians Committing, J.P. Humes and A.J. Hammond
Correspondents, ⊛Elder Smith (S.B) Winnebago City Minn (adopted father)

No. for Year, 254.
Insane Relatives, unknown
Cause Exciting, suppression of monthlies.
Cause Predisposing, not stated
Form, Melancholia Acute
Accompanying Bodily Disorder, poor physical condition
Suicidal or not, suicidal by poison + cutting throat- propensity active
Date of this Attack, Early in May
Duration, Some 2 months-
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, - about 17-
Time of Leaving,
Time in Hospital,
Result,

⊛Note - See Rev. S. B. Smith's letter of July 14/02 (in file) = (Copy attached) =

Examination on Admission by Dr. O C Heyerdale — *Date of* July-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
- Sluggish -
MEMORY, Past Events, will not answer questions.
Recent Events, - " - Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
- Dull -
REASONING POWER, Ordinary Subjects, —
Special Subjects, —
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
- Depressed -
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY, —
Melancholy + will not answer questions

HISTORICAL.
LENGTH INVASION, Two months -
ONSET, Gradual or Sudden, 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 Mamie Tully

Copy of letter of Rev. S. B. Smith Winnebago City, Minn. in reference to case of Mamie Tully - (Letter dated July 14/02)

Rochester State Hospital,

Arthur F. Kilbourne,
Medical Superintendent.

Rochester, Minn.,

"In reply to letter of July 11th. Is glad to hear of improvement in the case &c &c: As to her parentage, we know but little: She says, she was born in England: her father died while she was quite young: after his death, she and her mother went to live with her grand-mother: and, she dying, Mamie's mother took Mamie, and came to America; where they landed first, she does not know: at 9 years of age, she says they lived in Minneapolis. She never has explained how she came to be in the "Children's Home" in that city. As to her mother, she seems to know nothing about her, since she went to the "Children's Home". And of course, we know nothing, as she has always been reluctant to answer questions. She never mentions her, unless questioned.

Four years ago, last April, an Agent of "Children's Home", left Mamie with us, on trial. We, at once, sent her to School, and kept her in School, wherever we went, until about 18 months ago, when she refused to go longer. We informed the Superintendent of the "C- Home". They suggested that we keep her in our care + let her work for wages. This she has been doing for about 18 months: for the greater part of the time, coming home when she pleased.

After her coming to us, we soon made up our

ITION, fair
of Skin, normal
ion, good
tests, good -
al, —
ENTS.
rance, Clear
muth o
: Epithelium, a
normal in position

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 admitted in fair physical condition: she is very melancholy: takes no interest in her surroundings: will not converse. Wanders about ward, in a purposeless manner: is careless of her personal appearance -

Personal

Whole No.

Residence,

Since

Date Adm

Admitt

How

Sex

C

uly 14/02 (in file)

y–1902

months–

sudden–

anity, Consanguinity, Epilepsy,
steria, Inebriety, Consumption).

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

REASONING PO

Special Subjects, ✓

Own Mental State, ✓

EMOTIONAL STATE, Normal, Indifferent, Exalted, Dep

– Depressed ✓

DELUSIONS, Systematized, ✓ Transitory, ✓

Special Subjects, ✓

HALLUCINATIONS, ✓

ILLUSIONS, ✓

SUMMARY, ✓

Melancholy + will not answer questions

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, ✓

---

our minds, that we did not want to keep her + set the time for them to take her; but she did not want to go away from us, and hence, has made her house, her home.

In June, she complained of not feeling well, and wanted to come home. She came home. She said that she got her feet wet, and took cold and her monthly courses stopped. We consulted a physician; he believed what she said, after questioning her very closely; and that the blood, having gone to her head, caused her her present trouble.

The first thing that she began to worry over was her refusal to go to school; and then she thought no one loved or was friendly, but myself and wife.

She declared that she was a fool + did not know anything; again that they were going to take her to jail; and many other like things.

She refused to take medicine or eat anything, and cried a great deal over her unkindness to myself + wife.

Have here given an outline of her case &c &c. Will give all the information I can.

Yours

Rev. S. B. Smith
Winnebago City
Minn

Personal and Medical History of Mamie Tully

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, 101 lbs USUAL WEIGHT, ✓ NUTRITION, fair

WOUNDS, Abnormalities, ✓ Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, white coating: prompt –

PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, good

SIGHT, good

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

HEARING, good –

COORDINATION, Arms, good Legs, good ~~Grasp~~, Other tests, good –

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

PATELLAR REFLEX, Diminished Other Reflexes, ✓

ARTICULATION, Slurred, ✓ Hesitating, ✓ Slow, ✓

FACIAL EXPRESSION, Sensibility, ✓

HEART, Regularity, Yes

Strength, Sounds, Strong

Size, normal

Apex Beat, Normal

Murmurs, None –

ARTERIES,

Normal

LUNGS,

Chest Symmetry: Yes.

Expansion: fair.

Breath Sounds: normal

Passed July 8th 1902. Ex'd. July 8th

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, ℥xv 11/7 Sp. g. 1024 Reaction, Acid Color and Appearance, Yellow Clear

Albumen, Heat 0: nitric acid 0: Tanret's 0 Sugar, Fehling's Sol 0: Bismuth 0

Casts and Crystals, amo. urates: several uric acid crystals: pus, a few corp: Epithelium, a few cells: Oxalate lime – several crystals.

GYNECOLOGICAL EXAMINATION, Genitals normal: hymen intact: uterus normal in position

MENSTRUATION,

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 admitted in fair physical condition: she is very melancholy: takes no interest in her surroundings: will not converse. Wanders about ward, in a purposeless manner: is careless of her personal appearance –

Personal and Medical History of Mamie Tully

1902

This patient was brought here by Geo. Freer, attended by Victoria Freer, in poor physical condition, with following history of case. If any consanguinity or heredity, unknown: this is 1st attack: first symptoms manifested Early in May: began to behave somewhat unnaturally, and forgetful. Disease seems increasing: not variable: no rational intervals: Derangement now shown in that she is sad, depressed: sits staring at vacancy; wont answer questions; wont eat or drink, or attend to calls of nature. Has attempted suicide by wood-alcohol, tincture of Iodine, and cutting throat with scissors: Not disposed to injure others: Has attempted suicide (as above): and propensity now active: no filthy nor destructive habits. No previous peculiarities manifested, but of rather obstinate disposition: patient not intemperate. As to parents, unknown: no history of any severe disease &c, nor head-injury: has been constantly watched to prevent self-injury. Supposed cause of the disease is suppression of monthlies, by getting feet wet, about one month ago. Treatment: Actea racemosa has been given, a few days. On personal examination has a vacant look, and answers nothing to questions propounded:

July 1 On admission, was put on T.W. (G.H.N. R'pt. Complexion dark: hair brown: eyes brown: Condition of skin normal: no marks, scars, bruises &c noted: is clean. Patient has 14 lower and 14 upper teeth: Behavior quiet).

Summary of 14 day record Dict. by Dr. O.C. Heyerdale.

July 1st. 1902 Admitted on Inf. West. bathed and put to bed: During 14 days Tem. Pl. and Res. about normal: took regular diet: slept rather poorly at night: given occasional hypnotic: bowels regular: patient up on ward on July 6th: Is very melancholy and will not converse will answer questions, but not many: has delusions of persecution: is resistive at times: takes out of door exercise: assists slightly with ward work: has poor appetite.

July 12 Somewhat improved. Assists with the ward work.

Aug 26th Wt 90 #. Sept 1st. Very sluggish mentally. Does not answer questions when addressed. Has delusions of persecution.

Sept. 2nd Visited by friends also on Sept 8th. Oct. 8th, 29th, 31st, Nov 12th, Patient very much improved. Takes out door exercise. Wt $112\frac{3}{4}$ #. Assists with work.

Personal and Medical History of

Personal and Medical History of Mary Green

Whole No. 6145.
Residence, St. Paul, Minn
Resident of State 30 years: of County: 30 yrs
Date Admission, 2nd July 1902.
Admitted by Dr. L. A. Liston hour, 7 10 PM
How Sent, E. W. Bazille, J. of P. Ramsey County.
Sex, Female Age, 62.
Civil Condition, married –
Children, four Age Youngest Child, 18 years
Occupation, Housewife: husband a laborer.
Degree Education, not educated –
Profession of Religion, Catholic Church
Habits, not intemperate.
Nativity, Ireland: Parents also born there
Physicians Committing, Talbot Jones and J. A. Quinn
Correspondents, Mr. J. J. Greene (Son)
619 Warren St.
St. Paul

No. for Year, 257.
Insane Relatives, None
Cause Exciting, Don't know
Cause Predisposing, "Chronic" (probably age)
Form, Melancholia Chr. delusions
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not, but will injure others –
Date of this Attack, seven years ago
Duration, " " off & on.
No. of Attack, not 1st (tho' seemingly continuous)
No. of Admission, 1st.
Age First Attack, about 55
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* July – 1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quick: Quite clear
MEMORY, Past Events, fair
Recent Events, fair Special Subjects, ✓
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
– Alert –
REASONING POWER, Ordinary Subjects, ✓
Special Subjects, ✓
Own Mental State, ✓
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Quite normal –
DELUSIONS, Systematized, ✓ Transitory, ✓
Special Subjects, ✓
HALLUCINATIONS, ✓
ILLUSIONS, ✓
SUMMARY, ✓
Patient is slightly melancholy & probably has some delusions –

HISTORICAL.

LENGTH INVASION, ✓
ONSET, Gradual or Sudden, ✓
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead – 60 years
Paternal Relatives, ✓
Mother, Dead –
Maternal Relatives, Sisters – 1 –
Brothers and Sisters, Brothers – 2 –
6 children – 4 living
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
✓
HABITS, Drinking and Smoking, ✓
HEADACHES, VERTIGO, OR CONVULSIONS, ✓
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
✓
Sleep, poor of late Appetite, ✓ Bowels, –

Personal and Medical History of Mary Green

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 in PRESENT WEIGHT, 159½ lbs USUAL WEIGHT, NUTRITION, fair –
WOUNDS, Abnormalities, has some paresis of right side of face – Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, white coating –
PUPILS, Equality, Yes Size, normal – Response to Light, Good Accommodation, good
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good Legs, good ~~Grasp~~, other tests good –
TREMORS, Hands, fine Tongue, fine Facial Muscles, ✓ General, ✓
PATELLAR REFLEX, present Other Reflexes, Elbow: wrist –
ARTICULATION, Slurred, ✓ Hesitating, ✓ Slow, ✓
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none –
ARTERIES,
✓
LUNGS,
Chest symmetry: Yes
Expansion: good
Breath sounds: normal
Passed July 1/1902. Ed. July 12th

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. 1030 Reaction, acid Yellow Color and Appearance, Clear
Albumen, Heat 0: nitric acid 0: Tanret's 0 Sugar, Fehling's sol. 0: Bismuth 0 –
Casts and Crystals, several uric acid crystals & fat droplets: Epithelium, a few cells. –

GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: external haemorrhoids: uterus retroflexed, free: Cervix filled with polypii: endometritis, cervicitis, leucorrhoea.
MENSTRUATION,
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 is in fair physical condition: converses freely: has had very little education: she is slightly melancholy & says "she has worried a great deal." She is slightly melancholy & probably has some delusions, but did not express any at this examination.

Personal and Medical History of Mary Green

1902

This patient was brought here by Louis Meed, attended by Mrs St. Pierre, in fair physical condition, with following history of case. No history of consanguinity, nor of heredity. This is not 1st attack. others accurred seven years ago: duration, "off & on" continuously: was not sent to hospital. First symptoms of this attack were manifested by Melancholia, accompanied by various delusions: disease seems increasing: variable & with rational intervals; but these, not regular. Derangement is now shown in that she is chiefly religious: thinks she is being pursued by Enemies. Is disposed to injure others, but not suicidal; no filthy nor destructive habits. Previously, manifested peculiarities. No history of intemperance, nor of any severe disease &c, nor head - injury: has had a constant attendant at home. Don't know cause of the disease. Treatment, bromides. On personal examination, it is noted that various delusions are present. "Thinks she was shot, this morning" —

July 2 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair brown: eyes blue: Condition of skin normal: no marks, scars, bruises &c noted: is clean: patient has 13 lower and 14 upper teeth: behavior quiet: has delusions). ———

Summary of 14 day record Dict. by Dr. O. C. Heyerdale.

July 2d. 1902: Admitted on Inf. West. bathed and put to bed: resistive when bathed: During 14 days Tem. Pl. and Res. about normal: took regular diet and an occasional hypnotic: bowels regular: is very delusional expressing delusions of persecution: very restless and quite melancholy: tries to elope when ever she gets a chance: is extremely anxious to go home. Very resistive. Patient is rather feeble and somewhat demented.

Has hallucinations of sight & hearing: requires hypnotics to sleep.

July 11th Patient attempted to elope while on the lawn. Aug. 10th Visited by son.

Aug 21st Patient became quite excited and attacked Miss Clapp and other patients. Wt. 131 # Aug 27th visited by two brothers. Nov 28th Wt 120 #

Patient quite melancholy: prays a great deal: rather troublesome on the ward: tries to escape. Begs to be sent home.

Dec 1st Patient improving somewhat: is more quiet: does not pray so much of the time and does not express so many delusions

Dec 18th, 19th Visited by son and daughter. Jan 12th Patient quite disturbed and noisy: cries a great deal.

Personal and Medical History of

Personal and Medical History of Mary McNamara #2

Whole No. 6146.
Residence, St Paul, Minn
Became resident of State 7 years ago of County: 7 years ago
Date Admission, 2nd July 1902.
Admitted by Dr L. A. Linton hour, 7th P.M.
How Sent, E. W. Bazille, J of P. Ramsey County.
Sex, Female Age, 35 Years
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, None: father, shoemaker
Degree Education, Common school
Profession of Religion, Roman Catholic.
Habits, not intemperate —
Nativity, Ireland: parents also born there.
Physicians Committing, P. B. Cook and L. C. Bacon
Correspondents, Delia McNamara
112 S. Wabasha St.
St Paul

No. for Year, 258.
Insane Relatives, — None —
Cause Exciting, Unknown
Cause Predisposing, previous attack.
Form, ~~Epileptiform Insanity~~ Epileptic Dementia
Accompanying Bodily Disorder, Epilepsy —
Suicidal or not, not
Date of this Attack, Over a Year ago
Duration, " " "
No. of Attack, 2nd (one in Nov 1899).
No. of Admission, 2nd —
Age First Attack, 32 years —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* July 7 - 1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
— Clear and quick —
MEMORY, Past Events, fair
Recent Events, " " Special Subjects, ✓
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
— Alert —
REASONING POWER, Ordinary Subjects, fair
Special Subjects, fair —
Own Mental State, ✓
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
normal
DELUSIONS, Systematized, ✓ Transitory, on reli-
~~Special Subjects,~~ gious matters, after
Convulsions. —
HALLUCINATIONS, of hearing, after Convulsions.
~~ILLUSIONS,~~ "Thought God conversed with her,
~~SUMMARY,~~ and she, with him." —

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, 3 brothers: 2 sisters —
Children — none
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Has epilepsy, with frequent convulsions.
HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, ✓
OCCUPATION, Healthy or not, Housework —
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, — Appetite, — Bowels, —

Personal and Medical History of Mary McNamara #2

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6½ in PRESENT WEIGHT, 108 lbs USUAL WEIGHT, NUTRITION, Good
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated white &c: prompt —
PUPILS, Equality, Yes Size, normal Response to Light, Good Accommodation, fair
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, Good Legs, Good ~~Grasp,~~ other tests good.
TREMORS, Hands, none Tongue, ✓ Facial Muscles, ✓ General, ✓
PATELLAR REFLEX, ✓ Other Reflexes, ✓
ARTICULATION, Slurred, ✓ Hesitating, ✓ Slow, ✓
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, normal
Size, Normal
Apex Beat, Normal
Murmurs, none
ARTERIES,
✓
LUNGS,
Chest symmetry: Yes
Expansion: good
Breath Sounds: normal
Passed July 8th 1902: Exd. July 8/02

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, ℥ XXIV Sp. g. 1007 Reaction, neutral Color and Appearance, Yellow Clear & slight flaky dep.
Albumen, Heat 0 : nitric acid 0 : Tanret's 0 Sugar, Fehling's Sol 0 : Bismuth 0 —
Casts and Crystals, Amo. urates : Triple phosphates : Epithelium a few cells : Oxalate lime, a few crystals

GYNECOLOGICAL EXAMINATION, Genitals normal: hymen intact: uterus normal.

MENSTRUATION,
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 is an Epileptic & has some mental disturbance after the convulsions, with delusions of a religious character & hallucinations of hearing. She is then, irritable & rather hard to get along with, at home. Her general health is good & she is fairly well nourished. She has a fair education, and, at the intervals between spells, is rational & intelligent & pleasant: converses freely. —

Personal and Medical History of Mary McNamara #2

1902

This patient was brought here by Dep. Emanuel Johnson, attended by Delia McNamara, in fair physical condition, with following history of case. No history of consanguinity or heredity. This is not 1st attack: one occurred in November 1899. duration 18 months: was then sent to Rochester Hospital: Discharged Feby 6-1901. First symptoms of this attack manifested over a year ago, by delusions. Disease seems increasing: variable & with rational intervals; but these, not regular. Derangement now shown by delusions: "Believes that the Lord Commands her" - Not disposed to injure others, nor suicidal: no filthy nor destructive habits. Previously, manifested peculiarities, on religion. No history of intemperance. - Has Epilepsy. Has not been restrained or confined. Cause of disease, unknown. No treatment. On personal examination, nothing further seems to have been learned. -

Note: 2nd admission: here before from November 21 - 1899 to August 30. 1900, and discharged February 6 - 1901, as improved. Form then diagnosed as Epileptic (Dementia) Insanity: had a few convulsions while here, (Chiefly towards End of her stay here): For further particulars, see volume 42 p 53 No 5453)

July 2 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair black: Eyes brown: Condition of skin, rough: no marks or bruises noted: Small scar on lower part of back: eruptions on back: is clean: Patient has 9 lower, and 8 upper teeth, all in a bad condition: behavior quiet: talks intelligently) -

Summary of 14 day record Dict. by Dr. O. C. Huyerdale.

July 2d. 1902. Patient admitted on Inf. West, bathed and put to bed: During 14 days Tem. Pl. and Res. practically normal: put on regular diet: bowels regular by aid of occasional cathartic: slept well: was up on the ward on the 7th July took out of door exercise thereafter: assists with the ward work: at first was somewhat irritable; delusional and disagreeable: converses readily and answers questions freely.

Is an epileptic: fairly quiet: neat in habits & appearance. Converses intelligently. Aug. 6th Patient had convulsions: assists some with the ward work: attends amusements: Wt 119#.

Sept. 6-10-13th Patient had convulsions. Oct 4th Visited by brother also on Oct 11 and 12th. Taken home.

Personal and Medical History of

Personal and Medical History of Debby Caldwell

Whole No. 6148.

Residence, Stillwater, Minn

Became resident of Minnesota 1884: of County 1888.

Date Admission, 3d July 1902.

Admitted by Dr L. A. Linton – hour, 9.00 P.M.

How Sent, Frank T. Wilson, Sheriff Washington Co

Sex, Female Age, 38. —

Civil Condition, Married

Children, one – Age Youngest Child, 11 yrs

Occupation, Housewife: husband, a lumberman

Degree Education, Common School –

Profession of Religion, Presbyterian –

Habits, not intemperate –

Nativity, Province of Quebec, Canada: Parents' Canada

Physicians Committing, B. J. Merrill and W. H. Pratt

Correspondents, none given in papers –

No. for Year, 260.

Insane Relatives, one brother, for period of 3 weeks.

Cause Exciting, Originated with 1st Confinement

Cause Predisposing, previous attack?

Form, acute mania, with delusions

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, not, but will injure others

Date of this Attack, about 10 weeks ago

Duration, " " —

No. of Attack, 2nd (one in 1891)

No. of Admission, 1st —

Age First Attack, about 27

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. L. A. Linton — *Date of* July 5-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear, at times; momentarily, Confused.

MEMORY, Past Events, ✓

Recent Events, good at times when mind is clear Special Subjects, ✓

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert: Correct, at times.

REASONING POWER, Ordinary Subjects, ✓

Special Subjects, Impaired —

Own Mental State, appreciates. —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

– Slightly Exalted –

DELUSIONS, Systematized, ✓ Transitory, ✓

Special Subjects, Religious Delusions

HALLUCINATIONS, "of sight & hearing" –

ILLUSIONS, ✓

SUMMARY, ✓

HISTORICAL.

LENGTH INVASION, Eleven weeks

ONSET, Gradual or Sudden, Sudden –

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

maternal aunt died of tuberculosis: maternal uncle intemperate: one brother hysterical –

Father, Living —

Paternal Relatives, ancestry good –

Mother, Died of cancer of breast –

Maternal Relatives, ancestry not so good.

Brothers and Sisters, 3 sisters: one of which died this year, in childbirth – 4 brothers living – one dead one child –

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

– nothing

HABITS, Drinking and Smoking, Good

HEADACHES, VERTIGO, OR CONVULSIONS, yes no no

OCCUPATION, Healthy or not, Housework

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

attack of puerperal mania 11 years ago —

Sleep, poor Appetite, fair Bowels, Constipated

Personal and Medical History of Debby Caldwell

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4½ in PRESENT WEIGHT, 140 lbs USUAL WEIGHT, NUTRITION, good

WOUNDS, Abnormalities, none Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, prompt: slightly Coated.

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

SIGHT, Good

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

HEARING, good

COORDINATION, Arms, Good finger to nose eyes shut, fair Legs, Good Grasp, other tests good –

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

PATELLAR REFLEX, absent Other Reflexes, none

ARTICULATION, Slurred, good Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular

Strength, Sounds, strong

Size, normal

Apex Beat, "

Murmurs, none

ARTERIES, normal

LUNGS,

Chest symmetry: sym:

Expansion: good –

Breath Sound: normal

Passed July 10-1902: Ex. July 10th

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. 1018 Reaction, acid Color and Appearance, Yellow Cloudy – slight flaky dep.

Albumen, Heat 0 : nitric acid 0 : Tanret's 0 : Sugar, Fehling's sol 0 : Bismuth 0 :

Casts and Crystals, a few uric acid crystals: epithelium, a few cells: oxalate lime, a few crystals

GYNECOLOGICAL EXAMINATION, perinaeum lacerated slightly: haemorrhoids: uterus anteflexed: cervix lacerated & cystic: endometritis: cervicitis: leucorrhoea.

MENSTRUATION,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, needs hypnotics –

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, at times, resistive: sings & talks to herself, when left alone: lucid intervals, during which she answers questions intelligently & remembers, correctly, events in her past history, alternate with intervals of incoherence and loss of memory & indifference & obliviousness as to surroundings. Her mental condition at any time, is very evanescent. Physically, she is very well, with the exception of chronic constipation. —

Personal and Medical History of Debby Caldwell

1902

This patient was brought here by Dr. T. C. Caldwell, attended by Caroline Borschh.
in good physical condition, with following history of case. No Consanguinity:-
one brother insane, for period of 3 weeks: This is not 1st attack: one occurred in 1891.
Duration 5 or 6 weeks (?). First symptoms of this attack manifested about 10 weeks
ago. Disease seems increasing: variable, + with rational interval; but these, not regular.
Derangement now shown in that there is, *at times, incessant action, talking, and
also excitability: violent in action*. Is disposed to injure others, but not suicidal:
propensity not active. No previous peculiarities manifested: no history of intemperance
nor of any severe disease &c, nor head-injury: has been strapped to bed, occasionally,
when violent. Cause of disease, originated with 1st Confinement: has been given
general sedative treatment. On Personal Examination, Same as Section 12.
July 3 (see ** above). On admission, was put on I.W. (G.H. N. Rpt. Complexion dark: hair
black: eyes brown: Condition of skin normal: no marks or eruptions noted: Several small
scars on left arm, from vaccination: Several small bruises on limbs: is clean:
has 13 upper and 15 lower teeth: behavior quiet: talks intelligently.).—

Summary of 14 day record Dict. by Dr. L. A. Linton.
July 3d. 1902. Admitted on Inf. West bathed and put to bed: very restless
and talkative and inclined to gesticulate: has momentary incoherence of
speech and rapid changes from lucid intervals to irrational ones. Is
religious and very delusional: is very noisy, violent and destructive at
times: receives gynecological treatment and douches: put on regular diet:
During 14 days maximum Tem. 99: Pl. 80: Res. 24: requires cathartics
and hypnotics: tongue coated: has small ulceration on right side of the
anterior which discharges pus almost constantly.

Patient has delusions on religious subjects: very violent at times.
Somewhat depressed and stupid. Aug. 17th patient quite disturbed
and maniacal. Aug. 17th Visited by husband and friends. Wt 117 #
Aug 28th Very noisy and disturbed. Oct 16th No change.
Patient broke a chair. Attacked nurses. Nov. 14th Patient much
improved: neat in habits and appearance. Assists with the ward work.
Converses intelligently,

Personal and Medical History of

Personal and Medical History of Emma Swanberg

Whole No. 6151.
Residence, Stillwater, Minn —
Date Admission, 12th July 1902
Admitted by Dr. R. M. Phelps hour, 1³⁰ P.M.
How Sent, Frank. T. Wilson, J of P, Washington County
Sex, Female Age, 22.
Civil Condition, single —
Children, One Age Youngest Child, five
Occupation, Living at home.
Degree Education, Common school
Profession of Religion, Lutheran
Habits, not intemperate: (father drinks)
Nativity, Stillwater, Minn: parents born in Sweden.
Physicians Committing, J. G. Landeen and E. T. Clark
Correspondents, none given in papers

No. for Year, 263.
Insane Relatives, Unknown
Cause Exciting, Unknown
Cause Predisposing, previous attack
Form, Pubescent Insanity
Accompanying Bodily Disorder, Unknown —
Suicidal or not, not — but will injure others —
Date of this Attack, not stated —
Duration, probably short —
No. of Attack, 2nd (one, a year ago) —
No. of Admission, 2nd —
Age First Attack, 20+
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Luton *Date of* July 14 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear: quick
MEMORY, Past Events, —
Recent Events, Good Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: generally correct
REASONING POWER, Ordinary Subjects, —
Special Subjects, Impaired
Own Mental State, Does not appreciate
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Somewhat depressed
DELUSIONS, Systematized, — Transitory, Delusions
Special Subjects, —— of persecution
HALLUCINATIONS, of hearing: hears voices day & night
~~ILLUSIONS,~~ telling her to do improper things.
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
no history
Father, Living —
Paternal Relatives, ——
Mother, Living —
Maternal Relatives,
Brothers and Sisters, 4 brothers.
Children — one
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
— nothing —
HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, yes Housework
Detail Date, Duration, and Character of Previous Attack, if any,
1st attack Nov 1900. of 6 mos Duration
Sleep, poor Appetite, poor Bowels, regular

Personal and Medical History of Emma Swanberg

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in. PRESENT WEIGHT, 118 lbs USUAL WEIGHT, — NUTRITION, rather poor
WOUNDS, Abnormalities, none Condition of Skin, rather anemic otherwise normal
TONGUE, Coatings, Promptness of Movement, Coated: prompt
PUPILS, Equality, equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, — Good —
COORDINATION, Arms, good Legs, good ~~Grasp,~~ other tests, good.
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, absent — Other Reflexes, absent
ARTICULATION, Slurred, Good Hesitating, — Slow, —
FACIAL EXPRESSION,
HEART, Regularity, regular but slow
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none.
ARTERIES,
Normal
LUNGS,
Chest Symmetry: Sym:
Expansion: Good
Breath Sounds: normal
Passed July 17/1902. Ex. July 17/02

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, ℥xx Sp. g. 1022 Reaction, acid Yellow ~~Color~~ and Appearance, Clear with a slight flaky dep.
Albumen, Heat 0: nitric acid 0: Fanets 0 Sugar, Fehling's sol 0: Bismuth 0:
Casts and Crystals, Mucus, several bands: phosphates, triple: Epithelium a No. of cells: uric acid crystals

GYNECOLOGICAL EXAMINATION, Genitals normal, except laceration of hymen: Cervix lacerated: uterus normal in position & free: endometritis: Cervicitis: Erosion: Leucorrhoea.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps well —
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, when received, was quiet: slightly depressed: would answer questions, intelligently, on most subjects. Admitted having been disorderly in conduct, but said "She was forced to it, by the influence of others". Her father stated that she was incorrigible; would not stay at home properly. She has been tractable since admission & began, at once, to assist with the ward-work.

Personal and Medical History of Emma Swanberg

1902

This patient was brought here by S. Swanberg, in fair physical condition, with following history of case. No history of consanguinity: as to any heredity, unknown: This is not 1st attack: one occurred a year ago: was then sent to Rochester Hospital: Improved: sent home: discharged May 10 - 1902. When first symptoms of this attack manifested, is not stated: shown by acts of ungovernable rage: assaults mother. Disease seems increasing: variable: Derangement now shown by peculiar actions; lack of sensibility. Is disposed to injure mother, but not suicidal: also disposed to filthy & destructive habits. If any peculiarities previously manifested is unknown. Father drinks: If subject to any severe disease &c, or head injury, unknown: has not been restrained nor confined. Cause of disease unknown: treatment, none. On personal examination, the following noted: Incoherent conversation: apathetic. Note. 2nd admission: was here before from May 23 - 1901 to November 26 - 1901 & discharged May 10 - 1902, as improved. Form then diagnosed as "Pubescent Insanity": See Vol 144 page 265 No 5826.

July 12 On admission, was put on I.W. (G.H.N. R.H.: Complexion dark: hair brown: eyes brown: condition of skin normal: a few brown moles on her back: no scars or bruises noted: a few eruptions on her face: is clean: has 14 upper, 14 lower teeth, & a couple of roots. - Behavior quiet: talks very little, but answers questions very well) — : —

Summary of 14 day record. Dict. by Dr. L. A. Linton

July 12th 1902. Admitted on Inf. West bathed and put to bed: was quiet and answered questions sensibly when asked why she was returned said she was disorderly in conduct, this she attributes to the influence of some unknown persons: according to the statement of her father she cannot be retained at home would run away and was rather incorrigable. Was given regular diet and tonics and iron as she seemed somewhat anaemic. During 14 days Tem. Pl. & Res. were about normal: July 13 began menstruating: appetite good: sleeps well without the aid of hypnotics: does not voluntarily converse but answers questions freely was up on the ward July 15 and began assisting with ward work: also took out of door exercise.

Dec 1th weigth 136½ lbs.

Dec 26 Visited by brother

" 27 " " "

Feb 1st 1903.

Patient's condition has not materially changed either mentally or physically - she has always been apathetic - she takes little interest in her surroundings - rarely voluntarily converses but will answer questions when addressed, and intelligently as a rule. Physically she has been invariably well, menstruates regularly, sleeps well and has a good appetite - She occasionally works and goes out for exercise, In habits and appearance is untidy and careless.

See Files.

Personal and Medical History of Mary Fitzgerald

Whole No. 6152.

Residence, Carrolton Township, Minn

Is, and since birth has been, a resident of Fillmore Co.

Date Admission, 14th July 1902.

Admitted by Dr. O. C. Heyerdale hour, 8.00 am

How Sent, E. V. Farrington, Jeff. Fillmore County

Sex, Female Age, 38 –

Civil Condition, Single

Children, None Age Youngest Child, None

Occupation, None; father, a farmer

Degree Education, not educated

Profession of Religion, Catholic

Habits, not intemperate –

Nativity, Fillmore County, Minn: Parents' Ireland

Physicians Committing, W. B. Grinnell and Geo. A. Love

Correspondents, (Brother) M. J. Fitzgerald

Fillmore Co. Isinours Minn

No. for Year, 264.

Insane Relatives, none

Cause Exciting, Do not know

Cause Predisposing, fit, at 7 months

Form, Imbecile, with Epilepsy

Accompanying Bodily Disorder, Epilepsy

Suicidal or not, Not, but will injure others –

Date of this Attack, at 7 months of age

Duration, — her life time nearly

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, 7 months –

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* July – 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, none

Recent Events, " " Special Subjects, none

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

– Dull –

REASONING POWER, Ordinary Subjects, None

Special Subjects, " "

Own Mental State, " "

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

—

DELUSIONS, Systematized, — Transitory, —

Special Subjects, —

HALLUCINATIONS, —

ILLUSIONS, —

SUMMARY,

HISTORICAL.

LENGTH INVASION, since Childhood

ONSET, Gradual or Sudden, —

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

Father, Nothing mentioned

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

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

has Epilepsy

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 Mary Fitzgerald

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1½ in PRESENT WEIGHT, 179 lbs USUAL WEIGHT, — NUTRITION, good –

WOUNDS, Abnormalities, has very small hands & feet – Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, —

PUPILS, Equality, — Size, — Response to Light, — Accommodation, —

SIGHT, Seems good

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

HEARING, Seems good

COORDINATION, Arms, Good Legs, Good Grasp, —

TREMORS, Hands, — Tongue, — Facial Muscles, — General, —

PATELLAR REFLEX, present Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, Strong

Size, normal

Apex Beat, normal

Murmurs, none

ARTERIES,

—

LUNGS,

Chest symmetry: Yes

Expansion: Good

Breath Sounds: normal.

Passed July 19 – 1902: Ex. July 19th

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, ℥xx $\frac{iii}{iv}$ Sp. g. 1012 Reaction, acid Color and Appearance, Yellow Clear & slight flaky dep. –

Albumen, Heat: a good test: nitric acid: a good test Taurets, a good test. Sugar, Fehling's Sol. 0 : Bismuth 0 –

Casts and Crystals, Several uric acid Crystals – : amm urates: Epithelium, several Cells. –

GYNECOLOGICAL EXAMINATION, Urethral opening deeply set: genitals otherwise normal: Uterus Enlarged: Endometritis: Cervicitis: leucorrhoea.

MENSTRUATION,

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 is an Imbecile & has had Epileptic convulsions since childhood – She does not converse intelligently or coherently & does not seem to understand what is said to her – She utters a few words in a meaningless manner. Her general health is good – & she is very well nourished –

Personal and Medical History of Mary Fitzgerald

1902

This patient was brought here by Deputy M. J. Fitzgerald, attended by Mrs John Lynch, in fair physical condition, with following history of case. No history of consanguinity, nor heredity. This is 1st attack: was not sent to hospital before: first symptoms of this attack manifested at 7 months of age: had some kind of fit. And, since then, has had Epileptic attacks. Disease is increasing in frequency of attacks: not variable: no rational intervals: Derangement now shown by disposition to injure herself and others, at times, and also to wander away from home. Is disposed to injure others, at times, but not suicidal. Is disposed to filthy habits. but not of distructive habits. No previous peculiarities manifested: no history of intemperance - Is subject to Epilepsy: must be constantly watched. Do not know Cause of the disease: has had treatment for the Epilepsy, without relief: On personal examination it is learned she has attempted to destroy property, by fire. Commitment recommended because her condition is of such a nature as to require care & treatment while under legal restraint. And said Mary Fitzgerald is, and since birth, has been, a resident of Fillmore County. ———

July 14 On admission, was put on I.W. (G.H.N. Rpt. Complexion dark: hair black: eyes brown: Condition of skin normal: no marks noted: Scars on right side of face & right leg. Eruptions on her back: bruises on chest and lower part of back and leg: no vermin, but is dirty: hands and feet very small: has 16 upper and 14 lower teeth all in a bad condition. Behavior quiet: would not talk). ———

Summary of 14 day record Dict. by Dr. O. C. Heyerdale.

July 14th 1902: Patient admitted on Inf. West. bathed and put to bed: During 14 days Tem. Pl. and Res. normal: bowels regular: took regular diet: patient is feeble-minded has had epilepsy since childhood: is filthy in her habits and untidy in appearance: sleeps well: is taken out of doors each day for fresh air and exercise.

Patient is an imbecile: does not converse or answer questions intelligently. Aug. 12th No change. Patient is very dirty and untidy in habits and appearance. Taken out doors daily Fed by nurses. Oct. 18th Patient transferred to Faribault.

Personal and Medical History of Elvina Morganstein

Whole No. 6157.

Residence, St Paul, Minnesota.

Became resident of State in 1886: of County, 1899

Date Admission, 19th July 1902.

Admitted by Dr. R. M. Phelps, hour, 7:00 P.M.

How Sent, Henry Gallick, Ct. Comm. Ramsey Co.

Sex, Female Age, 48 years.

Civil Condition, married —

Children, four Age Youngest Child, Three years

Occupation, Housewife: husband, a laborer -

Degree Education, - Fair -

Profession of Religion, Yes: Lutheran

Habits, not intemperate -

Nativity, Germany: parents also born there.

Physicians Committing, John. B. Darling and P. B. Cook.

Correspondents, none given in papers -

No. for Year, 269.

Insane Relatives, mother, in mild form

Cause Exciting, Don't know

Cause Predisposing, Heredity & previous attack

Form, Mania Acute

Accompanying Bodily Disorder, Physical exhaustion and propensity active

Suicidal or not, attempted, by jumping from window

Date of this Attack, July 18 - 1902 -

Duration, - 1 day -

No. of Attack, 2nd: one in 1900.

No. of Admission, 2nd —

Age First Attack, - 44 yrs -

Time of Leaving, September 17 - 1902

Time in Hospital, This time 1 mo. 29 Ds

Result, Died: General Tuberculosis

Examination on Admission by Dr. O. C. Heyerdale Date of July 24 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

- Confused -

MEMORY, Past Events, poor

Recent Events, poor Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Illusive

REASONING POWER, Ordinary Subjects, poor

Special Subjects, poor

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted

DELUSIONS, Systematized, / Transitory,

Special Subjects, has Delusions of poisoning

HALLUCINATIONS, —

ILLUSIONS, —

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Would not answer questions.

Father, Died, when quite old: does not know cause

Paternal Relatives, —

Mother, Dead

Maternal Relatives,

Brothers and Sisters, 7 sisters -

Jan 19 - 1900 Exam: 6 children - 4 living - youngest 6 months -

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

When here before, she had a severe nephritis and gastritis -

HABITS, Drinking and Smoking, —

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Housework

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

—

Sleep, — Appetite, — Bowels, —

State of Minnesota
ROCHESTER STATE HOSPITAL
2110 EAST CENTER STREET
ROCHESTER, MINNESOTA 55901

January 12, 1978

Re: Elvina Morganstein (Alvina)

Mr. Wayne H. Burback
9600 Music Lane #12
Pensacola, Florida 32504

Dear Mr. Burback:

This is in answer to your post card dated December 20, 1977. Her birth place was given as Germany. Her husband was August Morganstein. Due to age of the record, birth date and parents names were not given.

Sincerely,

(Mrs) Phyllis Seitz R.R.A.

Mrs. Phyllis Seitz, R.R.A.
Medical Records Administrator

PS:gb

WAYNE H. BURBACK
9600 MUSIC LANE #12
PENSACOLA, Florida
32504

6157
Alvina
Morganstern
Vol 48

Nathan Hale Patriot U.S. Postage 9¢

Rochester STATE Hospital
Rochester, MINNESOTA
55901

Attn: Medical Records

B place Germany
No B date - try
Court papers
No
Parents'
Names

Poor

Normal

Poor + slight
Flaky Dep.
t, a trace:

nual: -

rosion:

c. Cervicitis

BLOOD, Corpu

SLEEP, Presen

BOWELS, Pres

Give con … nity, the most probable cause, the degree of invasion, estima

Patient a … y restless & out of bed most of the time. Expresses many delusions, especially of poisoning & persecution. She has a cold & coughs some & expectorates about the room promiscuously. She is very dirty in her habits, & requires a great deal of attention & waiting upon. She is much run down, physically, and has an acute gastritis. She vomits up everything she eats, at times. Is given a liquid diet. —

Personal and Medical History of Elvina Morganstein

Whole No. 6157.

No. for Year, 269.

Poll

6157

Dec. 20, 1977

Dear Sir;

My great-grandmother Alvina Morgenstern died of Tuberculosis in September 17, 1902 in your hospital. She was 48 years old. Her husband's name was August Morgenstern. Would you have any other information on her from your medical records? If so how may I acquire this information? Specifically I am seeking her birth date and place, parents names etc, thank-you.

Yours truly,

Wayne H. Burback

ILLUSIONS, —

SUMMARY,

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

Sleep, — Appetite, — Bowels, —

Personal and Medical History of Elvina Morganstein

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6½ in PRESENT WEIGHT, 116½ lb USUAL WEIGHT, NUTRITION, poor

WOUNDS, Abnormalities, — Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, has a thick brownish coating —

PUPILS, Equality, yes Size, normal Response to Light, — Accommodation, —

SIGHT, seems good

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

HEARING, Good

COORDINATION, Arms, good Legs, good — Grasp, —

TREMORS, Hands, — Tongue, — Facial Muscles, — General, —

PATELLAR REFLEX, — Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, — Sensibility, —

HEART, Regularity, regular

Strength, Sounds, fairly strong

Size, normal

Apex Beat, normal

Murmurs, none

ARTERIES, —

LUNGS,

Chest symmetry: yes, symmetrical

Expansion: good

Breath sounds: roughened: bronchial

Passed July 20/02. Ex. July 25th

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. 1032 Reaction, acid Color and Appearance, Yellow clear + slight flaky dep.

Albumen, Heat 0 : Nitric acid 0 : Tanret's 0 – Sugar, Fehling's sol. a trace: Bismuth, a trace:

Casts and Crystals, amor. urates: pus, a few corp: Epithelium, a few cells

GYNECOLOGICAL EXAMINATION, Perinaeum slightly lacerated: external genitals otherwise normal: – rectocele: uterus anteflexed: cervix lacerated: both lips hypertrophied: slight erosion:

~~MENSTRUATION,~~ fundus + cervix hard, ~~fibrous~~: fibrous mass in cul-de-sac. Cervicitis

OPHTHALMOSCOPIC EXAMINATION, Endometritis, leucorrhoea. –

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 admitted in very maniacal condition: extremely noisy + restless + out of bed most of the time. Expresses many delusions, especially of poisoning + persecution. She has a cold + coughs some + expectorates about the room promiscuously. She is very dirty in her habits + requires a great deal of attention + waiting upon. She is much run down, physically, and has an acute gastritis. She vomits up everything she eats, at times. Is given a liquid diet. —

Personal and Medical History of Elvina Morganstein

1902

This patient was brought here by Emil Johnson, attended by Mrs Bucher, in exhausted physical condition, with following history of case. No history of consanguinity; but mother insane, in mild form. This is not 1st attack: one occurred in 1900: duration two months: was then sent to Rochester Hospital, result of treatment poor. First symptoms of this attack manifested July 18-02 maniacal: Disease seems increasing: not variable: no rational intervals: — Derangement now shown in that she thinks she is going to be murdered: is disposed to injure others: has attempted suicide, by jumping from window. propensity active now: also disposed to filthy and destructive habits. Peculiarities previously shown. No history of intemperance, nor of any severe disease &c, nor head-injury. Has been confined at Rochester. Don't know cause of the disease: no treatment. On personal examination, talks irrationally & is violent-

Note: 2nd admission: here before from January 18-1900 to March 20-1900, and discharged August 8-1900, as improved. Form then diagnosed as "ac. Del. mania or Mel. ag". Was, on admission, confused, depressed, agitated: showed delusions of persecution: "thought people would poison or kill her": had auditory hallucinations. (was in hospital here only 2 months and 2 days). For further particulars see vol 42 page 113 no 5490 - also "slip", attached in that Case book)—

July 19 On admission, was put on T.W. (G.H. N. Rpt. Complexion dark: hair brown: eyes blue: condition of skin normal: several small scars on lower part of back: bruises on her legs and arms: has vermin & is very dirty: has 5 roots above and 6 lower, all in bad condition: Behavior maniacal: appeared to be very exhausted) - ——— - ———

Summary of 14 day record Dict. by Dr. O.C. Heyerdale.

July 19th 1902: Patient admitted on Inf. West. bathed and put to bed: right arm bruised and bruises on both limbs: small cuts on fingers. very untidy, noisy and resistive during the night: During 14 days Tem. rather high ranging from 101. to 104.8: Pl. rapid and weak: Res. rapid: She was extremely noisy, delusional and resistive and would attack the nurses at every opportunity: was given egg nogs and hypnotics: very dirty in her habits expectorating upon the walls and floor: very much emaciated and run down physically: has acute bronchitis and pleurisy on right side: was given tepid baths whenever her Tem. went above 102.5: is a very hard disagreeable patient to take care of.

Patient very noisy and disturbed mentally and violent: will answer some questions: is rather delusional: Imagines that she has been poisoned: Restrained at times. Patient is in poor physical condition: rather run down physically. August 26th Wt 93#.

Patient went to bed: coughs & expectorates some. Very noisy and disturbed. Patient failing. Sept. 14th No improvement. Visited by husband. Patient very weak: unable to swallow: has a high fever.

Sept. 17th. Died at 6:20 A.M. Cause of death General Tuberculosis.

Personal and Medical History of Alice Paddock

Whole No. 6160.

Residence, Grand Meadow, Minn

Date Admission, 25th July 1902

Admitted by Dr. D. M. Phelps hour, 7 45 PM

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

Sex, Female Age, 30.

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Teacher (father Ex-farmer & Ex. Pm)

Degree Education, Common School & some advanced

Profession of Religion, Congregational

Habits, not intemperate

Nativity, Mower Co. Minn: father's Conn: Mother's Penn

Physicians Committing, W. W. Freeman and Homer. F. Peirson

Correspondents, none given in papers —

Family Physn: Dr. W. W. Freeman:

No. for Year, 272.

Insane Relatives, Sister insane: weakness of mind in another member

Cause Exciting, not known: (Note Pm – Causes previously given as suppression of menses or irregular menstruation)

Cause Predisposing, previous attks & possibly heredity.

Form, Mania Acute

Accompanying Bodily Disorder, none mentioned —

Suicidal or not, not: but would injure others.

Date of this Attack, about 3 months ago

Duration, " "

No. of Attack, 3rd — probably (others in 1891 & 1898)

No. of Admission, 3rd —

Age First Attack, 15-19 yrs

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. O. C. Heyerdale — *Date of* July 29-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
At times Clear: at others Confused

MEMORY, Past Events, Good, except when in her spell

Recent Events, " Special Subjects, " "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert

REASONING POWER, Ordinary Subjects, Good, except when in spell

Special Subjects, "

Own Mental State, " "

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

DELUSIONS, Systematized, — Transitory, —

Special Subjects, —

HALLUCINATIONS, —

ILLUSIONS, —

SUMMARY,

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, gradual

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

Father, Living

Paternal Relatives, —

Mother, Dead — (7 years ago) —

Maternal Relatives, —

Brothers and Sisters, 4 sisters living & well —

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Has had Typhoid when a girl, also meningitis

HABITS, Drinking and Smoking, —

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Teaching & housework

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

Sleep, — Appetite, — Bowels, —

Personal and Medical History of Alice Paddock

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 in PRESENT WEIGHT, 115 lbs USUAL WEIGHT, — NUTRITION, fairly good

WOUNDS, Abnormalities, none — Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, prompt.

PUPILS, Equality, yes Size, normal Response to Light, good Accommodation, good

SIGHT, good

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

HEARING, good —

COORDINATION, Arms, good Legs, good Grasp, other tests, good.

TREMORS, Hands, fine Tongue, fine Facial Muscles, — General, —

PATELLAR REFLEX, present — Other Reflexes, Elbow, wrist, Jaw jerk

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, —

HEART, Regularity, regular

Strength, Sounds, strong

Size, normal

Apex Beat, normal

Murmurs, none

ARTERIES, —

LUNGS,

Chest symmetry: yes

Expansion: good

Breath Sounds: normal

Passed Aug 20/02. Exd Aug 20th —

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. 1012 Reaction, alkaline Color and Appearance, light yellow Cloudy & flaky dep.

Albumen, Heat 0 – Nitric acid 0 – Tanret's 0. Sugar, Fehling's Sol 0 – Bismuth 0. —

Casts and Crystals, Amor. urates: Epithelium, several cells: Oxalate lime, several crystals.

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact: uterus normal in position and free —

MENSTRUATION,

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 admitted in good physical condition. She becomes quite exalted, at times: and is then inclined to be quite noisy, active & restless: is also rather confused in many of her statements. When quiet, she talks very rationally & intelligently. Says: "this condition was brought on by overwork" —

Personal and Medical History of Alice Paddock

1902

This patient was brought here by Mr. Townsend, attended by Mrs. Stiger and Dr. — Freeman, in fair physical condition, with following history of case. No history of consanguinity: a sister is insane & a weakness of mind has been shown in another member. This is not 1st attack: others occurred in October 1891 & March 1898: Duration of 1st, 6 weeks: of 2nd 6 months: was sent to ⊕ Rochester State Hospital, and discharged, apparently cured. First symptoms of this attack manifested about 3 months ago: a gradual loss of mind. Disease seems increasing: Stationary:— Derangement now shown in that mind seems to be clouded on all subjects: Disposed to injure others: has thrown things at others: not suicidal: no filthy nor destructive habits. Previously, was more intense on any subject that comes up & irrational on all. No history of intemperance: had fever, before 1st attack in 1891. Has been constantly watched. Cause of disease not known: (Note P.M.: causes previously given as suppression of menses or irregular menstruation). Treatment, sedatives. On personal examination, talks in rambling manner, irrationally: has staring look & has been raving.— Commitment recommended because she needs medical treatment while held under legal restraint.—

⊕ Note: 3rd admission: here before 1st time from October 13-1891 to November 23-1891. and discharged February 5-1892, as recovered: form "Pubescent Insanity": see V18 p13 No 2843. 2nd time: from March 7-1898 to November 11-1898 & discharged June 6-1899, Recovered see Vol 38 p 169 No 4991: causes given as mentioned above. ——

July 25 On admission, was put on T.W. (G.H.N. Rpt. Complexion dark: hair black: eyes blue: Condition of skin normal: no marks or scars noted: small bruise on right knee: is clean: patient has 13 lower + 15 upper teeth: behavior maniacal: remarks incoherent)—

Summary of 14 day record Dict. by Dr. O. C. Heyerdale.

July 25th 1902. Patient admitted on Inf. West bathed and put to bed: she refused cathartic: was very noisy and out of bed most of the night: During 14 days Tem. Pl. and Res. about normal: given regular diet and occasional hypnotics and cathartics: patient is disturbed and noisy then will be quiet and rational for a short interval and continued this way during the 14 days: was given electrical treatment tonics and massage, the latter she refused: when disturbed she expresses many delusions is then very headstrong and set in her way: when quiet she talks quite rationally and intelligently although even then she is somewhat delusional.

Very active & maniacal, noisy and disturbed. Takes nourishment well: requires hypnotics to sleep. Aug. 1st. Patient rather violent. struck nurses & patients, Tore her dress. Wt 100#.

Aug. 26th Still very noisy and disturbed: Taken out of doors for exercise.

Sept. 17th, 27th, Nov. 5, 6, 9, 13 Visited by friends. Nov. 19th Patient seemed more quiet altho' very excited at times Nov 22nd Visited by friends Wt. 107#.

Nov. 29, visited by friends.

Personal and Medical History of

Dec. 1st. Patient neat in habits and appearance. Converses intelligently. Assists with the work. Much improved.

Dec. 10, 26, 29th, Jan. 1st, 8th, 9th, 11th, and 14th Visited by friends.

Personal and Medical History of Sophie Pottgieser

Whole No. 6163.
Residence, St Paul, Minn
Resident of State 20 yrs : of County 20 yrs
Date Admission, 29th July 1902.
Admitted by Dr O. C. Heyerdale hour, 7.00 Pm
How Sent, Henry Gallick, Ct. Commr Ramsey Co.
Sex, Female, Age, 45
Civil Condition, Widowed
Children, Two Age Youngest Child, 11 Years
Occupation, Housewife
Degree Education, – Common school –
Profession of Religion, Yes: Lutheran
Habits, not intemperate
Nativity, Beaver-Dam Wisconsin: Parents' Germany
Physicians Committing, L. A. Bole and Marcus Fessler
Correspondents, Step-Daughter, Mrs Clara Ryder
– Box 33 – Gladstone, Minn

No. for Year, 275.
Insane Relatives, none
Cause Exciting, Don't know
Cause Predisposing, not stated –
Form, Primary Dementia –
Accompanying Bodily Disorder, poor physical condition
Suicidal or not, – Not
Date of this Attack, about a Year ago –
Duration, " " probably
No. of Attack, 1st –
No. of Admission, 1st –
Age First Attack, about 44 –
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* July 31 – 1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear, but rather Confused
MEMORY, Past Events, Impaired –
Recent Events, Not very reliable Special Subjects, –
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert, but somewhat illusive.
REASONING POWER, Ordinary Subjects, –
Special Subjects, Impaired
Own Mental State, Does not appreciate –
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Normal –
DELUSIONS, Systematized, – Transitory, all Kinds of Delusions
Special Subjects, –
HALLUCINATIONS, of sight –
ILLUSIONS, Illusions
SUMMARY, –

HISTORICAL.

LENGTH INVASION, –
ONSET, Gradual or Sudden, –
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Died of some fever –
Paternal Relatives, –
Mother, Died of rheumatism
Maternal Relatives, –
Brothers and Sisters, one sister died in Confinement – 1 brother –
Children – 2 living one died of diphtheria
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
no history of anything, but diphtheria
HABITS, Drinking and Smoking, –
HEADACHES, VERTIGO, OR CONVULSIONS, chorea when a child –
✓ yes ✓ yes
OCCUPATION, Healthy or not, Housewife –
Detail Date, Duration, and Character of Previous Attack, if any,
–
Sleep, Slept well Appetite, good Bowels, regular
✓

Personal and Medical History of Sophie Pottgieser

SENT TO ROCHESTER.

Four Insanity Cases Before the Court Commisioner.

Court Comissioner Henry Gallick yesterday committed Mrs. Sophia Pottgieser to the state insane hospital at Rochester. Mrs. Pottgieser has two children, and is forty-five years old. She lives at 778 Como avenue. Doctors R. S. Bole and Marcus Fessler pronounced her insane, as being chronically subject to delusions.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 110 lbs – USUAL WEIGHT, – NUTRITION, poor
s, right thumb somewhat deformed by felon – Condition of Skin, papular eruption on limbs & back
mptness of Movement, Coated : prompt
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes –
SIGHT, wears glasses
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, – Good
COORDINATION, Arms, good Legs, good ~~Grasp~~, other tests, good.
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none –
PATELLAR REFLEX, present Other Reflexes, elbow & wrist
ARTICULATION, Slurred, – Hesitating, Good Slow, –
FACIAL EXPRESSION, – Sensibility, –
HEART, Regularity, regular
Strength, Sounds, fairly strong
Size, normal
Apex Beat, normal
Murmurs, haemic murmur
ARTERIES,
normal
LUNGS,
Chest symmetry: symm.
Expansion: fair;
Breath Sounds: normal –
slight dullness in left apex –
Passed Aug 1/02 – Ex. Aug 1/02
EXAMINATION URINE, Quantity, Sp. g. 1021 Reaction, acid Color and Appearance, yellow Clear & slight flaky dep. –
Albumen, Heat 0 – nitric acid 0 – Tanret 0. Sugar, Fehling's Sol 0 – Bismuth 0. –
Casts and Crystals, a few hyaline casts: amor. urates: pus, a few corp: Epithelium, a few cells: Oxalate lime; several crystals: several uric acid crystals. –
GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: urethral orifice inflamed: parts about external genitals excoriated: uterus retro-levo-flexed: endometritis: cervicitis: vaginitis:
MENSTRUATION, – purulent leucorrhoea –
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps well –
BOWELS, Present Condition, 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,

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 quiet: sleeps well, without sedatives: is rather anaemic & poorly nourished: habits are clean. Mentally, does not appreciate her condition – Mental equilibrium unstable – Will, at one moment, answer questions correctly, but, the next, she may be talking in a rambling, disconnected, incoherent way. Expresses both delusions & hallucinations – Does not realize where she is or why she is here. –

Personal and Medical History of Sophie Pottgieser

Whole No. 6163.
Residence, St Paul, Minn
Resident of State 20 yrs : of County. 20 yrs
Date Admission, 29th July 1902
Admitted by Dr. O. C. Heyerdale hour, 7.00 Pm
How Sent, Henry Gallick, Ct. Commr. Ramsey Co.
Sex, Female . Age, 45
Civil Condition, Widowed
Children, Two Age Youngest Child, 11 Years
Occupation, Housewife
Degree Education, — Common school —
Profession of Religion, Yes: Lutheran
Habits, not intemperate
Nativity, Beaver-Dam. Wisconsin: Parents, Germany
Physicians Committing, L. A. Bole and Marcus Tessler
Correspondents, Step-daughter, Mrs Clara Ryder
- Box 33 - Gladstone, Minn

No. for Year, 275.
Insane Relatives, none
Cause Exciting, Don't know
Cause Predisposing, not stated -
Form, Primary Dementia -
Accompanying Bodily Disorder, Poor physical condition
Suicidal or not, — Not
Date of this Attack, about a Year ago -
Duration, " " probably
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, about 44 -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* July 31 - 1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear, but rather Confused
MEMORY, Past Events, Impaired -
Recent Events, Not very reliable Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert, but somewhat illusive.
REASONING POWER, Ordinary Subjects, —
Special Subjects, Impaired
Own Mental State, Does not appreciate -
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Normal -
DELUSIONS, Systematized, — Transitory, all Kinds of Delusions
Special Subjects, —
HALLUCINATIONS, of sight —
ILLUSIONS, Illusions
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Died of some fever -
Paternal Relatives, —
Mother, Died of rheumatism
Maternal Relatives, —
Brothers and Sisters, one sister died in Confinement - 1 brother -
Children - 2 living - one died of diphtheria
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
no history of anything, but diphtheria
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, — chorea when a child
✓ yes ✓ yes
OCCUPATION, Healthy or not, Housewife -
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, Slept well Appetite, good Bowels, regular
✓

fit to do it now, the way the
present is constituted. That wa
the point, and he meant every
it. He has been a Democrat all
and still is a Democrat."
On the subject of the tariff ar
of goods in foreign markets at
prices, Mr. Babcock has had this
tion to make at this time:
"The efforts of the Democrats to
an issue out of the allegation that
ufacturers are selling goods ch
abroad than at home will fall flat
chi

Personal and Medical History of Sophie Pottgieser

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3 in PRESENT WEIGHT, 110 lbs USUAL WEIGHT, — NUTRITION, poor
WOUNDS, Abnormalities, right thumb somewhat deformed by felon — Condition of Skin, papular eruption on limbs & back
TONGUE, Coatings, Promptness of Movement, Coated : prompt
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes -
SIGHT, Wears glasses
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Normal
HEARING, — Good
COORDINATION, Arms, good Legs, Good Grasp, other tests, good.
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none -
PATELLAR REFLEX, present Other Reflexes, elbow & wrist
ARTICULATION, Slurred, — Hesitating, Good Slow, —
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, regular
Strength, Sounds, fairly strong
Size, normal
Apex Beat, normal
Murmurs, haemic murmur
ARTERIES,
Normal
LUNGS,
Chest symmetry: symm:
Expansion: Fair:
Breath Sounds: normal -
slight dullness in left apex —
Passed Aug 1/02 - Ex? Aug 1/02

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. 1021 Reaction, acid Color and Appearance, yellow Clear & slight flaky dep. -
Albumen, Heat 0 - nitric acid 0 - Tanret's 0. Sugar, Fehling's Sol 0 - Bismuth 0. —
Casts and Crystals, a few hyaline casts: amor. urates: pus, a few corp: Epithelium, a few cells: Oxalate lime: several crystals: several uric acid crystals. —
GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: urethral orifice inflamed: parts about external genitals excoriated: uterus retro-levo-flexed: endometritis: cervicitis: vaginitis:
MENSTRUATION, — purulent leucorrhoea -
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps well -
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 quiet: Sleeps well, without sedatives: is rather anaemic & poorly nourished: habits are clean. Mentally, Does not appreciate her condition - Mental equilibrium unstable. Will, at one moment, answer questions correctly, but, the next, she may be talking in a rambling, disconnected, incoherent way. Expresses both delusions & hallucinations - Does not realize where she is or why she is here. -

1902

Personal and Medical History of Sophie Pottgieser

This patient was brought here by Deputy Emanuel Johnson, attended by — Mrs Ryder, in poor physical condition, with following history of case. There is no history of consanguinity or heredity. This is 1st Attack: first symptoms manifested about a year ago; delusions: Disease seems increasing: not variable; no rational intervals. Derangement now shown by delusions on many — subjects. Is not disposed to injure others, nor suicidal. Disposed to filthy and destructive habits. No history of any previous peculiarities, intemperance, severe disease &c, nor head-injury. Has not been restrained or confined. Don't know cause of the disease: treatment none. On personal examination, talks incoherently.

July 29 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair, light brown: Eyes blue: Condition of skin normal; as to marks, bruises, ulcers &c, none noticed. Scars, on third finger & thumb of left hand: eruptions on back & legs: is dirty: her hearing is defective. Patient has 7 upper, and 7 lower teeth: all in a bad condition. Behavior quiet: answers questions intelligently). —

Summary of 14 day record Dict. by Dr. L. A. Linton

July 29th 1902: Admitted on Inf. West bathed and put to bed: is troubled with eruption on both limbs and back: scar noticed on thumb and third finger of right hand: has hallucinations of sight: was put on regular diet: appetite good: bowels regular: slept well without the aid of hypnotics: During 14 days maximum Tem. 100: Pl. 100: Res. 24. Aug. 2 up on ward began to take out door exercise and to assist with the lighter work of the ward: at times is somewhat excited but is ordinarily quiet.

Sep. 1902 – Patient was transferred to annex where she remained for
to two months but because of frequent attacks of some disturbance
Feb 1st she was moved to a violent ward for a time as seclusion was
1903. necessary at times.

She has had no special physical ailment although poorly nourished. Weight Nov 21st 103 lbs – Sleeps well, appetite fair – takes out of door exercise and occasionally assists with the ward and dining room work. Habits cleanly appearance careless. Patient is incoherent, gives irrelevant replies to questions – never converses intelligently, is quite delusional.

See Files.

Personal and Medical History of Clara. B. Benson

Whole No. 6166.
Residence, Newry, Freeborn Co. Minn.
Date Admission, 4th August 1902.
Admitted by Dr. A. M. Phelps hour, 8.00 P.M.
How Sent, Hewson Blackmer, J of P. Freeborn Co
Sex, Female Age, 22.
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Housework.
Degree Education, Common School —
Profession of Religion, Yes: Lutheran
Habits, not intemperate.
Nativity, Minnesota: Parents born in Norway.
Physicians Committing, W. B. Todd and Oscar. A. Burton
Correspondents, none given in papers —

No. for Year, 2.
Insane Relatives, none.
Cause Exciting, Unknown
Cause Predisposing, not stated
Form, Simple Melancholia
Accompanying Bodily Disorder, (probably menstrual trouble)
Suicidal or not, Suicidal by drowning: propensity active
Date of this Attack, April 30th 1902.
Duration, over 3 months —
No. of Attack, 1st — —
No. of Admission, 1st — —
Age First Attack, about 22 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Aug 7 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Apparently Clear: quick
MEMORY, Past Events, somewhat impaired
Recent Events, Seems good Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: seemingly Correct
REASONING POWER, Ordinary Subjects, —
Special Subjects, Impaired
Own Mental State, Does not appreciate
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Somewhat Depressed
DELUSIONS, Systematized, } ~~Transitory~~,
Special Subjects, } Nothing Obtainable
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,

HISTORICAL.
LENGTH INVASION, Gradual
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
no history obtainable
Father, Living
Paternal Relatives, Uncle Died of Cancer
Mother, Living —
Maternal Relatives,
Brothers and Sisters, 5 Sisters 3 brothers —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
— nothing —
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, —
no no no
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
none
Sleep, well Appetite, Good Bowels, regular

Personal and Medical History of Clara. B. Benson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, 124 lbs USUAL WEIGHT, — NUTRITION, good
WOUNDS, Abnormalities, nothing — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, slight coating — prompt —
PUPILS, Equality, equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, — Good
COORDINATION, Arms, good Legs, good ~~Grasp~~, other tests, good —
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, absent Other Reflexes, absent.
ARTICULATION, Slurred, Good Hesitating, — Slow, —
FACIAL EXPRESSION,
HEART, Regularity, regular
Strength, Sounds, fairly Strong
Size, normal
Apex Beat, " in position
Murmurs, none
ARTERIES,
Normal
LUNGS,
Chest symmetry: sym.
Expansion: Good
Breath sounds: Good.
Passed Aug 9/02. Exd aug 9th

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, ℥ LV ½ Sp. g. 1014 Reaction, Acid Yellow ~~Color~~ and Appearance, Clear & slight flaky dep —
Albumen, Heat 0 nitric acid 0 Tanret's 0 Sugar, Fehling's Sol 0 — Bismuth 0
Casts and Crystals, urates, a large amount of amor: several mucus bands: Epithelium several cells: oxalate lime several crystals. —
GYNECOLOGICAL EXAMINATION, External Genitals normal: hymen intact: uterus normal in position: and free. —
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics.
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 quiet, since admission: answers questions sensibly: but is reticent: does not volunteer remarks & is very brief in answer to questions: has not, as yet, expressed any delusions or queer ideas: will not admit that she is in any way abnormal. says; "She does not know why she was brought away from home."

Personal and Medical History of Clara B. Benson

1902

This patient was brought here by O. P. Fasson, attended by Miss G. Benson, in fair physical condition, with following history of case. No history of consanguinity or heredity: This is 1st attack: first symptoms manifested, April 30th 1902: Neglected her work: feeling sick: Disease seems increasing: variable & with rational intervals: occurring at regular intervals, at menstrual periods: Derangement now shown by extreme restlessness: attempts to get away: set fire to clothing in house: Melancholia Is not disposed to injure others; has attempted suicide by drowning & propensity active now: disposed to filthy and destructive habits. No previous peculiarities noted: No history of intemperance, nor of any severe disease &c, nor head-injury. Has been restrained & confined, at home; constant watching. Cause of disease is unknown: Treatment none: On personal examination, reticent, uncommunicative, neat.

Augst On admission, was put on T.W. (G.H.N. R'pt: Complexion fair: hair brown: eyes blue: condition of skin, normal: no marks, scars, bruises &c are noticed. — Is clean: has 14 lower and 12 upper teeth: behavior quiet: talks intelligently.)

Summary of 14 day record Dict. by Dr. L. A. Linton,

August 4th 1902: Admitted on Inf. West bathed and put to bed: was quiet and sleeps well without the aid of hypnotics: bowels regular. During 14 days maximum Tem. 99: Pl. 80: Res. 22: was put on regular diet: seems somewhat depressed and very reticent: expresses the delusion that she is deserted by friends and relatives: Aug. 6-7-8-9 10-11 visited by sister: takes out door exercise: Aug. 17 attended chapel. Expresses delusions of desertion by two relatives.

Quiet in behavior. Aug. 5th Visited by sister each day until the 12th. Visited on the 21st by friends. Wt 126# Aug. 31st. Patient quiet and agreeable. Rather melancholy: assists some with the work. Attends amusements. Oct. 31st Visited by father, mother, & sister.

General health good. Quiet and agreeable: Does some fancy work. Also assists with the ward work.

Nov 28th No change. Wt. 144 #.

Personal and Medical History of

Personal and Medical History of Sophie Webber

Whole No. 6167.
Residence, Saint Paul, Minn
When became a resident of State or of County, not known
Date Admission, 5th August 1902. –
Admitted by Dr O. C. Heyerdale hour, 7.00 P.M.
How Sent, Henry Gallick, Ct. Commr: Ramsey Co.
Sex, Female Age, 48 –
Civil Condition, Widowed –
Children, Four Age Youngest Child, not known
Occupation, Housewife: (father's, not known)
Degree Education, not known.
Profession of Religion, if Church member or church, not known.
Habits, – not known –
Nativity, not known: that of parents, not known.
Physicians Committing, Edward J. Brown and P. B. Cook
Correspondents, address Probate Judge, until her address can be determined.

No. for Year, 3.
Insane Relatives, one cousin supposed to be here.
Cause Exciting, not known
Cause Predisposing, possibly some heredity
Form, Mania Acute.
Accompanying Bodily Disorder, not known
Suicidal or not, not, but will injure others. –
Date of this Attack, about a week ago
Duration, " " probably
No. of Attack, not known (if 1st)
No. of Admission, 1st (in gaol 3 days) –
Age First Attack, – not known –
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Aug 7 – 1902.

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,
alert: illusive
REASONING POWER, Ordinary Subjects, poor
Special Subjects, poor
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Exalted.
DELUSIONS, Systematized, — Transitory,
Special Subjects, —
Has delusions of persecution
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 Sophie Webber

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft – 3 in PRESENT WEIGHT, 111# USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, white coating: prompt
PUPILS, Equality, Yes Size, small Response to Light, fair Accommodation, fair
SIGHT, seems good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good Legs, good Grasp, other tests good
TREMORS, Hands, none Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, Elbow: wrist
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
—
LUNGS,
Chest symmetry: Yes
Expansion: good
Breath Sounds: normal
Passed Aug 9/02. Ex. Aug 9th

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. 1011 Reaction, acid Yellow Color and Appearance, Clear & a slight flaky dep. –
Albumen, Heat 0 – nitric acid 0 – Sauret's 0 – Sugar, Fehling's Sol. 0 – Bismuth 0 –
Casts and Crystals, —— amor. urates: several mucus band; uric acid crystals – epithelium, all kinds –
GYNECOLOGICAL EXAMINATION, Perinaeum & cervix slightly lacerated; external haemorrhoids. uterus normal in position, free; fundus large, hard; cervicitis endometritis; leucorrhoea
MENSTRUATION,
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, admitted in fairly good physical condition: fairly well nourished: she is very delusional & expresses her delusions freely: has delusions that people are trying to kill her & persecute her: she is, at times, very noisy & violent. —

Personal and Medical History of Sophie Webber

1902

This patient was brought here by Emanuel Johnson, attended by Johanna Johnson, in fair physical condition, with following history of case. If any consanguinity not known: If first attack: if disease is variable & if there are rational intervals, if any history of intemperance; if patient has been subject to any severe disease &c, or head-injury, nothing is known. First symptoms of this attack manifested in that she aimless (wandered) around, about one week ago. Disease seems increasing. Derangement now shown in that she talks incoherently: insomnia: violent, at times. Is disposed to injure others, but not suicidal: is of filthy & destructive habits. One cousin supposed to be confined in Rochester State Hospital. Previously, was maniacal. Has been confined in gaol, 3 days. Cause of the disease, not known: Treatment, none. On personal examination, is restless; talks constantly & incoherently.—

Aug 5 On admission, was put on 7W. (G.H.N. R'pt. Complexion dark: hair brown: part gray: Eyes hazel: condition of skin, normal: no marks, eruptions or ulcers noted: Scar on forehead, over left eye: small bruises on legs & left shoulder: hernia, noticed: no vermin, but is dirty: has mole on her back: she has 14 upper and 15 lower teeth. Behavior quiet: has delusions). ——————

Summary of 14 day record dictated by Dr O. E. Hyrdale

Patient admitted Aug 5th 1902 bathed and put to bed during first week T. R and P about normal, took regular diet, slept fairly well. Patient somewhat excited, noisy and untidy and resistive. During second week T. P and R., about normal, took regular diet occasional hypnotic given, patient during this week became more quiet, less excited, more tracticable.

Patient is violent & resistive: incoherent in speech. Quite talkative. Uses vulgar and profane language. Untidy in habits. Menstruating. Aug. 26th Wt 114#. Patient somewhat quieter. Improved mentally.

Personal and Medical History of

Personal and Medical History of Sarah. A. Vaughn

Whole No. 6169.
Residence, Austin, Mower Co. Minn.

Date Admission, 6th August 1902
Admitted by Dr. A. M. Phelps hour, 8:20 P.M.
How Sent, S. S. Washburn, J of P. Mower County
Sex, Female Age, 74.
Civil Condition, married
Children, Five Age Youngest Child, 36 –
Occupation, Housewife; husband, a laborer
Degree Education, Common School –
Profession of Religion, Yes: Methodist
Habits, not intemperate
Nativity, New York: parents, New Jersey.
Physicians Committing, E. H. Washburn – Rogers and F. E. Daigneau
Correspondents, J. F. Fairbanks
Austin Minn
(Telephone or mail)

No. for Year, 5.
Insane Relatives, none
Cause Exciting, not known –
Cause Predisposing, probably age & prev. atts.
Form, Senile Dementia
Accompanying Bodily Disorder, (varicose veins)
Suicidal or not, Not, but will injure others
Date of this Attack, five months ago
Duration, " " probably
No. of Attack, 3rd
No. of Admission, 2nd
Age First Attack, about 64 –
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Luiton *Date of* Aug 7/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused & sluggish
MEMORY, Past Events, Could not determine
Recent Events, Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
– Dull –
REASONING POWER, Ordinary Subjects, —
Special Subjects, Impaired
Own Mental State, Does not appreciate
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
– Depressed –

DELUSIONS, Systematized, — Transitory, —
Special Subjects, None determined –

HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, Gradual: Progressive
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
apoplexy & tuberculosis –
Father, Died: apoplexy
Paternal Relatives, —
Mother, Died: tuberculosis –
Maternal Relatives, —
Brothers and Sisters, —
Children 4 – 3 Daughters. 1 Son
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
– nothing –

HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
May 28 – 1901 to June 16 – 1901.
Sleep, poor Appetite, poor Bowels, Constipated.

Personal and Medical History of Sarah A. Vaughn

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, poor
WOUNDS, Abnormalities, nothing – Condition of Skin, anaemic, otherwise normal
TONGUE, Coatings, Promptness of Movement, Coated: prompt
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, poor
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Cataract in both eyes
HEARING, Good
COORDINATION, Arms, Good Legs, } Finger to nose, eyes shut: Standing on one foot: turning quickly – refuses Standing, eyes shut, poor Good Grasp, —
TREMORS, Hands, fine Tongue, fine Facial Muscles, None General, None
PATELLAR REFLEX, Diminished Other Reflexes, Absent
ARTICULATION, Slurred, — Hesitating, Hesitating Slow, Tendency to repeat over & over again
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, Regular
Strength, Sounds, fairly strong
Size, enlarged
Apex Beat, lowered to left
Murmurs, aortic Stenosis – mitr. regurgitation –
ARTERIES,
Sclerotic

LUNGS,
Chest symmetry: Sym
Expansion: Poor
Breath Sounds: normal
Passed Aug 9/01: Rec'd Aug 9th

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, ℥xxv. Sp. g. 1025 Reaction, Acid Color and Appearance, Yellow clear
Albumen, Heat & a good test: Nitric acid, trace: Sanets & a good test Sugar, Fehling's Sol. 0 – Bismuth 0 –
Casts and Crystals, amor urates: pres, several corp: Epithelium several cells: Several uric acid crystals. –
GYNECOLOGICAL EXAMINATION, Urethral Caruncle: uterus retroverted slightly: fundus large, hard posterior lip of cervix hypertrophied, possibly malignant growth: labia somewhat atrophied.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics –
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 restless, resistive, &, at times, somewhat violent. Does not voluntarily converse: is reticent, non communicative: Sometimes will answer questions & that, at times, sensibly: is, at times, incoherent. She is depressed & rather oblivious of surroundings —

1902

This patient was brought here by J. F. Fairbanks, attended by Mrs Mary Fairbanks, in fair physical condition, with following history of case. No history of consanguinity or heredity. This is not 1st attack; others occurred 4 years ago and a year ago: duration 4 or 5 months: was sent to Rochester hospital: result of treatment, beneficial. First symptoms of this attack manifested 5 months ago (in what way, is not stated): Disease seems increasing: not variable: no rational intervals: Derangement now shown on all subjects. Is disposed to injure others, but not suicidal: propensity not active: no filthy nor destructive habits. No history of any previous peculiarities, intemperance, severe disease &c, nor head injury. ×Was confined at Asylum, one year ago. Cause of disease, not known: Treatment, none. On personal examination, is somewhat melancholy: appears confused. Commitment recommended, because she needs care & treatment, while under legal restraint.

×Note. 2nd admission: herebefore from May 28 - 1901 to June 16 - 1901 & discharged November 30 - 1901, as Improved. Form, then, Senile dementia. (See Vol 44 p 277 No 1831.-

Aug 6 On admission, was put on T.W. (G.F.H. N.R.pl. Complexion fair: hair gray: eyes blue: condition of skin normal: no marks, eruptions or ulcers noticed: small scar on left shoulder: small bruise on left knee: is clean: has varicose veins: has no teeth: behavior is quiet: talks very little, but answers questions fairly well.)-

Summary of 14 day record Dict. by Dr. L. A. Linton

August 6th 1902 Admitted on Inf. West bathed and put to bed: quite disturbed and incoherent; does not converse intelligently: talks to herself a great deal at times answers questions sensibly; is resistive when disturbed and very restless; During the 14 days Tem. 100: Pl. 106: Res. 32: Was put on regular diet: bowels inclined to be constipated requiring cathartic also requires hypnotics at night: Aug. 14 visited by friends.

Summary of 14 day second Dict by Dr L.A. Linton

Sept. 1st patient was up on ward answers questions readily, eats and sleeps well takes outer door exersize attends chapel, tidy in habits and appearences requires cathartics. September 10-27-29 Oct 1st visited by friends. during the early part of October frequently refused nourishment so that mechanical feeding is becoming much more disturbed seems quite feeble sat up Oct 9-18-19 visited by friends and relatives, was taken home Oct 22, although at the time some what disturbed, affected with diarrhea and requiring hypnotics.

Nov 1st Patient admitted on the ward bathed and put to bed very restive and untidy was troubled with diarrhea. Nov 7 visited by friends bowels regulated twice daily was put on tonics began to improve slowly and on Nov 13 was sent

to A-1 She became much more agreable; is able to converse readily; appetite improved and sleeps fairly well. Nov 18-&-24 was visited by friends; Nov 26 seemed to cough considerable was given customary treatment and put on extra diet and beef tea given between meals Weight 92 pounds. Improved rapidly both Mentally & Physically quite agreable converses readily and rational. Was sent home DEC 8-1902.

Personal and Medical History of Bertha Harmon.

Whole No. 6170.
Residence, Cass Lake, Minn
Became resident of State 21 yrs ago: of County 3 wks ago.
Date Admission, 7th August 1902
Admitted by Dr. O. C. Heyerdale hour, 7:20 PM
How Sent, Henry Gallick, Court Commr. Ramsey Co.
Sex, Female Age, 21.
Civil Condition, Married.
Children, none Age Youngest Child, —
Occupation, Housewife: husband's, lumber cruiser
Degree Education, Common School
Profession of Religion, Catholic
Habits, not intemperate
Nativity, U.S.A.: parents born in Germany.
Physicians Committing, Haldor Sneve and Chas. P. Arzt
Correspondents, (Father) Aug. Thomas
569 Blair St.
St Paul Minn

No. for Year, 6.
Insane Relatives, none
Cause Exciting, Unknown
Cause Predisposing, not stated
Form, Melancholia Acute. Delusions
Accompanying Bodily Disorder, none mentioned (Insomnia)
Suicidal or not, not —
Date of this Attack, a few months ago
Duration, " " —
No. of Attack, 1st —
No. of Admission, 1st (10 Days at City Hospl.) here
Age First Attack, 20 past
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Aug 8/02.

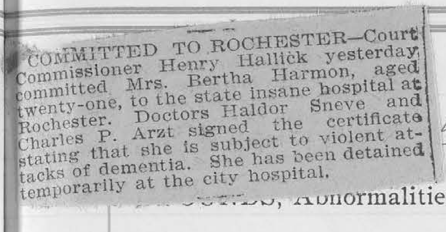
MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quick: Clear on most subjects.
MEMORY, Past Events, Good
Recent Events, Good Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
— Alert —
REASONING POWER, Ordinary Subjects, fair —
Special Subjects, fair —
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, — Transitory, —
Special Subjects,
Has delusions of persecution: thinks people have been trying to poison her & take advantage of her.
HALLUCINATIONS,
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Aunt died of consumption: family history otherwise negative
Father, Living — well
Paternal Relatives, —
Mother, Living — well
Maternal Relatives, —
Brothers and Sisters, 1 4 well
3 children — 2 living
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Typhoid at 7 years of age.
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, —
Yes: of late Yes upon stooping
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, poor Appetite, fair Bowels, regular

Personal and Medical History of Bertha Harmon



COMMITTED TO ROCHESTER—Court Commissioner Henry Hallick yesterday committed Mrs. Bertha Harmon, aged twenty-one, to the state insane hospital at Rochester. Doctors Haldor Sneve and Charles P. Arzt signed the certificate stating that she is subject to violent attacks of dementia. She has been detained temporarily at the city hospital.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, fair
Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: white thick coating —
PUPILS, Equality, Yes Size, normal Response to Light, Good Accommodation, good
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, — Good —
COORDINATION, Arms, good Legs, Good Grasp, other tests good —
TREMORS, Hands, fine Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, exaggerated Other Reflexes, Elbow — wrist —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, Normal
Murmurs, none
ARTERIES,
Normal
LUNGS,
Chest symmetry: Yes: well developed
Expansion: Good
Breath Sounds: normal
Passed Aug 9/02: 2d. Aug 9th

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, ℥ xxx Sp. g. 1023 Reaction, acid Color and Appearance, Yellow Clear and a slight flaky dep. —
Albumen, Heat 0 — nitric acid 0 — Tanret's 0 — Sugar, Fehling's sol. 0 — Bismuth 0. —
Casts and Crystals, Uric acid crystals. — amor. urates: Several mucus bands: pus, a few corp.: Epithelium several cells: oxalate lime, several crystals —
GYNECOLOGICAL EXAMINATION, external genitals somewhat congested: some excoriation: hymen lacerated; otherwise parts normal. Uterus normal in position & free: Endometritis,
MENSTRUATION, Cervicitis: Cervix cystic; purulent leucorrhoea. —
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 admitted in fair physical condition: seems quite bright & intelligent: answers questions readily & quite rationally, except on subject of her delusions: has delusions of persecution & believes that people have been trying to "down" her and poison her. —

She is quiet in behavior, but was very violent, one evening. She is a case of mild melancholia with delusions —

Personal and Medical History of Bertha Harmon

Chicago, Aug. 7.—The
convention of the Federation of C
societies relative to Archbishop Ire
warning not to interfere with the
pine question was put to the test a
closing session to-day.
John T. Keating, a national office
the Hibernians, offered a substitute
olution for those previously brought

Whole No. 6170.
Residence, Cass Lake, Minn
Became resident of State 21 yrs ago: of County 3 wks ago.
Date Admission, 7th August 1902
Admitted by Dr. O.C. Heyerdale hour, 7.20 pm
How Sent, Henry Gallick, Court Commr. Ramsey Co.
Sex, Female Age, 21.
Civil Condition, married.
Children, none Age Youngest Child, —
Occupation, Housewife. husband's, lumber cruiser
Degree Education, Common School
Profession of Religion, Catholic
Habits, not intemperate
Nativity, U.S.A: parents born in Germany.
Physicians Committing, Haldor Sneve and Chas. P. Arzt
Correspondents, (Father) Aug. Thomas
569 Blair St.
St Paul Minn

No. for Year, 6.
Insane Relatives, none
Cause Exciting, Unknown
Cause Predisposing, not stated
Form, Melancholia Acute
Accompanying Bodily Disorder, none mentioned (Delusions Insomnia)
Suicidal or not, not —
Date of this Attack, a few months ago
Duration, " " —
No. of Attack, 1st —
No. of Admission, 1st (10 Days at C&C Hosp. three)
Age First Attack, 20 past
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale *Date of* Aug 8/02.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quick: Clear on most subjects.
MEMORY, Past Events, Good
Recent Events, Good Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
— Alert —
REASONING POWER, Ordinary Subjects, fair —
Special Subjects, fair —
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
Has delusions of persecution: thinks people have been trying to poison her & take advantage of her.
HALLUCINATIONS,
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Aunt died of Consumption: family history otherwise negative,
Father, Living — well
Paternal Relatives, —
Mother, Living — well
Maternal Relatives, —
Brothers and Sisters, 1 4 well
3 children — 2 living
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Typhoid at 7 Years of age.
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, —
Yes: of late Yes upon Stooping
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, poor Appetite, fair Bowels, regular

Personal and Medical History of Bertha Harmon

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3 in PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, fair
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: white thick coating —
PUPILS, Equality, Yes Size, normal Response to Light, Good Accommodation, good
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, — Good —
COORDINATION, Arms, good Legs, good Grasp, other tests good —
TREMORS, Hands, fine Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, exaggerated Other Reflexes, elbow — wrist —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, regular
Strength, Sounds, strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: Yes: well developed
Expansion: good
Breath Sounds: normal
Passed Aug 9/02: Ex. Aug 9th

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, ℥ xxx Sp. g. 1023 Reaction, acid Color and Appearance, Yellow Clear and a slight flaky Dep. —
Albumen, Heat 0 — nitric acid 0 — Tanret 0 — Sugar, Fehling's Sol 0 — Bismuth 0 —
Casts and Crystals, Uric acid crystals — amor urates: several mucus bands: pus, a few corp.: Epithelium several cells: oxalate lime, several crystals —
GYNECOLOGICAL EXAMINATION, external genitals somewhat congested: some excoriation: hymen lacerated; otherwise parts normal. Uterus normal in position & free: Endometritis,
MENSTRUATION, Cervicitis: Cervix cystic; purulent leucorrhoea. —
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 admitted in fair physical condition: seems quite bright & intelligent: answers questions readily & quite rationally, except on subject of her delusions: has delusions of persecution & believes that people have been trying to "down" her and poison her. —

She is quiet in behavior, but was very violent, one evening. She is a case of mild melancholia with delusions —

Personal and Medical History of Bertha Harmon.

1902

This patient was brought here by E. Johnson, attended by mother, Mrs Thomas, – in fair physical condition, with following history of case. No history of Consanguinity or heredity. This is 1st attack: first symptoms manifested a few months ago: "fainting spells", and weakness. Disease seems increasing; not variable: no rational intervals: Derangement now shown in that she believes people attempt to poison her: insomnia & hallucinations of hearing: is not disposed to injure others, nor suicidal: no filthy or destructive habits. No history of any previous peculiarities &c, nor of intemperance, severe disease &c, nor head-injury. Has been confined 10 Days, at the City & Co. Hospital. Cause of disease, unknown: Treatment, has been rest. On personal examination, patient is restless & mutters to herself. –

Aug 7 On admission, was put on T.W. (G.H.N. Rpt: Complexion fair; hair brown: eyes blue: condition of skin normal: no marks scars or eruptions noted: several small bruises on arms: is clean: has 14 upper & 10 lower teeth, and 2 roots. Resisted when being bathed: remarks are incoherent.) –

Summary of 14 day record dictated by Dr O C Hegerdale

Patient admitted August 7-1902 bathed and put to bed had some bruises on arms and limbs. During first week T. R. and P. about normal took regular diet seemed to be in good physical health, bowels regular, appetite good patient very resistive expresses delusions on religious subjects had hallucinations of hearing and sight, attacks nurses at times. During second week T. R. and P about normal appetite good regular diet, bowels regular, continued very resistive, at times refused her food, at times very morose, sullen and quiet.

Aug. 14th Visited by minister. Aug. 26th Wt 99# Patient very resistive

Sept. 1st. Patient has delusions and hallucinations.

Sept. 5th Patient went home.

Personal and Medical History of

Personal and Medical History of Susie Bartholmy

Whole No. 8178.

Residence, St Paul, Minn.

Resident of State 10 years: of County, 10 years.

Date Admission, 22nd August 1902.

Admitted by Dr R. M. Phelps hour, 7.00 P.M.

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

Sex, Female Age, 30

Civil Condition, Single

Children, – Age Youngest Child, –

Occupation, Domestic.

Degree Education, Common School

Profession of Religion, Catholic.

Habits, not intemperate –

Nativity, U.S. Father's, France; Mother's, Germany

Physicians Committing, Arthur B. Ancker & Arthur Sweeney

Correspondents, (D.P.) No correspondent given – She can tell (Mother) Mrs Anna M. Bartholmy Stacyville Iowa

No. for Year, 14.

Insane Relatives, Unknown

Cause Exciting, Unknown

Cause Predisposing, not stated: previous attks.

Form, Pubescent Insanity

Accompanying Bodily Disorder, Catalepsy, frequently

Suicidal or not, Threatens suicide: propensity active.

Date of this Attack, about 10 days ago

Duration, – about 10 days –

No. of Attack, 3rd (others 1892 – 1893)

No. of Admission, 1st (in C&C. Hospl 10 Ds) was at St Peter & Fergus Falls not Rochester

Age First Attack, about 20 –

Time of Leaving,

Time in Hospital,

Result, Left July 25 1903

~~Died~~ Feb. 8. 1904 Imp.

Examination on Admission by Dr. O. C. Heyerdale *Date of* Aug 23 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quick &, at times, clear

MEMORY, Past Events, fair

Recent Events, fair Special Subjects, –

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert

REASONING POWER, Ordinary Subjects, fair

Special Subjects, —

Own Mental State, Says "She is not insane"

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

– Exalted –

DELUSIONS, Systematized, — Transitory, Has de-

~~Special Subjects,~~ – lusions of persecution

HALLUCINATIONS, —

ILLUSIONS, —

SUMMARY,

HISTORICAL.

LENGTH INVASION, Ten days

ONSET, Gradual or Sudden, —

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

Father, Dead:

Paternal Relatives, —

Mother, Living – well

Maternal Relatives, —

Brothers and Sisters, 4 brothers –

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

Typhoid at 15 years

HABITS, Drinking and Smoking, She says "good" –

occasional headaches:

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Housework: nursing:

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

Was at St Peter for 6 years: Fergus Falls, 4 mos

Sleep, poor Appetite, good Bowels, regular

Personal and Medical History of Susie Bartholmy

SENT TO ROCHESTER—Susie Bartholmy, age thirty and single, was yesterday committed by Probate Judge Bazille to the insane hospital at Rochester, Doctors A. Sweeney and A. B. Ancker signing the certificate. Miss Bartholmy is said to be subject to violent spells of insanity, and has formerly spent several months at the asylums at Rochester and Fergus Falls.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, good

has some small scars on arm – Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, prompt: white coating –

PUPILS, Equality, — Size, — Response to Light, good Accommodation, good

SIGHT, good —

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

HEARING, good —

COORDINATION, Arms, good Legs, good ~~Grasp,~~ other tests good –

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

PATELLAR REFLEX, present – Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular

Strength, Sounds, strong

Size, normal

Apex Beat, normal

Murmurs, none –

ARTERIES,

normal

LUNGS,

Chest symmetry: Yes

Expansion: good

Breath sounds: normal

Passed. Sep rofor. 4° Sept 20th

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, ℥ XXIV Sp. g. 10. Reaction, — Color and Appearance, Yellow cloudy & white flaky dep.

Albumen, Heat 0 : Nitric acid 0 : Tanret 0 – Sugar, Fehling's Sol 0 : Bismuth 0 –

Casts and Crystals, Urates, a large amount of ammo: Epithelium a few cells

GYNECOLOGICAL EXAMINATION, External genitals normal : hymen intact : uterus ante-flexed & adherent ; endometritis : cervicitis ; leucorrhoea –

MENSTRUATION,

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 admitted in good physical condition & well nourished: She is illusional and exalted: has delusions of persecution: says she is not insane & that she is wrongfully imprisoned. Says she has done nothing wrong & should not be imprisoned: She has a fair education: Patient is hysterical & much of her trouble probably comes from this. Commitment states that she has Epilepsy & catalepsy. She threatens suicide &, at times, bites her hand & wrist. —

Personal and Medical History of Susie Bartholmy

Whole No. 8178.
Residence, St Paul, Minn.
Resident of State 10 years: of County, 10 years.
Date Admission, 22nd August 1902.
Admitted by Dr R. M. Phelps hour, 7.00 P.M.
How Sent, E. W. Bazille, Jail. Ramsey County
Sex, Female Age, 30
Civil Condition, single
Children, – Age Youngest Child, –
Occupation, Domestic.
Degree Education, Common School
Profession of Religion, Catholic –
Habits, not intemperate –
Nativity, U.S. Father's, France; Mother's, Germany
Physicians Committing, Arthur B. Ancker & Arthur Sweeney
Correspondents, (Dr P.) No correspondent given – She can tell
(mother) Mrs Anna M. Bartholmy
Stacyville Iowa

No. for Year, 14.
Insane Relatives, Unknown
Cause Exciting, Unknown
Cause Predisposing, not stated: previous attks.
Form, Pubescent Insanity
Accompanying Bodily Disorder, Catalepsy, frequently
Suicidal or not, Threatens suicide: propensity active.
Date of this Attack, about 10 days ago
Duration, – about 10 Days –
No. of Attack, 3rd (others 1892 – 1893)
No. of Admission, 1st (in C & C. Hospl 10 Ds) was at St Peter & Fergus Falls not Rochester
Age First Attack, about 20 –
Time of Leaving,
Time in Hospital,
Result, Left July 25 1903
~~Dis~~ Feb. 8 - 1904 Dup.

Sign...
Conn., on the First Days of President's Tour of the New England States.
—
Pioneer Press Special Service.

Examination on Admission by Dr. O. C. Heyerdale *Date of* Aug 23 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quick & at times, clear
MEMORY, Past Events, fair
Recent Events, fair Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert
REASONING POWER, Ordinary Subjects, fair
Special Subjects, —
Own Mental State, says "She is not insane"
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
– Exalted –
DELUSIONS, Systematized, — Transitory, Has de-
~~Special Subjects,~~ – lusions of persecution
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, Ten days
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead:
Paternal Relatives, —
Mother, Living – well
Maternal Relatives, —
Brothers and Sisters, 4 brothers –
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Typhoid at 15 years
HABITS, Drinking and Smoking, She says "good" –
occasional headaches:
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Housework: nursing:
Detail Date, Duration, and Character of Previous Attack, if any,
Was at St Peter for 6 years: Fergus Falls, 4 mos
Sleep, poor Appetite, good Bowels, regular

Personal and Medical History of Susie Bartholmy

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, good
WOUNDS, Abnormalities, has some small scars on arm – Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: white coating –
PUPILS, Equality, — Size, — Response to Light, good Accommodation, good
SIGHT, good —
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, good —
COORDINATION, Arms, good Legs, good ~~Grasp,~~ other tests good –
TREMORS, Hands, fine Tongue, none Facial Muscles, — General, —
PATELLAR REFLEX, present – Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, strong
Size, normal
Apex Beat, normal
Murmurs, none —
ARTERIES,
normal
LUNGS,
Chest symmetry: yes
Expansion: good
Breath sounds: normal
Passed, Sep ropor. 4th Sept 20th

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, ℥ XXIV Sp. g. 10. Reaction, — Yellow ~~Color~~ and Appearance, Cloudy & white flaky dep.
Albumen, Heat 0 : nitric acid 0 : Jamet 0 – Sugar, Fehling's sol 0 : Bismuth 0 –
Casts and Crystals, Urates, a large amount of amorph: Epithelium: a few cells

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact: uterus ante-flexed & adherent; endometritis: cervicitis; leucorrhoea –
MENSTRUATION,
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 admitted in good physical condition & well nourished. She is illusional and exalted: has delusions of persecution: says "she is not insane & that she is wrongfully imprisoned." Says "she has done nothing wrong & should not be imprisoned". She has a fair education: patient is hysterical & much of her trouble probably comes from this. Commitment states that she has epilepsy & catalepsy. She threatens suicide &, at times, bites her hand & wrist. —

Personal and Medical History of Susie Bartholany

1902

This patient was brought here by Emil Johnson, attended by Mrs B. Hanson, in fair physical condition, with following history of case. Do not know as to any consanguinity: as to heredity, unknown: This is not 1st attack: others occurred 1892-93: Do not know duration: was sent to Rochester (?) & Fergus Falls Hospitals: result of treatment unknown: first symptoms of this attack manifested about ten days ago, by attack of hystero-Epilepsy. Disease seems increasing: not variable: no rational intervals. Derangement now shown in that she talks irrationally - threatens suicide - is restless and needs restraint. Is not disposed to injure others: if suicide attempted, unknown, but propensity is active now: no filthy nor destructive habits. If any previous peculiarities manifested, unknown. No history of intemperance. Subject to catalepsy, frequently. Has also been confined in City and County Hospital for ten days. Cause of the disease unknown. Treatment has been rest and sedatives. On Personal Examination, she talks to self: is stubborn; disobedient and irrational.

Aug 27 On admission, was put on TW. (G.H.N. Rpt: Complexion dark: hair brown: Eyes hazel: Condition of skin normal: no marks or eruptions noted. Several small scars on hands and arms, having the appearance of bites: small ulcer on right hand: both arms bruised slightly: is clean: has 11 upper and 12 lower teeth as near as I am able to count. Behavior quiet, but rather cross when spoken to. Talks to herself, but answers questions fairly well.

Summary of 14 day record dictated by Dr O. C. Heyerdale

Patient admitted, August 27-1902 bathed and put to bed, had bruises and scars on limbs and body and had small sore on right hand T. P. and R about normal on regular diet, bowels regular, sleepless given hypnotics and occasional cathartic. patient very restless out of bed a great deal and disturbed mentally. During second week T. R. and P normal regular diet occasionally given hypnotics for sleep takes out of door exercise assists some with the work, at times inclined to be rather noisy.

Nov. 30th. Patient neat and clean in habits: assists with the ward work. Is rather melancholy: converses quite intelligently: is quite agreeable. Had several hysterical spells during the past two weeks. Sometimes becomes unconscious at the time. Wt 126#

Dec 17th No change. Jan. 30th. Patient is very ambitious: worries constantly. Assists with the ward work and also does fancy work. Is at times very melancholy: Occasionally has her hysterical spells as formerly. Agreeable and pleasant in manner, behavior and speech.

Personal and Medical History of Anna. M. Peterson
(Margaret) –

Whole No. 6179.
Residence, Grand-Meadow. Minn
Date Admission, 26th August 1902 –
Admitted by Dr. R.M. Phelps – hour, 9 45 am
How Sent, S.S. Washburn, Jaff. Mower County –
Sex, Female Age, 66.
Civil Condition, married
Children, – 0 – Age Youngest Child,
Occupation, Housewife: husband, retired farmer.
Degree Education, Yes. to Confirmation –
Profession of Religion, not known, if Churchmember
Habits, not known, if intemperate.
Nativity, Denmark: parents also born there.
Physicians Committing, Homer. J. Piers and CH. Johnson
Family Physician: Dr. W.W. Freeman Grand meadow, Minn
Correspondents, Andrew Pete Peterson. –
(Husband) – Grand meadow
(Lives in town. Telephone & Telegraph in the town) – Minn

No. for Year, 15.
Insane Relatives, not known
Cause Exciting, not known.
Cause Predisposing, prob. age & prev. attk
Form, Acute Melancholia
Accompanying Bodily Disorder, none so far as known
Suicidal or not, not; but has struck sister.
Date of this Attack, 3 or 4 Days ago
Duration, " " —
No. of Attack, 2nd (one, 4 years ago) –
No. of Admission, 1st.
Age First Attack, – about 62 –
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale *Date of* Aug 28/1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
– Sluggish –
MEMORY, Past Events, rather poor
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
– Dull –
REASONING POWER, Ordinary Subjects, poor
Special Subjects, poor –
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
– Depressed –
DELUSIONS, Systematized, — Transitory, —
Special Subjects, Religious Delusions –
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, 3 or 4 Days
ONSET, Gradual or Sudden, Probably gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
—
Father, Dead –
Paternal Relatives, —
Mother, Dead –
Maternal Relatives, —
Brothers and Sisters, 2 brothers: 2 sisters
Children – none
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
– no –
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework.
Detail Date, Duration, and Character of Previous Attack, if any,
4 Years ago: Short Duration.
Sleep, — Appetite, — Bowels, –

Personal and Medical History of Anna. M. Peterson

6179
48/65

M Mrs Anna. M. Peterson (Insane)
Copy of Order for Hearing Petition of Andrew. P. Peterson
for appointment of
a guardian for
Estate of Mrs Anna M. Peterson, insane; served and
service admitted by Dr. K –
(Papers filed with commitment papers.)
Hearing at Probate Court, Austin, Minn on Oct 27/02

RACTERISTICS.
USUAL WEIGHT, — NUTRITION, poor
Condition of Skin, normal
k grayish Coating –
onse to Light, Fair Accommodation, fair
rmal
Good Grasp, other tests good –
TREMORS, Hands, fine Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none –
ARTERIES,
– Sclerotic –
LUNGS,
Chest Symmetry: Yes
Expansion: Good
Breath Sounds: normal
Passed Aug 26/02 Ed Aug 26th

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. 1022 Reaction, acid Color and Appearance, Yellow Cloudy
Albumen, Heat 0 – nitric acid 0 – Tanret 0 – Sugar, Fehling's Sol. 0 – Bismuth 0. —
Casts and Crystals, Several uric acid Crystals: amor urates – Epithelium Several cells –

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact; quite rigid: uterus retro flexed: adherent. –
MENSTRUATION,
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 admitted in fair physical Condition, is dull, stupid and resistive: will not answer questions well: is delusional & obstinate.

Personal and Medical History of Am

Whole No. 6179.
Residence, Grand-Meadow, Minn
Date Admission, 26th August 1902 -
Admitted by Dr. R.M. Phelps - hour, 9.45 am
How Sent, S.S. Washburn, Jaff. Mower County -
Sex, Female Age, 66.
Civil Condition, Married
Children, - 0 - Age Youngest Child,
Occupation, Housewife: husband, retired farmer.
Degree Education, Yes. to Confirmation -
Profession of Religion, Not known, if Churchmember
Habits, not known, if intemperate.
Nativity, Denmark: parents also born there.
Physicians Committing, Homer. J. Pierson and C.H. Johnson
Family Physic: Dr. W.W. Freeman Grand meadow, Minn
Correspondents, Andrew Pete Peterson. -
(Husband) - Grand meadow
(Lives in town. Telephone & Telegraph in the town) - Minn

Ca
Cause Predis
Form, Acute .
Accompanying Bodily Disorder, n
Suicidal or not, not; but has stru
Date of this Attack, 3 or 4 Days ago
Duration, " " —
No. of Attack, 2nd (one, 4 years ago) -
No. of Admission, 1st "
Age First Attack, - about 62 -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale *Date of* Aug 28/1902

MENTAL CHARACTERISTICS.

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

HISTORICAL.

LENGTH INVASION, 3 or 4 Days
ONSET, Gradual or Sudden, probably gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
—
Father, Dead -
Paternal Relatives, —
Mother, Dead -
Maternal Relatives, —
Brothers and Sisters, 2 brothers: 2 sisters.
Children - none
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
- no -
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework.
Detail Date, Duration, and Character of Previous Attack, if any,
4 Years ago: Short Duration.
Sleep, — Appetite, — Bowels, -

Personal and Medical History of Anna. M. Peterson

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, 128½ lb USUAL WEIGHT, — NUTRITION, poor
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: thick grayish coating -
PUPILS, Equality, Yes Size, normal Response to Light, Fair Accommodation, fair
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good Legs, Good ~~Grasp,~~ other tests good -
TREMORS, Hands, fine Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none -
ARTERIES,
- Sclerotic -
LUNGS,
Chest Symmetry: Yes
Expansion: good
Breath Sounds: normal
Passed Aug 26/02 Exd Aug 26th

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. 1022 Reaction, acid Yellow Color and Appearance, Cloudy
Albumen, Heat 0 - nitric acid 0 - Tanret 0 Sugar, Fehling's Sol. 0 - Bismuth 0. —
Casts and Crystals, Several uric acid crystals: amor. urates - Epithelium several cells -

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact; quite rigid: uterus retro flexed: adherent. -
MENSTRUATION,
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 admitted in fair physical condition, is dull, stupid and resistive: will not answer questions well: is delusional & obstinate.

Personal and Medical History of Anna M. Peterson

1902

This patient was brought here by F. H. Townsend, attended by Mary Callan, in fair physical condition, with following history of case. As to any consanguinity or heredity, not known: this is not 1st attack: one occurred 4 years ago: duration, a short time: was not sent to hospital: first symptoms of this attack manifested 3 or 4 days ago: In what way, is not stated: disease seems stationary. Derangement now shown in that she wants to get away from home, and wander about, when not restrained. Has struck sister; is not suicidal: no filthy nor destructive habits. As to previous peculiarities, not any, as far as known: as to intemperance, not known. Not subject to any severe disease &c, so far as known: Restraint has been employed: careful watching for 3 or 4 days: Cause of disease not known: treatment has been sedatives, hypodermically. On personal examination, talks in a rambling manner: Says "Wants to get away from husband, who thinks more of another woman". Commitment recommended because she wanders about + is exposed to want of food, or shelter or to accident.

Aug 26 On admission, was put on 7 W. (G. H. N. Rpt: Complexion fair: hair brown: eyes blue: condition of skin normal: no marks or scars noted: several small bruises on arms: no vermin, but is dirty: has 8 lower + 4 upper teeth. Behavior quiet: answers questions intelligently).

Summary of 14 day record dictated by Dr O. C. Hyrdale

Admitted August 26-1902 bathed and put to bed. several small bruises on both arms. During first week T. R and P slightly above normal. took regular diet bowels regular sleeps well. During week patient rather restless slightly noisy at times very stubborn + resisting at times refused to eat. During second week T. P and R. slightly above normal, took regular diet bowels regular mental condition about the same very resistive and stubborn appetite poor. has halucinations of sight and hearing. Visited by daughter on 8th of September No change. Patient up and about the ward. assists with the work. Has religious delusions. Oct 27th Visited by friends. Wt. 123#. Jan. 8th Visited by a friend. No change. Sits quietly about the ward most of the time. Has delusions of persecution and hallucinations of sight

Personal and Medical History of Annie Melander

Examination Augt 1/02 – Redated Aug 26 – 1902.

Whole No. 6180.

Residence, Washington County

Became resident of Minnesota about 1875: of County " "

Date Admission, 28th August 1902 –

Admitted by Dr. R. M. Phelps hour, 7.00 P.m

How Sent, Frank. T. Wilson, Jeff. Washington Co.

Sex, Female Age, 50 –

Civil Condition, married –

Children, one Age Youngest Child, 25 –

Occupation, Housewife: husband, a farmer.

Degree Education, Can read & write Swede.

Profession of Religion, Yes: Lutheran

Habits, not Intemperate

Nativity, Sweden: parents also born there –

Physicians Committing, J. C. Clark and E. Sydney Boleyn

Correspondents (Husband) Mr Melander

on a farm, about 9 miles out Afton, Minn – no telephone –

No. for Year, 16.

Insane Relatives, – none –

Cause Exciting, Dates from unsatisfactory marriage of son.

Cause Predisposing, "chronic"

Form, Chr. melancholia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, – not –

Date of this Attack, 2 Years ago

Duration, 2 Years probably –

No. of Attack, 1st – –

No. of Admission, 1st (at City hospital 3 weeks) –

Age First Attack, – about 48 –

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Augt 30/1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

– Sluggish –

MEMORY, Past Events, will not talk

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, ✓

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, 2 Years

ONSET, Gradual or Sudden, —

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

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

No history

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

—

HABITS, Drinking and Smoking, —

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Housework

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

—

Sleep, — Appetite, — Bowels, —

Personal and Medical History of Annie Melander

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, poor

WOUNDS, Abnormalities, has cancer of left breast Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, —

PUPILS, Equality, — Size, — Response to Light, — Accommodation, —

SIGHT, fair

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, has only one eye; other is right one, is out –

HEARING, Good

COORDINATION, Arms, — Legs, — Grasp, —

TREMORS, Hands, — Tongue, — Facial Muscles, — General, —

PATELLAR REFLEX, — Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular, rapid

Strength, Sounds, Strong

Size, normal

Apex Beat, normal

Murmurs, normal

ARTERIES,

Sclerotic

LUNGS,

Chest symmetry: Yes

Expansion: Good

Breath Sound: normal

Passed Sept 17/02: Ex'd Sept 17th

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, ℥ XV. iij Sp. g. 1018 Reaction, acid Color and Appearance, light yellow Cloudy & heavy white flaky dep.

Albumen, Heat + a good test: nitric acid # a large amount; Sauret's # a large amount Sugar, Fehling's Sol: o – Bismuth o –

Casts and Crystals, Urates, amor + ammonium: Pus, a large amount: Epithelium, Vesical cells; oxalate lime: Several crystals –

GYNECOLOGICAL EXAMINATION, Urethral Caruncle: perinaeum lacerated: rectocele: uterus retroflexed & adherent: cervicitis; endometritis: Leucorrhoea. –

MENSTRUATION,

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 admitted in an emaciated, run-down Condition, physically – She is a case of Chronic Melancholia: is very resistive: will not Converse. Is very much afraid & acts fearful of being harmed. –

1902 Personal and Medical History of Annie Melander

This patient was brought here by Dr Kalinoff, attended by Miss Rothford, in fair physical condition, with following history of case. No history of Consanguinity nor heredity: this is 1st attack: first symptoms manifested 2 years ago: (in what way, not stated): nothing mentioned as to status of disease, if there are rational intervals or if disease is variable: On what subject, or in what way, derangement is now manifested is not stated. Is not disposed to injure others, nor suicidal: no filthy nor destructive habits: no previous peculiarities manifested: no history of intemperance; had brain-fever, as a child: has not been restrained or confined. Cause of disease dates from unsatisfactory marriage of son. Has been under observation at City Hospital, 3 weeks. On personal examination, condition of melancholia.

Aug 28 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair brown, part gray:- eyes blue: condition of skin normal: bruises on both arms + hands. Is clean: left eye defected: Teeth, upper none: lower eight + one root: very resistive + somewhat noisy: talks very little)

Summary of 14 day record dictated by Dr O.C. Heyerdale.

Patient admitted August 8th 1902 bathed and put to bed blind in left eye, patient very resistive, during first week T. P and R. about normal, took regular diet occasional hypnotics for sleep bowels regular patient melancholy very resistive seemed to fear violence, fed by tube part of the time. Second week T. P and R about normal, appetite rather poor, bowels regular continues very resistive restless and out of bed considerable. Has cancer on right breast.

Feb. 1st 1903 Patient has been invariably quiet, never converses or answers questions although she seems to comprehend everything. Is stubborn and resistive to all efforts made in caring for her, is particularly opposed to being bathed.

She has not been acutely ill since admission, bowels are regular, sleeps well, takes exercise and assists with the work in the dining room at times, Is neat and clean in appearance and habits.

See Files.

Personal and Medical History of

Personal and Medical History of Elizabeth Parsons

Whole No. 6183.
Residence, Town of Chester, Wabasha Co.
Became resident of Minnesota, at Birth. May 10-1884. of County, Spring of 1891.
Date Admission, 29th August 1902 -
Admitted by Dr. L. A. Linton hour, 7⁰⁰ P.M.
How Sent, J. H. Mullen, Court Commr. Wabasha Co.
Sex, Female Age, 18.
Civil Condition, Single
Children, - Age Youngest Child, -
Occupation, Housework, Guardians occupation Farmer
Degree Education, Common School -
Profession of Religion, Yes: Lutheran
Habits, Do not know
Nativity, Fergus Falls, Minn: Parents born in Sweden
Physicians Committing, Wm A. Deters and E. H. Bagley
Correspondents, None given in papers

No. for Year, 19.
Insane Relatives, Do not know.
Cause Exciting, Religious Study
Cause Predisposing, not stated -
Form, Pubescent Insanity.
Accompanying Bodily Disorder, Some neurosis - feeble
Suicidal or not, - not -
Date of this Attack, Two months ago
Duration, " " -
No. of Attack, 1st -
No. of Admission, 1st -
Age First Attack, - about 18 -
Time of Leaving,
Time in Hospital,
Result,

Proof of residence &c made by Louis Gray.

Examination on Admission by Dr. O. C. Heyerdale - *Date of* Sept 3/1902.

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,
Dull: illusive -
REASONING POWER, Ordinary Subjects, poor
Special Subjects, - "
Own Mental State, -
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
- Exalted -
DELUSIONS, Systematized, - Transitory, -
Special Subjects, -
HALLUCINATIONS, -
ILLUSIONS, -
SUMMARY,

Birthday May 10. HISTORICAL.
LENGTH INVASION, 2 months
ONSET, Gradual or Sudden, -
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living: well
Paternal Relatives, -
Mother, Dead
Maternal Relatives, -
Brothers and Sisters, -
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, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
-
Sleep, - Appetite, - Bowels, -

Personal and Medical History of Elizabeth Parsons

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 in PRESENT WEIGHT, Not taken USUAL WEIGHT, - NUTRITION, fair
WOUNDS, Abnormalities, None Condition of Skin, Clear: normal
TONGUE, Coatings, Promptness of Movement, Coated, whitish: prompt
PUPILS, Equality, yes Size, large Response to Light, good Accommodation, good -
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, Good Legs, Good Grasp, other tests good -
TREMORS, Hands, fine Tongue, fine Facial Muscles, - General, -
PATELLAR REFLEX, present Other Reflexes, Elbow wrist -
ARTICULATION, Slurred, - Hesitating, - Slow, -
FACIAL EXPRESSION,
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
-
LUNGS,
Chest symmetry: Yes
Expansion: good
Breath Sounds: normal
Passed Sept 1/02: & Sept 17th

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, ℥xxv ij Sp. g. 1021 Reaction, acid Yellow Color and Appearance, Clear & heavy flaky dep. -
Albumen, heat - nitric acid - Tanret - Sugar, Fehling's Sol 0 - Bismuth 0 -
Casts and Crystals, a few uric acid crystals: mucus, several bands: pus. a few corp - Epithelium, several cells.
GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact: uterus ante-flexed, but free: slight leucorrhoeal discharge.
MENSTRUATION,
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 admitted in fair physical condition: fairly well - nourished: will converse, but is confused: Is quite talkative & talks to herself, a great deal: Is somewhat elated & exalted. -

Personal and Medical History of Elizabeth Parsons

1902

This patient was brought here by A. G. Schmidt, attended by Jean Corry, in fair
physical condition, with following history of case. Do not know as to consanguinity or
heredity. This is 1st attack. First symptoms manifested two months ago. (in what way
is not stated): Disease seems increasing: variable & with rational intervals. Derangement
now shown in that she abstains from food: Sleepless: talks very incoherently.
Destroys clothing: very religious: Is not disposed to injure others, nor suicidal: propensity
not active: Her habits are only to destroy clothing. Previously, was very religious.
As to any history of intemperance, do not know. Has not been subject to any severe disease
&c, or head-injury; Has not been restrained or confined. Supposed cause of the disease is
religious study: no treatment: On personal examination: the girl is very feeble
Aug 29 some neurosis. On admission, was put on T.W. (G.H.N. R'pt. Complexion light:
hair light: eyes blue: Condition of skin normal: is clean: Teeth: upper 12 and 1 root:
Lower, 13 and 1 root: Behavior, very quiet: Does not converse).
Summary of 14 day record dictated by Dr O. C. Heyerdale
Patient admitted August 29-1902. during first week
P. R. and P about normal took regular diet bowels regular
patient very melancholy slept well during fourteen days
appetite poor fed by tube. dressed and up on ward on the
eighth day, takes out of door exercise
Has delusions on religious subjects. Is very melancholy.
Very incoherent. pale and seems run down physically.
Rather resistive and fretful. Oct. 3rd. Visited by friends.
Nov. 11-19th Refused nourishment and was fed by tube. Nov. 22nd. assisted
some with the ward work. Otherwise the same.
Nov. 24th 25th Visited by friends. Nov. 28th Wt 103 ½ #. Very resistive: refuses
medicine. Does not converse much. Will answer questions
occasionally. Jan 31st No change. Listless and melancholy.

Personal and Medical History of Ellen Fitzpatrick

Whole No. 6186.
Residence, Saint Paul, Minn.
Became resident of State 2 yrs ago: of County, 2 yrs ago.
Date Admission, 3rd September 1902.
Admitted by Dr. O.C. Heyerdale hour, 7.00 P.M.
How Sent, Henry Gallick, Ct Commr. Ramsey Co.
Sex, Female Age, 23 -
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Domestic: father, a farmer.
Degree Education, Yes: Common school -
Profession of Religion, Yes: Catholic.
Habits, not intemperate.
Nativity, Minnesota: Father's Ireland: Mother's, La.
Physicians Committing, John B. Darling and Arthur Sweeney
Correspondents, Mrs Anna McKey
258 Rondo St.
St Paul - Minn

No. for Year, 22.
Insane Relatives, none
Cause Exciting, Unknown
Cause Predisposing, not stated -
Form, Acute melancholia -
Accompanying Bodily Disorder, weakness -
Suicidal or not, — not -
Date of this Attack, 3 months ago
Duration, " " probably
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, 22 past
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale — *Date of* Sep 4 - 1902.

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,
Correct: Dull
REASONING POWER, Ordinary Subjects, fair
Special Subjects, —
Own Mental State, appreciates her condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, — Transitory, —
~~Special Subjects,~~ Has religious delusions: "thinks she has not done right by the Church."
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,

Born Aug 13 - 1877. HISTORICAL.
LENGTH INVASION, Two months
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
had a cousin, who was temporarily insane:
Father, Living: well
Paternal Relatives, —
Mother, Living — well,
Maternal Relatives, —
Brothers and Sisters, 5 living: 3 dead 7 sisters living - 2 Dead.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations). Children — Single
— no —
HABITS, Drinking and Smoking, good
HEADACHES, VERTIGO, OR CONVULSIONS, no -
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, fair Appetite, fair Bowels, Constipated

Personal and Medical History of Ellen Fitzpatrick

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7½ in PRESENT WEIGHT, Not taken USUAL WEIGHT, — NUTRITION, poor
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, thick gray coating: prompt -
PUPILS, Equality, Yes Size, large Response to Light, good Accommodation, good
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good Legs, good ~~Grasp,~~ other tests good
TREMORS, Hands, fine tremor Tongue, fine Facial Muscles, — General, —
PATELLAR REFLEX, Diminished Other Reflexes, Elbow: wrist
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, fairly strong
Size, normal
Apex Beat, normal
Murmurs, None -
ARTERIES, —
LUNGS,
Chest symmetry: Yes
Expansion: good
Breath sounds: normal: has some dullness in right apex:

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,

Passed Sep 13/02 Ex'd. Sept 13th
EXAMINATION URINE, Quantity, ℥ XXXVI Sp. g. 1031 Reaction, acid light yellow Color and Appearance, cloudy & flaky dep.
Albumen, Heat 0: nitric acid 0: Tanret's 0 - Sugar, Fehling's Sol 0: Bismuth 0 -
Casts and Crystals, Urates amor: blood, a few corp: all kinds of Epithelium —

GYNECOLOGICAL EXAMINATION, external genitals normal: hymen intact: uterus retro-flexed and adherent. —
MENSTRUATION,
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 admitted poorly nourished: refuses her food: her physical condition seems good: She is dull, listless & apathetic: but will answer questions intelligently, but very slowly: appreciates her condition & admits it was brought on by overmuch religious study. She is depressed & has the delusion that she has not done right by the Church & c.

1907 Personal and Medical History of Ellen Fitzpatrick

This patient was brought here by Dep. Emanuel Johnson, attended by sister Mrs Anna McKey, in poor physical condition, with following history of case. There is no history of consanguinity or heredity: this is 1st attack: first symptoms manifested three months ago: began to be excited on religion: disease seems increasing: variable & with rational intervals: but these are not regular. Derangement now shown in that she has religious delusions & will not eat or talk. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. No previous peculiarities noted: no history of intemperance: had rheumatism six months ago: has not been restrained or confined: Cause of disease, unknown. Treatment, nutritives and tonics. On personal examination, patient does not talk: apathetic: stands in one position for hours: and is melancholic.

Sep 3 On admission, was put on 7.W. (G.H. N. Spt. complexion fair: hair brown: eyes blue: condition of skin, somewhat rough: several small picked sores on chin & chest. Is clean: feet somewhat swollen: Teeth: lower 14: upper, 12: Behavior very quiet) —

14 Day Record dictated by Dr. Heyerdale. During the fourteen days. Pulse and respiration and temperature about normal. Appetite fairly good. Regular diet. Bowels moved daily. Slept well at night. Is rather resistive at times. Refused to eat. Fed by tube. Very melancholy and talks but little. Nov. 3rd Patient is much improved. Assists with ward work. Takes out door exercise: attends amusements. Bowels usually constipated. Does not menstruate. Nov 13th Visited by sister. Nov 14th Went Home.

Personal and Medical History of

Personal and Medical History of Rosina Ehrenfeld
(herebefore as Rosie Arenfelt.) –

Whole No. 6189.
Residence, South St Paul, Minn

Date Admission, 8th September 1902.
Admitted by Dr O. C. Heyerdale hour, 7.30 P.M.
How Sent, Thos. P. Moan, Jaf.P. Dakota County
Sex, Female Age, 60 years.
Civil Condition, single
Children, – Age Youngest Child, –
Occupation, Housewife
Degree Education, Common School
Profession of Religion, Yes: methodist
Habits, – Do not know –
Nativity, Germany: parents also born there.
Physicians Committing, A. M. Adsit and H. Van Beeck
Correspondents, Charles Ehrenfeld
(address of brother) Oelwein, Iowa

No. for Year, 25.
Insane Relatives, Do not know
Cause Exciting, Do not know
Cause Predisposing, previous attack.
Form, Chr – mania
Accompanying Bodily Disorder, high pulse (110°)
Suicidal or not, – not. –
Date of this Attack, a few weeks after return from Rochester
Duration, over 7 years –
No. of Attack, 2nd
No. of Admission, 2nd (here 1892–95) –
Age First Attack, ?
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Sep 13–1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quick: Confused
MEMORY, Past Events, fair
Recent Events, fair Special Subjects, –
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
alert: Illusive –
REASONING POWER, Ordinary Subjects, –
Special Subjects, –
Own Mental State, –
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
–

DELUSIONS, Systematized, – Transitory, –
Special Subjects, –
Has some religious Delusions
HALLUCINATIONS, –
ILLUSIONS, –
SUMMARY, –

HISTORICAL.

LENGTH INVASION, since 1892
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, 1 brother: 4 sisters –
Children – none –
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
–

HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, occasionally – –
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
–
Sleep, good Appetite, good Bowels, regular

Personal and Medical History of Rosina Ehrenfeld

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 2in PRESENT WEIGHT, 111 lbs USUAL WEIGHT, – NUTRITION, fair physical
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: some coating
PUPILS, Equality, Yes Size, normal Response to Light, Good Accommodation, Good
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good Legs, good Grasp, other tests, good –
TREMORS, Hands, fine Tongue, fine Facial Muscles, – General, –
PATELLAR REFLEX, exaggerated Other Reflexes, wrist: Elbow.
ARTICULATION, Slurred, – Hesitating, – Slow, –
FACIAL EXPRESSION,
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: Yes –
Expansion: good –
Breath sounds: normal.
Passed Sept 17/02 – Ex. Sept 17th

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. 1023 Reaction, acid Color and Appearance, Yellow Clear: slight flaky dep –
Albumen, Heat 0 : nitric acid 0 : Tanret's 0 Sugar, Fehling's sol 0 : Bismuth 0 –
Casts and Crystals, a few uric acid crystals: Epithelium, a few cells.

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact and rigid: Uterus normal: somewhat atrophied. –
MENSTRUATION,
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 admitted in fairly good physical condition & health & fairly well nourished – She answers questions readily, but is somewhat delusional. Has some delusions of a religious character –

Personal and Medical History of Rosina Ehrenfeld

1902.

This patient was brought here by Sheriff J. J. Grisim, attended by Lena Heinen, in fair physical condition, with following history of case: Do not know as to any consanguinity, heredity, previous peculiarities, intemperance in self or her parents: This is not 1st attack: one occurred in 1892: duration 3 years. was then sent to this⊗ Rochester Hospital; result of treatment good. First symptoms of this attack manifested a few weeks after her return from Rochester. Disease seems stationary: variable & with rational intervals; but if these occur regularly, do not know: Derangement now shown in that she refuses to answer questions, but gives reason for so doing. Is not disposed to injure others, nor suicidal, nor of filthy or destructive habits. Has not been subject to any severe disease &c, no head injury. Has not been restrained or confined. Do not know cause of the disease: No treatment: would not consult a physician: On personal examination, Pulse 110°: Excitable: Easily becomes angry: is apparently depressed. Commitment recommended, because she is unable to support herself, on account of her demented condition & general neglect of herself & needs care & treatment, while in her present condition.—

⊗ Note: 2nd admission: here before as "Rosie Arenfelt", from July 2-1892 to Apl 15-1895 and discharged May 1-1895, as recovered. History on this commitment, was very meagre: nothing was known as to family history; cause of illness, date & duration of attack were unknown: Form then diagnosed as "Chronic mania". (Vol 19 P365 No 3065)

Sept 8 On admission, was put on T.W. (G.H.N. R'pt: Complexion dark: hair brown, part gray: eyes gray: Condition of skin normal: no marks, eruptions or bruises are noted: several small scratches on body: is clean: no teeth, except an upper & a lower plate: Behavior quiet: talks intelligently).

to

Feb. 1st 1903

At first patient was quiet, did not voluntarily converse but would answer questions, expressing many delusions of a religious nature but soon became very noisy at times, scolding in a loud voice, gesticulating and sometimes moved to violence.

Physically patient has been quite well, eats and sleeps well. takes exercise but does no work and attends no amusements. Habits neat and cleanly.

Dec 1st weight 115 1/4 lbs.

See Files.

Personal and Medical History of Catherine Staples

Whole No. 6192.
Residence, Stillwater, Minn.
Became resident of Minnesota about 30 yrs ago: of Co: Do
Date Admission, 11th September 1902.
Admitted by Dr R. M. Phelps hour, 7.00 P.M.
How Sent, Frank T. Wilson, J of P. Washington Co.
Sex, Female Age, 56.
Civil Condition, Married
Children, one Age Youngest Child, about 38.
Occupation, Housewife: husband's, blacksmith.
Degree Education, Yes: can read & write.
Profession of Religion, Yes: Catholic.
Habits, Unknown, as to intemperance.
Nativity, Ireland: parents also born there.
Physicians Committing, B. J. Merrill and J. G. Landeen.
Correspondents, Mr Edward Staples (husband)
(Teleph - or Tel) Stillwater Cor. 6th Ave & Burlington

No. for Year, 28.
Insane Relatives, - Unknown -
Cause Exciting, Worry over sickness & prospective poverty
Cause Predisposing, not stated
Form, acute melancholia
Accompanying Bodily Disorder, none mentioned.
Suicidal or not, Threatened & propensity active.
Date of this Attack, about 3 or 4 months ago.
Duration, " " —
No. of Attack, 1st —
No. of Admission, 1st —(was in Co. Hospl.).
Age First Attack, - about 56 -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton — *Date of* Sept 13/02

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: seems correct
REASONING POWER, Ordinary Subjects, —
Special Subjects, —
Own Mental State, appreciates
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, — Transitory, —
~~Special Subjects,~~ Delusions of injury to brain through medicine, taken at Hospital, at Stillwater: Delusions of poisoning
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
—
Father, Dead: unknown cause.
Paternal Relatives, —
Mother, Dead: unknown cause.
Maternal Relatives, Cousin died of tuberculosis.
Brothers and Sisters, one brother dead: one sister living -
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
nothing.
HABITS, Drinking and Smoking, habits good.
HEADACHES, VERTIGO, OR CONVULSIONS, -
no no no
OCCUPATION, Healthy or not, —
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, poor Appetite, poor Bowels, Constipated.

Personal and Medical History of Catherine Staples

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5½ in PRESENT WEIGHT, 120½ lbs USUAL WEIGHT, — NUTRITION, Fair
WOUNDS, Abnormalities, Has varicose veins of right leg: scar of a varicose ulcer on right ankle. Condition of Skin, normal.
TONGUE, Coatings, Promptness of Movement, Thick dark coating: prompt —
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, wears glasses
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good -
COORDINATION, Arms, good Legs, good ~~Grasp,~~ {finger to nose, eyes shut, good: standing on one foot, ~~poor~~: turning quickly fair: standing, eyes shut, good.
TREMORS, Hands, slightly tremulous Tongue, slight Facial Muscles, none General, none
PATELLAR REFLEX, absent Other Reflexes, wrist
ARTICULATION, Slurred, — Hesitating, — Slow, normal
FACIAL EXPRESSION,
HEART, Regularity, regular
Strength, Sounds, fairly strong
Size, normal
Apex Beat, "
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest Symmetry: barrel shaped
Expansion: poor
Breath Sounds: hyperresonant.
Passed Sept 13/02 & Sep 13th

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. 1022 Reaction, Acid: Color and Appearance, Reddish Yellow Clear —
Albumen, Heat 0: nitric acid 0: Tanret's 0 - Sugar, Fehling's Sol 0: Bismuth 0 -
Casts and Crystals, several uric acid crystals: urates amor: Epithelium, a few cells: oxalate lime: a few crystals -.
GYNECOLOGICAL EXAMINATION, Perineum slightly lacerated: external haemorrhoids: uterus retroflexed: free: fundus enlarged: endometritis: cervicitis: leucorrhoea.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps poorly -
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 somewhat depressed: "thinks her brain was injured by hypodermics, while in hospital at Stillwater". She imagines she receives a hypodermic, every time her temperature is taken. "Wishes she were dead". Complains of feeling of nausea, (due probably to constipation) - She converses intelligently & apparently has a reliable memory. -

Personal and Medical History of Catherine Staples

1902

This patient was brought here by Dr. Kalinoff, attended by Miss Welsh, in fair physical Condition, with following history of Case. Unknown as to Consanguinity, heredity, or intemperance. This is 1st attack: has been in County Hospital: result of treatment: negative. First symptoms of this attack manifested about 3 or 4 months ago: melancholia: dread of loss of property, & becoming a public charge. Disease seems increasing: not variable: no rational intervals. Derangement now shown by fear of execution on scaffold: poison in food. Is not disposed to injure others: has threatened suicide & propensity active now. No filthy or destructive habits. Previously, manifested disposition to look on dark side: aggravated by long sickness of husband and self. No history of any severe disease or head-injury. Has not been restrained or confined. Supposed Cause of the disease is worry over sickness & prospective poverty: Treatment, nerve sedatives & tonics. On personal examination, there is confirmation of above statements.-

Sep 11 On admission, was put on T.W. (G.H. N.Rpt: Complexion dark: hair dark brown: eyes gray: condition of skin, normal: no marks, scars bruises &c noted: is clean: patient has 5 lower and 7 upper teeth, and several roots: behavior quiet: talks intelligently.)-

Summary of 14 day record Dict by Dr. L.A. Linton

Received on ward September 11th had few small bruises on body scar on inner ankle of right foot quite delusional, delusions of persecutions and poisoning of food much depressed restive about taking medicine, appetite fair, converses quite freely and intelligently aside from delusions at times, complains of pains in stomach stomach dilated and prolapsed mass noted of black and probably cancerous growth, has consented to operative measures, requires hypnotics and occasional cathartics put on bromide and tonic treatment with regular diet maximum tem 100^{8} Pulse 105 Resp 24

Oct 1st Patient up on the ward quiet and agreeable assisted some with the ward work appetite fair bowels regular takes out of door exercise is quite melancholy and expresses some delusions although converses readily and intelligently on most subjects tidy and neat in appearance. Oct 9th more disturbed despondent threatens suicide: Oct 17th appetite poor complains of pain in the stomach often troubles with emesis after eating, has lavage of the stomach given occasionally Nov 4th & 5th visited by friends Nov 27th sick in bed complained of pain in stomach. weight 98 pounds examination of the stomach revealed enlargement and general ptosed condition with hardened mass doubtless malignant. Operation advised by Dr W.J. Mayo patient refused. Dec 2nd visited by friend and was taken home

Personal and Medical History of

Personal and Medical History of Mary Leske

Whole No. 6196.
Residence, St. Paul, Minn.
Resident of State 22 years: of County Ramsey
Date Admission, 17th September 1902.
Admitted by Dr. O. C. Heyerdale hour, 7 P.M.
How Sent, E. W. Bazille, Jdg. P. Ramsey County
Sex, Female Age, 43 yrs.
Civil Condition, Married —
Children, 8 Age Youngest Child, 4 years
Occupation, Housewife: Husband a Workman
Degree Education, Common school
Profession of Religion, Yes: Catholic Church
Habits, not intemperate
Nativity, Poland: Parents also born there.
Physicians Committing, E. A. Borchardt and C. A. Haas.
Correspondents, (Husband) Stanislaus Leska
860 Jenks Street
St Paul

No. for Year, 32.
Insane Relatives, none
Cause Exciting, unknown
Cause Predisposing, not stated
Form, ac. melancholia
Accompanying Bodily Disorder, (some weakness) -
Suicidal or not, — not -
Date of this Attack, 3 months ago
Duration, " " —
No. of Attack, 1st. —
No. of Admission, 1st.
Age First Attack, 42 past.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Sept 20 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish
MEMORY, Past Events, —
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, —
Has religious Delusions
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,
Dr. Haas. Birth-day Nov 8.
44 years -

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
—
Father, Dead
Paternal Relatives, —
Mother, Living
Maternal Relatives, —
Brothers and Sisters, 2 Brothers 3 Sis
9 children
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 Mary Leske

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 in PRESENT WEIGHT, 107# USUAL WEIGHT, — NUTRITION, fair physical.
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Prompt: whitish Coating —
PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, none
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, Good Legs, Good Grasp, other tests good.
TREMORS, Hands, fine Tongue, fine Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, Elbow: wrist.
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none -
ARTERIES,
Slight Sclerosis
LUNGS,
Chest Symmetry: Yes
Expansion: good
Breath Sounds: normal
Passed Sept 19/02: Ex. Sep 19th

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, ℥XIV Sp. g. 1029 Reaction, acid Color and Appearance, Yellow Clear + slight flaky dep.
Albumen, Heat 0: Nitric acid 0: Tanret 0. Sugar, Fehling's Sol 0: Bismuth 0 —
Casts and Crystals, several uric acid crystals: Urates amor. Epithelium, a few cells.

GYNECOLOGICAL EXAMINATION, Perinaeum + cervix lacerated: rectocele: uterus retroflexed to right: enlarged + probably fibroid growth in right side fundus: Cervicitis.
MENSTRUATION, — Endometritis: erosion of cervix: Leucorrhoea. —
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 in good physical health: fairly well nourished: She is Melancholy: has religious delusions: will not converse + will answer only an occasional question. Refuses nourishment. Lies quietly in bed, with eyes closed - mutters to herself —

Personal and Medical History of Mary Leske

1902

This patient was brought here by Dep Henry Lang, attended by Tillie Leska. in fair physical condition, with following history of case. No history of consanguinity or heredity. This is 1st attack: first symptoms manifested 3 months ago. Melancholia increasing: rational intervals: Disease seems increasing: variable rational intervals not regular. Derangement now shown on subject of religion.-. Is not disposed to injure others, nor suicidal: not of filthy or destructive habits. No previous peculiarities manifested: no history of intemperance, nor of any severe disease &c, nor head injury: has not been restrained or confined. Cause of disease, unknown: treatment, none. On personal examination, nothing seems to have been learned.

Sep 17 On admission, was put on 1 W. (G.A.N. 2 pt. Complexion dark: hair, brown, part gray: Eyes brown: Condition of skin normal: no marks, scars, bruises &c noted: is clean: Patient has 1 upper tooth + 9 lower + a few roots: Behavior quiet: would not converse.)-

Summary of 14 day record dict by Dr O. C. Heyerdale

Patient admitted Sept 17th 1902 - bathed and put to bed during first fourteen days T. P and R about normal, took regular diet bowels regular slept quite well, restless and out of bed quite a good deal, very melancholy fed by tube most of the time when she refused nourishment.

Oct. '02 Patient improved very much; eats and sleeps well; bowels regular: takes out door exercise: assists with the ward work. Converses readily. Went home Oct 3rd.

Personal and Medical History of

Personal and Medical History of Harriet Heath

Whole No. 6197.
Residence, St Paul, Minn
Resident of State 28 yrs: of County, 28 yrs:
Date Admission, 17th September 1902
Admitted by Dr. O.C. Heyerdale hour, 7.00 P.M.
How Sent, E.W. Bazille, J of P. Ramsey Co.
Sex, Female Age, 33 Yrs.
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Stenographer: father, broomseller.
Degree Education, High School
Profession of Religion, Yes: Catholic
Habits, not intemperate.
Nativity, Wisconsin: father's, Vermont: Mother's, Scotland
Physicians Committing, J.C. Kinkle and Arthur Sweeney
Correspondents, (Sister) Mrs M. C. McNeil
94 Western ave
Mpls - Minn

No. for Year, 33.
Insane Relatives, Yes: Mother Insane
Cause Exciting, - Unknown -
Cause Predisposing, Heredity.
Form,
Accompanying Bodily Disorder, none mentioned.
Suicidal or not, Suicidal, by gas: propensity active.
Date of this Attack, a year ago
Duration, " " probably
No. of Attack, 1st -
No. of Admission, 1st - (at St Joseph's Hospl. 1 mo) -
Age First Attack, - 32 years.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L.A. Linton *Date of* Sept 22 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear: rather Sluggish in some respects.
MEMORY, Past Events, Fair
Recent Events, Fair Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Rather dull: Correct in some respects -
REASONING POWER, Ordinary Subjects, Seems somewhat — impaired —
Special Subjects, —
Own Mental State, appreciates
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, — Transitory, Could
Special Subjects, not determine from questioning
HALLUCINATIONS, = of hearing"
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
nothing determined, except concerning mother
Father, Living —
Paternal Relatives, —
Mother, Died Insane at Rochester
Maternal Relatives, —
Brothers and Sisters, 3 sisters living: one brother living. 2 Died when infants -
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
nothing
HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, — yes
OCCUPATION, Healthy or not, Stenographer & Typewriter
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, fair Appetite, fair Bowels, Constipated

Personal and Medical History of Harriet Heath

SENT TO ROCHESTER—Harriet Heath, thirty-three years of age, who has been at the detention hospital for a month, was declared insane in the probate court yesterday and committed to the state hospital at Rochester. She believes, it was stated, that some one is trying to kill her with electriety. Mary Leske, a Polish woman, the mother of eight children, was declared insane by Judge Bazille and sent to Rochester. She suffers from religious melancholia.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 123½ lb. USUAL WEIGHT, — NUTRITION, Impaired
none
Condition of Skin, Normal
TONGUE, Coatings, Promptness of Movement, Thickly coated: prompt -
PUPILS, Equality, Equal Size, Normal Response to Light, Yes Accommodation, Yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, Good Legs, Good finger to nose ~~Grasp,~~ eyes shut, good: Standing on one foot fair: Standing, eyes shut, good.
TREMORS, Hands, fine tremor Tongue, fine tremor Facial Muscles, none General, none
PATELLAR REFLEX, Exaggerated Other Reflexes, Elbow, wrist
ARTICULATION, Slurred, — Hesitating, — Slow, Slow
FACIAL EXPRESSION,
Sensibility, —
HEART, Regularity, Irregular
Strength, Sounds, fairly strong
Size, Enlarged
Apex Beat, lowered to left
Murmurs, mitral regurgitation
ARTERIES,
Normal
LUNGS,
Chest Symmetry: Sym
Expansion: poor
Breath Sounds} râles in base of left lung - dull areas in both lungs
Passed Sept 23/02 L.A. Sept 23rd

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. 1028 Reaction, acid :- Yellow Color and Appearance, Cloudy + flaky dep.
Albumen, Heat 0 : nitric acid: 0 : Tanrets 0 Sugar, Fehlings Sol 0 : Bismuth 0
Casts and Crystals, Several uric acid crystals: urates amor: Epithelium, a few cells.

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact: uterus retroflexed adherent: Endometritis, cervicitis, leucorrhoea.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps without hypnotics.
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 quiet: somewhat depressed: reticent: on examination, refused to answer some questions. Acknowledged that she hears voices, but would not admit that she possessed any delusions. Talks to herself, when alone in her room. Often assumes the attitude of prayer.

Personal and Medical History of Harriet Heath

Whole No. 6197.

Residence, St Paul, Minn.

Resident of State 28 yrs: of County, 28 yrs:

Date Admission, 17th September 1902

Admitted by Dr O.C. Heyerdale hour, 7^00 P.M.

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

Sex, Female Age, 33 yrs.

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Stenographer: father, broomseller.

Degree Education, High School

Profession of Religion, Yes: Catholic

Habits, not intemperate.

Nativity, Wisconsin: father's, Vermont: Mother's, Scotland

Physicians Committing, J.C. Kinkle and Arthur Sweeney

Correspondents, (Sister) Mrs M. C. McNeil
94 Western ave
Mpls - Minn

No. for Year, 33

Insane Relatives, Yes: Mother Insane

Cause Exciting, - Unknown -

Cause Predisposing, Heredity.

Form,

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, Suicidal, by gas: propensity active.

Date of this Attack, a year ago

Duration, " " probably

No. of Attack, 1st -

No. of Admission, 1st - (at St Joseph's Hospl. 1 mo) -

Age First Attack, - 32 years.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. L. A. Linton *Date of* Sept 22 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear: rather Sluggish in some respects.

MEMORY, Past Events, Fair

Recent Events, Fair Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Rather dull: Correct in some respects -

REASONING POWER, Ordinary Subjects, Seems somewhat - impaired -

Special Subjects, —

Own Mental State, Appreciates

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed

DELUSIONS, Systematized, — Transitory, Could

Special Subjects, not determine from questioning

HALLUCINATIONS, "of hearing"

ILLUSIONS, —

SUMMARY, —

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, —

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

nothing determined, except concerning mother

Father, Living -

Paternal Relatives, —

Mother, Died Insane at Rochester

Maternal Relatives, —

Brothers and Sisters, 3 sisters living: one brother living. 2 died when infants -

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

— nothing

HABITS, Drinking and Smoking, Good

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Yes Stenographer & Typewriter

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

—

Sleep, Fair Appetite, Fair Bowels, Constipated

plantation of an artificially pr
eased growth to a new place.
"Granting that in better
healthful surroundings the mor
tions will eventually change fo
such emigration is necessarily for
a burden to the community upon
the fugitives may be cast. Self-r
and the knowledge and ability th
volve the power of self-support mu
fro

Personal and Medical History of Harriet Heath

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7½ PRESENT WEIGHT, 123½ lb USUAL WEIGHT, — NUTRITION, Impaired

WOUNDS, Abnormalities, none Condition of Skin, Normal

TONGUE, Coatings, Promptness of Movement, Thickly Coated: prompt -

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

SIGHT, Good

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

HEARING, Good

COORDINATION, Arms, Good Legs, Good finger to nose ~~Grasp,~~ eyes shut, good: Standing on one foot fair: Standing, eyes shut, good.

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

PATELLAR REFLEX, Exaggerated Other Reflexes, Elbow, wrist

ARTICULATION, Slurred, — Hesitating, — Slow, Slow

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, Irregular

Strength, Sounds, fairly strong

Size, Enlarged

Apex Beat, lowered & left

Murmurs, Mitral regurgitation

ARTERIES,

Normal

LUNGS,

Chest Symmetry: Sym

Expansion: Poor

Breath Sounds: rales in base of left lung - dull areas in both lungs

Passed Sept 23/02: L.A. Sept 23

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. 1028 Reaction, acid :- Yellow Color and Appearance, Cloudy + flaky dep.

Albumen, Heat 0 : nitric acid: 0 : Tanret's 0 Sugar, Fehling's Sol 0 : Bismuth 0

Casts and Crystals, Several uric acid crystals: urates amor: Epithelium, a few cells.

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact: uterus retroflexed adherent: Endometritis, cervicitis, leucorrhoea.

MENSTRUATION,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sleeps without hypnotics.

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 quiet: somewhat depressed: reticent: on examination, refused to answer some questions. Acknowledged that she hears voices, but would not admit that she possessed any Delusions. Talks to herself, when alone in her room. Often assumes the attitude of prayer.

Personal and Medical History of Harriet Heath

1902

This patient was brought here by Dep. Emanuel Johnson, attended by Mrs M. C. McNeil, in fair physical condition, with following history of case. No history of Consanguinity; mother Insane: This is 1st attack: first symptoms manifested a year ago: heard voices & thought people were looking at her: disease seems increasing: variable & with rational intervals; but these, not regular: Derangement now shown in that she hears voices: believes people are tormenting her with electricity: is not disposed to injure others: has attempted suicide, by gas: propensity active now: not of filthy or destructive habits: No history of any previous peculiarities, nor intemperance, nor of any severe disease &c, or head injury: Has been confined at St Joseph's Hospital, one month. Cause of disease, unknown. Usual treatment has been given: On personal Examination, patient talks freely of delusions of persecution, of attempts at suicide; believes that she is going to die.

Sep 17 On admission, was put on T.W. (G.H.N. Rpt. Complexion dark: hair brown: Eyes blue: Condition of skin, normal: no marks, scars or bruises noted: a few eruptions on her face: is clean: has 8 upper teeth and 4, on a plate: 15 lower (two gold crowns). Behavior quiet, except at times, when she imagines some one was calling her: has hallucinations "of hearing"). —— · —— · —

Summary of 14 day record Dict by Dr L. A. Linton

Admitted on ward September 17th small bruise noted on left leg patient has menses, tidy in habits, very reticent disinclined to talk, delusional and had hallucinations of sight claiming to see forms in the room passing out of the window, occasionally uneasy appetite poor sometimes refuses to eat requiring mechanical feeding sleeps well without hypnotics, put on regular diet bromide treatment, also tonic, requires occasional cathartics

Maximum temp 100⁶ Pulse 108 Resp 24

Sep 20th Refused nourishment fed by tube and was continued for several days. Patient quiet and generally agreeable, appetite fair bowels easily stopped takes out of door exercise attends chapel and amusements, neat in habits and appearance, converses intelligently aside from delusions. Has hallucinations of sight and hearing Weight 115

Dec 24th Patient visited by father, on the 29th by sister, also on 30th. Patient in fairly good general health: very delusional: has hallucinations of sight and hearing. Converses with imaginery voices a great deal: Is loud in speech and rather annoying to those about her.

Jan. 19th visited by a friend. Does not assist with any work.

See Files.

Personal and Medical History of

Personal and Medical History of Myrtle Luserke

Whole No. 6198.
Residence, St Paul, Minn
Resident of State 6 yrs: of County 6 yrs.
Date Admission, 18th September 1902
Admitted by Dr O. C. Heyerdale hour, 7oo P.M.
How Sent, E. W. Bazille, Jaf. Ramsey County
Sex, Female Age, 26
Civil Condition, married
Children, 3 Age Youngest Child, 8 mos
Occupation, Housewife: husband's occpn, Cook
Degree Education, Common school
Profession of Religion, Catholic —
Habits, not intemperate
Nativity, Iowa: parents also born there:
Physicians Committing, Wm Davis & Arthur Sweeney
Correspondents, (Husband) R Luserke
318 Walnut St
St Paul

No. for Year, 34.
Insane Relatives, none
Cause Exciting, Lactation
Cause Predisposing, not stated
Form, acute melancholia
Accompanying Bodily Disorder, None mentioned:
Suicidal or not, not attempted: but propensity active asks for poisons
Date of this Attack, 2 weeks ago —
Duration, " " —
No. of Attack, 1st —
No. of Admission, 1st — (10 Days at C & C Hospl)
Age First Attack, — 26 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Sept 20 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish
MEMORY, Past Events, —
Recent Events, — Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, —
Special Subjects, —
Own Mental State, appreciates that she is not right, mentally
EMOTIONAL STATE, Normal, Indifferent, Exaltated, Depressed,
Depressed
DELUSIONS, Systematized, " — — Transitory, —
Special Subjects, —
"Thinks she is persecuted by the Devil"
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, Two weeks
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, —
Children 3 —
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 Myrtle Luserke

SENT TO ROCHESTER—Myrtle Luserke, twenty-six years old and the mother of three children, was adjudged insane in the probate court yesterday and sent to Rochester.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, — NUTRITION, good
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated: prompt
PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, good
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Normal
HEARING, — Good
COORDINATION, Arms, good Legs, good — ~~Grasp,~~ other tests, good —
TREMORS, Hands, fine Tongue, fine Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
Normal
LUNGS,
Chest symmetry: normal
Expansion: good
Breath Sounds: normal
Passed Sept 23/02: Exd Sept 23d

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. 1003 Reaction, acid — Color and Appearance, pale yellow Cloudy
Albumen, Heat 0 —: nitric acid 0 —: Taurets 0 — Sugar, Fehlings sol 0 —: Bismuth 0 —
Casts and Crystals, pus, a few corp: Epithelium, several cells —
GYNECOLOGICAL EXAMINATION, Perinaeum & cervix lacerated: uterus slightly anteflexed: pro: cervicitis: endometritis: leucorrhoea.
MENSTRUATION,
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 admitted in good physical health: Is strong & well-developed: She is melancholy & depressed & believes "She is persecuted by the Devil". She refuses to converse & will answer only an occasional question. Her breasts are full of milk & she was nursing a child, prior to admission —
—milk—

Personal and Medical History of Myrtle Luserke

Whole No. 6198.
Residence, St Paul, Minn
Resident of State 6 yrs: of County 6 yrs.
Date Admission, 18th September 1902
Admitted by Dr. O. C. Heyerdale hour, 7oo P.M.
How Sent, E. W. Bazille, Joff. Ramsey County
Sex, Female Age, 26
Civil Condition, married
Children, 3 Age Youngest Child, 8 mos
Occupation, Housewife: husband's occpn, Cook
Degree Education, Common school
Profession of Religion, Catholic –
Habits, not intemperate
Nativity, Iowa: parents also born there:
Physicians Committing, Wm Davis & Arthur Sweeney
Correspondents, (Husband) R Luserke
318 Walnut St
St Paul

No. for Year, 34.
Insane Relatives, none
Cause Exciting, Lactation
Cause Predisposing, not stated
Form, acute melancholia
Accompanying Bodily Disorder, none mentioned!
Suicidal or not, not attempted: but propensity active asks for poisons
Date of this Attack, 2 weeks ago –
Duration, " " –
No. of Attack, 1st –
No. of Admission, 1st – (10 days at C&C Hospl.)
Age First Attack, – 26 –
Time of Leaving,
Time in Hospital,
Result,

Mr. Edgar says that after he
editorially with the subject of th
dock bill Speaker Henderson
upon to repeat that he had a
proved of the dock bill. He e
had done his utmost to

Examination on Admission by Dr. O. C. Heyerdale *Date of* Sept 20 – 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish
MEMORY, Past Events, –
Recent Events, – Special Subjects, –
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, –
Special Subjects, –
Own Mental State, appreciates that she is not right, mentally
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, " – – Transitory, –
Special Subjects, –
"Thinks she is persecuted by the Devil"
HALLUCINATIONS, –
ILLUSIONS, –
SUMMARY,

HISTORICAL.
LENGTH INVASION, Two weeks
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, –
Children 3 –
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 Myrtle Luserke

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 in PRESENT WEIGHT, – USUAL WEIGHT, – NUTRITION, Good
WOUNDS, Abnormalities, – Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated: prompt –
PUPILS, Equality, Yes Size, normal Response to Light, Good Accommodation, good
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, – Good
COORDINATION, Arms, good Legs, good – ~~Grasp,~~ other tests, good –
TREMORS, Hands, fine Tongue, fine Facial Muscles, – General, –
PATELLAR REFLEX, present Other Reflexes, –
ARTICULATION, Slurred, – Hesitating, – Slow, –
FACIAL EXPRESSION, Sensibility, –
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: normal
Expansion: good
Breath Sounds: normal
Passed Sept 23/02: Exd Sept 23d

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. 1003 Reaction, acid – Color pale yellow and Appearance, Cloudy
Albumen, Heat 0 –: nitric acid 0 –: Tanrets 0 – Sugar, Fehlings sol 0 –: Bismuth 0 –
Casts and Crystals, pus, a few corp: Epithelium, several cells –

GYNECOLOGICAL EXAMINATION, Perinaeum & cervix lacerated: uterus slightly anteflexed: pro: cervicitis: endometritis: leucorrhoea.
MENSTRUATION,
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 admitted in good physical health: Is strong & well-developed: She is melancholy & depressed & believes "She is persecuted by the Devil". She refuses to converse & will answer only an occasional question. Her breasts are full of milk & she was nursing a child, prior to admission –
– milk –

Personal and Medical History of Myrtle Luserte

1902

This patient was brought here by Dep. E. Johnson, attended by Miss Leah Sutherland, with following history of case. If any consanguinity, unknown: no history of heredity. This is 1st attack: first symptoms manifested 2 weeks ago, by depression, and an acute outbreak of excitement. Disease seems increasing: variable & with rational intervals; but these, not regular. Derangement now shown by delusions of persecution by the Devil. Is not disposed to injure others: has not attempted suicide, but propensity is active now: asks for poisons: destroys furniture. No peculiarities previously manifested: no history of intemperance; nor of any severe disease &c, nor head-injury: has been ten days at City & County hospital: supposed cause of the disease is Lactation. Usual treatment has been given. On personal Examination, patient is resistive; silent; says "she sees the devil, and that he wants to put her in a dungeon".

Sep 18 On admission, was put on T.W. (G.H.U. Rpt: Complexion dark: hair brown: eyes blue: no marks &c noted: several small scars on left side of face; and right wrist: right elbow bruised and skin broken: is dirty: resisted so, we could not count her teeth. Is very resistive. talks very little, would only answer a few questions.)

Summary of 14 day record dict by Dr O.C. Hyrdole Patient admitted Sept 18-1902 bathed and put to bed two small scars on left side of face and sore on right elbow. breasts full of milk. T. P. and R first two weeks slightly above normal, took regular diet, occasional hypnotic for sleep bowels regular rather sleepless. breasts emptied of milk twice daily patient very restless out of bed a great deal at times very resistive. appetite poor. patient quite industrious and assists some with the ward work.

Nov 19th Wt 130# Patient very much improved. Quiet and agreeable. Eats and sleeps well: bowels regular: neat in habits and appearance. Takes out door exercise; Attends Chapel and amusements

Dec 9th Went home.

Personal and Medical History of Martha Richards

Whole No. 6199.
Residence, Oxford, Minn
Became resident of State 1885: of County, June 1902.
Date Admission, 19th September 1902.
Admitted by Dr. O. C. Heyerdale hour, 7 20 P.M.
How Sent, E. W. Bazille, Jof P. Ramsey County.
Sex, Female Age, 56.
Civil Condition, Married.
Children, Two Age Youngest Child, 24 years
Occupation, Housewife: husband, a farmer
Degree Education, — Common school
Profession of Religion, not a church member
Habits, Not intemperate: but Dirty habits
Nativity, England: Parents also born there.
Physicians Committing, Daniel Pool & F. L. Beckley
Correspondents, (Son) John Richards
1177 Payne Ave
St Paul

No. for Year, 35.
Insane Relatives, Yes: uncle committed suicide
Cause Exciting, Tubercular
Cause Predisposing, Heredity possibly.
Form, Senile Dementia
Accompanying Bodily Disorder, (Tuberculosis) =
Suicidal or not, Yes & propensity active
Date of this Attack, July 1st 1902
Duration, — Nearly 3 months —
No. of Attack, 1st —
No. of Admission, 1st here (was at St Luke's, St Paul 4 mos)
Age First Attack, 55 past.
Time of Leaving, December 11 - 1902
Time in Hospital, 2 mos 22 Ds
Result, Died: Acute nephritis
(last illness — 5 Ds)

Examination on Admission by Dr. L. A. Linton *Date of* Sept 20-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear: Quick
MEMORY, Past Events, —
Recent Events, Seems good Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: generally correct.
REASONING POWER, Ordinary Subjects, —
Special Subjects, Fair.
Own Mental State, Does not appreciate
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
—
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
Delusions "of poisoning" & other delusions.
HALLUCINATIONS, —
ILLUSIONS, - Illusions -
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Died of Dysentery —
Paternal Relatives, —
Mother, Died: Cancer of face
Maternal Relatives, — one sister died from cancer of breast: one living:
Brothers and Sisters, one brother dead: two living: 2 children living: two dead at birth
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Nothing
HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, No
yes yes
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, good Appetite, fair Bowels, regular.

Personal and Medical History of Martha Richards

SENT TO ROCHESTER—Martha Richard, the mother of two children, was committed to the asylum at Rochester by Judge Bazille yesterday after an examination in the probate court. She is fifty-two years of age and has been a patient at the St. Luke's hospital for four months.

John Richards
1177 Payne Ave
St Paul

TION, very poor
of Skin, normal
ept —
tion, in left eye
s —
s shut, would not do
t fair: Standing
shut, fair —
ral, None —

ARTICULATION, Slurred, Good Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Weak
Size, Somewhat Enlarged
Apex Beat, Covered
Murmurs, — —
ARTERIES, aortic Stenosis
Sclerotic —
LUNGS,
Chest symmetry: Sym
Expansion: poor
Breath Sounds: Considerable areas of dullness in right lung: both in apex & subclavicular space

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,

Passed Sep 25 - 1902 Ed. Sept 25th
EXAMINATION URINE, Quantity, — Sp. g. 1014 Reaction, acid — Color and Appearance, Yellow Cloudy & white flaky dep.
Albumen, Heat 0 : nitric acid 0 : Tanret's 0 Sugar, Fehling's Sol: 0 Bismuth 0
Casts and Crystals, amo. urates: Epithelium several cells: Oxalate lime, several crystals

GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: mucous membrane of urethra congested: uterus retroflexed: fundus adherent on right: painful to touch: cervicitis, leucorrhoea: Cervix Eroded
MENSTRUATION, —
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 is cross & irritable. Is able to answer questions intelligently, aside from her delusions, but does so, grudgingly: seems very ill-natured. Language caustic, &, at times, rather vulgar. She complains of her food & treatment: has the delusion "that her medicine & food are poisoned." —

Personal and Medical History of Martha Richards

Whole No. 6199.
Residence, Oxford, Minn
Became resident of State 1885: of County June 1902.
Date Admission, 19th September 1902
Admitted by Dr. O. C. Heyerdale hour, 7²⁰ P.M.
How Sent, E. W. Bazille, Jo[?]P. Ramsey County.
Sex, Female Age, 56.
Civil Condition, married.
Children, Two Age Youngest Child, 24 years
Occupation, Housewife: husband, a farmer
Degree Education, — Common school
Profession of Religion, not a church member
Habits, not intemperate: but Dirty habits
Nativity, England: parents also born there.
Physicians Committing, Daniel Pool & F. L. Beckley
Correspondents, (Son) John Richards
1177 Payne Ave
St Paul

No. for Year, 35.
Insane Relatives, Yes: uncle Committed
Cause Exciting, Tubercular
Cause Predisposing, Heredity possibly.
Form, Senile Dementia
Accompanying Bodily Disorder, (Tuberculosis) =
Suicidal or not, Yes & propensity active
Date of this Attack, July 1st 1902
Duration, - nearly 3 months -
No. of Attack, 1st —
No. of Admission, 1st here (was at St Luke's, St Paul) 4 mos
Age First Attack, 53 past.
Time of Leaving, December 11 - 1902
Time in Hospital, 2 mos 22 Ds
Result, Died: Acute nephritis
(last illness — 5 Ds)

Examination on Admission by Dr. L. A. Linton *Date of* Sept 20-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear: Quick
MEMORY, Past Events, —
Recent Events, Seems good Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: generally Correct.
REASONING POWER, Ordinary Subjects, —
Special Subjects, Fair.
Own Mental State, Does not appreciate
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
—

DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
Delusions "of poisoning" & other delusions.
HALLUCINATIONS, —
ILLUSIONS, - Illusions -
SUMMARY, —

HISTORICAL.

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

Father, Died of Dysentery -
Paternal Relatives, —
Mother, Died: cancer of face
Maternal Relatives, —
one sister died from Cancer of breast: one living:
Brothers and Sisters, one brother dead: two living:
2 children living: two dead at birth
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Nothing

HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, no
↓ yes ↓ yes ↓
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, good Appetite, fair Bowels, regular.

Personal and Medical History of Martha Richards

nents. As soon as the
death became known a large crowd
red outside the palace.
King Leopold had left Bagneres-de-
hon, France, for Spa, and other me
f the royal family have been teleg
or. M. de Smet de Nayer, the
will arrive here to-morrow

John Richards
1177 Payne Ave
St Paul

TION, very poor.
of Skin, normal
upt -
tion, in left Eye.
-
Shut, would not do
t fair: Standing-
hut, fair —
ral, None —

ARTICULATION, Slurred, Good Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, weak
Size, Somewhat Enlarged
Apex Beat, Covered
Murmurs, — —
ARTERIES, aortic Stenosis
Sclerotic -
LUNGS,
Chest symmetry: Sym
Expansion: poor
Breath Sounds: considerable areas of dullness in right lung: both in apex & subclavicular space

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,

Passed Sept 25 - 1902. Ed. Sept 25th
EXAMINATION URINE, Quantity, — Sp. g. 1014 Reaction, acid = Color and Appearance, Yellow Cloudy & white flaky Dep.
Albumen, Heat 0 : nitric acid 0 : Taurets 0 Sugar, Fehling's Sol: 0 Bismuth 0
Casts and Crystals, amo. urates: Epithelium several cells: Oxalate lime, several crystals

GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: mucous membrane of urethra congested: uterus retroflexed: fundus adherent on right: painful to touch: cervicitis, leucorrhoea: Cervix Eroded.
MENSTRUATION, —
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 is cross & irritable. Is able to answer questions intelligently, aside from her delusions, but does so, grudgingly: seems very ill-natured. Language caustic, &, at times, rather vulgar. She complains of her food & treatment: has the delusion "that her medicine & food are poisoned". —

Personal a

STATE OF MINNESOTA, } ss.
COUNTY OF RAMSEY.

Form 203.

5-97. 3M

I Hereby Certify and Return, That at the City of St. Paul, County and State aforesaid, on the.......................... day of .... A. D. 189......, I served the.......................... hereto attached, upon the within named.......................... by leaving a true and correct copy thereof at the house of.......................... usual abode, with.......................... a person of suitable age and discretion then residing therein.

Dated this.......................... day of.......................... 189......

....
Sheriff of Ramsey County, Minn.

By.......................... Deputy.

Sheriff's Fee Service, $..........
Travel, - - - $..........
$..........

Whole No. 6199.
Residence, Oxford, M
Became resident of state 1885: of
Date Admission, 19th September 1902.
Admitted by Dr. O. C. Heyerdale hour, 7:20 P.M.
How Sent, E. W. Bazille, Jo of P. Ramsey County.
Sex, Female Age, 56.
Civil Condition, married.
Children, Two Age Youngest Child, 24 years
Occupation, Housewife: husband, a farmer
Degree Education, — Common school
Profession of Religion, not a church member
Habits, not intemperate: but Dirty habits
Nativity, England: Parents also born there.
Physicians Committing, Daniel Pool & F. L. Beckley
Correspondents, (Son) John Richards
1177 Payne Ave
St Paul

Accom
Suicidal or not,
Date of this Attack,
Duration, – Nearly
No. of Attack, 1st ——
No. of Admission, 1st here (was at St Luke's, St Paul) 4 mos
Age First Attack, 55 past.
Time of Leaving, December 11 - 1902
Time in Hospital, 2 mos 22 Ds
Result, Died: Acute Nephritis
(last illness – 5 Ds)

Examination on Admission by Dr. L. A. Linton *Date of* Sept 20-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear: Quick
MEMORY, Past Events, —
Recent Events, Seems good Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: generally Correct.
REASONING POWER, Ordinary Subjects, —
Special Subjects, Fair.
Own Mental State, Does not appreciate
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
—

DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
Delusions "of poisoning" & other Delusions.
HALLUCINATIONS, —
ILLUSIONS, – Illusions –
SUMMARY, —

HISTORICAL.

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

Father, Died of Dysentery –
Paternal Relatives, —
Mother, Died: Cancer of face
Maternal Relatives, —
one sister died from Cancer of breast: one living:
Brothers and Sisters, one brother dead: two living:
2 children living: two dead at birth
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Nothing

HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, no
↓ yes ↓ yes ↓
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, good Appetite, fair Bowels, regular.

Personal and Medical History of Martha Richards

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, 75 lbs USUAL WEIGHT, — NUTRITION, very poor.
WOUNDS, Abnormalities, none — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated all over white Coating: prompt –
PUPILS, Equality, right obscured Size, normal Response to Light, in left eye Accommodation, in left eye.
SIGHT, Poor
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Cataract of right eye: total –
HEARING, Good
COORDINATION, Arms, good Legs, good {Finger to nose, eyes shut, would not do. Standing on one foot fair: Standing, eyes shut, fair – ~~Grasp~~,
TREMORS, Hands, Slight Tongue, Slight Facial Muscles, none General, none –
PATELLAR REFLEX, absent Other Reflexes, absent
ARTICULATION, Slurred, Good Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Weak
Size, Somewhat Enlarged
Apex Beat, Covered
Murmurs, — —
ARTERIES, aortic Stenosis
Sclerotic –
LUNGS,
Chest symmetry: Sym
Expansion: poor
Breath Sounds: considerable areas of dullness in right lung: both in apex & subclavicular space

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,

Passed Sep 25 – 1902. Ed. Sept 25th EXAMINATION URINE, Quantity, — Sp. g. 1014 Reaction, acid = Yellow Color and Appearance, Cloudy & white flaky dep.
Albumen, Heat 0: nitric acid 0: Tanret's 0 Sugar, Fehling's Sol: 0 Bismuth 0
Casts and Crystals, amo. urates: Epithelium several cells: oxalate lim, several crystals.

GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: mucous membrane of urethra congested: uterus retroflexed: fundus adherent on right: painful to touch: cervicitis, leucorrhoea: Cervix
MENSTRUATION, —— Eroded.
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 is cross & irritable. Is able to answer questions intelligently, aside from her delusions, but does so, grudgingly: seems very ill-natured. Language caustic, &, at times, rather vulgar. She complains of her food & treatment: has the delusion "that her medicine & food are poisoned". —

Personal and Medical History of Martha Richards.

1902

This patient was brought here by Dep. E. Johnson, attended by Mrs Taylor, in poor physical condition, with following history of case. No consanguinity: some history of heredity as uncle committed suicide: this is 1st attack: was sent to St Luke's hospital: result of treatment, unfavorable: first symptoms of this attack manifested July 1st 1902: suicidal tendencies: delusions: obscene language. Disease seems increasing: variable & with rational intervals: but these, not regular; and lucid intervals are rare: "always asking for a knife to kill herself". Says "her bowels never move, nor passes water". Derangement now shown in that she says "bowels never move, nor does she pass urine"; (whereas, in reality, these functions are normal); suicidal tendencies. Is disposed to injure others: Has attempted suicide; constantly asking for a long sharp knife to end her life: propensity active now: of filthy and destructive habits: passes urine and foeces involuntarily: no peculiarities previously manifested: as to history of intemperance, none: has not been subject to any severe disease &c, a head-injury: Has been confined ⊗ at St Luke's hospital, four months. Supposed cause of the disease, tubercular. General treatment has been given. On Personal Examination, no further facts seem to have been learned. —

⊗ Note: (See letter of Dr Daniel Pool, (on file): He writes, date of September 19-1902: Patient has been under my care, as a patient in St Luke's hospital, during last 6 weeks, in which time she has improved, physically, a great deal: but, mentally, gradually losing ground: "thinks she seldom passes urine or foeces": whereas these functions, in reality, are quite regular. Is constantly clamoring for a long sharp knife, with which to end her life: frequently uses filthy, obscene and abusive language toward her attendants: bites, scratches & strikes the nurses and house physicians. Says: "she does not eat anything", and will never eat while any are in her presence; but, if left alone, she eats all food given her. Have known her since 1885: was their family physician 1885 to 1894, when she moved away. Naturally, was a very quiet, ladylike, inoffensive woman: — whole disposition has changed: family history not good: an uncle (mother's brother) suicided: sister died of cancer of stomach: a brother, I understand, died of tuberculosis, & her mother had suicidal tendencies & had to be watched. When her mental symptoms first appeared, I thought, perhaps, it was case of pure bad-temper & devilishness, but, after close observation, I decided otherwise."

Sep 19 On admission, was put on T.T. (G.H.N.R/pt. Complexion dark: hair brown: part gray: eyes hazel: condition of skin, hot & dry: marks, scars & bruises, none noticed: Eruptions on left shoulder: Is clean: Blind in right eye: has 4 upper & 4 lower teeth, with several roots: all in bad condition: Behavior quiet: talks intelligently, but says "she will kill herself, because she suffers from ill-health.") ———

Summary of 14 day record Dict by Dr L.A. Linton

Admitted on ward September 19th slight eruption on left shoulder

Personal and Medical History of Martha Richards

noticed, cataract in right eye, deformity noticed on second toe of each foot, patient quiet, very reticent unless addressed, is then very cross and irratable, sometimes profane and vulgar rarely volunteers conversation, is capable of answering questions intelligently is quite restive sometimes violent, has some consolidation in the apices of the lungs and different areas indicating tubercular trouble. Temperature running from 100.2 Pulse 97 Resp 35. is very much emaciated complains of pain all over her body, says her bones ache

Patient continues in bed from time of admission; restless and uneasy most of the time; requires hypnotics frequently; appetite poor; requires cathartics; complains of pain in the abdomen and this seemed to grow progressively worse; patient usually quite melancholy; generally disagreable inclined to scold and find fault; as a rule refuses to converse but can answer questions intelligently when she chooses. The stomach found prolapsed and an hourglass constriction cause unknown operation consisting of explorative laparatomy was performed by Dr W.J. Mayo. an omental band was found crossing the stomach causing constriction which undoubtedly led to the pain complained of. Patient was fairly quiet after the operation troubled somewhat with emesis; was more agreable than she had been previously; Temperature ranged from normal to 103 pulse 80 to 144 Resp 20 to 36. Emesis continued patient growing restless, circulation poor limbs cold pulse weak and thready. Died December 11th at 2.45 am Autopsy revealed a condition of septic peritonitis localized about the line of incission; there was also associated acute nephritis.

Personal and Medical History of Ingeborg Johnson

[illegible] or Isabella Benson

Whole No. 6200.
Residence, Lanesboro', Minn
Said Patient is a resident of Fillmore Co.
Date Admission, 23 September 1902
Admitted by Dr. L. A. Linton hour, 1⁴⁵ P.M.
How Sent, E. V. Tarrington, Jdg. P. Fillmore Co.
Sex, Female Age, 46
Civil Condition, married
Children, One Age Youngest Child, 9 years
Occupation, Housewife: husband's, millwright
Degree Education, Can read & write.
Profession of Religion, Lutheran
Habits, not intemperate
Nativity, Norway: Parents also born there
Physicians Committing, J. H. Phillips and Geo. A. Love
Correspondents, (Husband) Andrew Johnson Lanesboro, Fillmore Co
Ole Benson (brother) Lanesboro' Minn

No. for Year, 36.
Insane Relatives, none
Cause Exciting, Don't know
Cause Predisposing, previous attack
Form, Acute Mania
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not
Date of this Attack, about 1 week ago
Duration, " "
No. of Attack, 2nd: one, 9 years ago
No. of Admission, ~~1st~~ " 2nd
Age First Attack, about 37.
Time of Leaving, October 8 - 1902
Time in Hospital, this time — 15 Ds —
Result, Died: Acute nephritis (15 Ds)

Examination on Admission by Dr. O. C. Heyerdale *Date of* Sept 24-1902

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,
Illusive
REASONING POWER, Ordinary Subjects, Poor
Special Subjects, "
Own Mental State, "
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Exalted
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, One week
ONSET, Gradual or Sudden, 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, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, — Appetite, — Bowels, —

Personal and Medical History of Ingeborg Johnson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 in PRESENT WEIGHT, Not taken USUAL WEIGHT, — NUTRITION, Fair
WOUNDS, Abnormalities, — Condition of Skin, Normal
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, — Size, — Response to Light, — Accommodation, —
SIGHT, Seems good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Left eye crossed
HEARING, Seems good
COORDINATION, Arms, — Legs, — Grasp, —
TREMORS, Hands, — Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, — Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, Normal
Apex Beat, normal
Murmurs, None
ARTERIES,
—
LUNGS,
Chest Symmetry: Yes
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,

Passed Oct 7th 1902. Exd. Oct 7th
EXAMINATION URINE, Quantity, ℥ XXV ⅲ/₁₂ Sp. g. 1017 Reaction, acid Color and Appearance, Yellow Yellow & a slight flaky dep.
Albumen, Heat: a good test. Nitric acid: a good test Tanret's: a large amount Sugar, Fehling's Sol: 0 Bismuth 0 —
Casts and Crystals, a large No. of granular: urates amor: pus: several corp: epithelium. Several cells.

GYNECOLOGICAL EXAMINATION, Too sick for examination

MENSTRUATION,
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 admitted in a condition of delirious mania: has symptoms of acute "Bright's Disease". Findings in the urine show acute nephritis and patient is in a critical condition.—

Personal and Medical History of Ingeborg Johnson

1902

This patient was brought here by Dep. James Galligan, attended by Ole Benson, in fair physical condition, with following history of case. No history of consanguinity or heredity: This is not 1st attack: one occurred 9 years ago: Duration 4 or 5 days: was not sent to hospital: First symptoms of this attack manifested about one week ago: began in a religious frenzy. Disease seems increasing: Not variable: no rational intervals: Derangement now shown on subject of religion, at first; but now is manifested on Every Subject. Is not, disposed to injure others, nor suicidal: is of filthy and destructive habits: no history of any previous peculiarities, nor of intemperance, severe disease or nor head-injury. Has not been restrained or confined. Don't know cause of disease: treatment, none. On personal examination, has all appearance of one in acute mania. Commitment recommended, because her disease is of such a nature, and in such a stage, as to require regular aid and assistance while under legal restraint: and that said patient is a resident of Fillmore County.—

Sep 23 On admission, was put on T.W. (G.H.N. R'pt: Complexion fair: hair light: eyes blue: condition of skin, hot and dry: no marks re noted: large scar on under side of left arm: several small bruises on legs & arms: no vermin, but is dirty: cross eyed in left eye: resisted so I could not count her teeth: Behavior, very maniacal: resisted nurses, when being bathed: bit and kicked them, and is incoherent).—

" Note: taken today = Oct 9/02 = from Olaf Thompson visiting here (by Dr. Heyerdale) = "Committed here as
" "Isabella Benson" on February 21st 1890. — acute mania — remained 19 Days & recovered —
" (was single, at that time): In 1895, was acutely maniacal for 10 days, following her con-
" -finement. At that time, she was not committed to any hospital, but was treated at home.
" (See Vol 13 p.136 No 2296) —"

Sept 23rd Patient extremely noisy and excited: talks incoherently. does not answer questions intelligently. Very resistive. Inclined to be violent. Restrained.

Oct 2nd Visited by relatives. Oct. 6th Visited by sister and friend.

Oct 8th Died at 3:10 P.M. Cause of death, Acute Nephritis.

Personal and Medical History of Mary Ferber

Whole No. 6201.
Residence, St Paul, Minn
Became resident of State at birth: of County: Ditto
Date Admission, 24th September 1902
Admitted by Dr L. A. Linton hour, 7^15 PM
How Sent, E. W. Bazille, Jof P. Ramsey County
Sex, Female Age, 32
Civil Condition, Single
Children, – Age Youngest Child, –
Occupation, Clerk: father a laborer –
Degree Education, Common School –
Profession of Religion, R. Catholic
Habits, not intemperate –
Nativity, St Paul: Minn: Parents born in Germany
Physicians Committing, E. J. Abbott and A. Macdonald
Correspondents, (Father) Joseph Ferber
277 Western ave S
St Paul

No. for Year, 37.
Insane Relatives, none
Cause Exciting, – ? –
Cause Predisposing, "Chronic"
Form, Chronic Melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not —
Date of this Attack, about a week ago
Duration, " " —
No. of Attack, not 1st (at intervals past 5 or 6 yrs)
No. of Admission, 1st here (at C & C hospl. June 1902)
Age First Attack, about 26 years.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Sept 30-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear: Quick
MEMORY, Past Events, Impaired
Recent Events, fairly good ~~Special Subjects~~, at time of examination, but says "at times it is difficult for her to remember" –
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
alert: Correct
REASONING POWER, Ordinary Subjects, ——
Special Subjects, apparently normal for her, but is a
~~Own Mental State~~, defective
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
slightly depressed
DELUSIONS, Systematized, Transitory, —
Special Subjects, Nothing
HALLUCINATIONS,
ILLUSIONS, —
SUMMARY,
—

HISTORICAL.

LENGTH INVASION, ——
ONSET, Gradual or Sudden, ——
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Nothing obtainable
Father, Living
Paternal Relatives, ——
Mother, Living –
Maternal Relatives,
Brothers and Sisters, one sister, 3 brothers living; 4 died when infants
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
had Scarlet fever: uterine operation by vagina –
HABITS, Drinking and Smoking, Good
✓yes ✓yes
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, housework, clerking & working candy factory –
Detail Date, Duration, and Character of Previous Attack, if any,
——
Sleep, Good Appetite, good Bowels, regular

Personal and Medical History of Mary Ferber

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in PRESENT WEIGHT, 117 lbs USUAL WEIGHT, — NUTRITION, fair
WOUNDS, Abnormalities, none Condition of Skin, anaemic – otherwise normal
TONGUE, Coatings, Promptness of Movement, white Coating – prompt.
PUPILS, Equality, equal Size, Contracted Response to Light, slight Accommodation, slight
SIGHT, rather poor
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good Legs, Good } finger to nose eyes shut, good: standing on one foot, fair: turning quickly, good standing, eyes shut: good – Grasp,
TREMORS, Hands, none Tongue, slight Facial Muscles, none General, none
PATELLAR REFLEX, diminished on right side; exaggerated on left. Other Reflexes, none –
ARTICULATION, Slurred, —— Hesitating, —— ~~Slow~~, Good
FACIAL EXPRESSION, Sensibility, ——
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, "
Murmurs, None except haemic murmur
ARTERIES,
normal
LUNGS,
Chest Symmetry: Sym.
Expansion: Good
Breath Sounds: normal
Passed Sep 25th 1902: Ex. Sept 25th

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. 1010 Reaction, acid – Color and Appearance, light yellow Cloudy & heavy white flaky dep.
Albumen, Heat 0 : nitric acid 0 : Jamets 0 Sugar, Fehling's sol. 0 : Bismuth 0
Casts and Crystals, Urates, amor: Epithelium, a few cells: several oxalate lime & uric acid crystals

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact: uterus free & normal in position.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, sleeps well
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 quiet & agreeable since admission: converses freely and gives intelligent answers to questions. Is naturally defective, mentally – She has had but slight depression: & presses no abnormal ideas. Is apparently fairly normal, for one of her mental status –

Personal and Medical History of Mary Ferber

1902

This patient was brought here by Dep. E. Johnson, attended by Helen Taylor, in fair physical condition, with following history of case. No history of any consanguinity or heredity: This is not 1st attack: others occurred at intervals, for past 5 or 6 years: Duration 1 to 2 weeks: was sent to C & C. Hospital June 1902: and discharged improved. First symptoms of this attack manifested about a week ago: bad temper. Disease seems increasing: variable & with rational intervals, but these, not regular. Derangement now shown by fear and anger: melancholy: Is not disposed to injure others: not suicidal; nor of filthy or destructive habits. As to any previous peculiarities, not to our knowledge. No history of intemperance nor of any severe disease &c, nor head-injury: Has not been restrained or confined except (8th) at C & C Hospital: Supposed cause of the disease ?. – Treatment none. On personal examination, no further facts seem to have been learned.

Sep 24 On admission, was put on T.W. (G.H.N. R'pt: Complexion dark: hair brown: eyes brown: condition of skin normal: no marks, eruptions or bruises noted: small scar on left knee. Is rather dirty: Patient has 9 lower teeth & an upper plate: Behavior quiet: has delusions). –

Summary of 14 day record Dict by Dr L.A. Linton

Admitted on ward September 24th. patient was quiet answers questions and converses intelligently sleeps without hypnotics, appetite good requires occasional cathartics no delusions apparent. Sept 29 menstruated up on ward takes out of door exercise seems quite normal assists with the work and agreeable in every way. was put on regular diet from the first with tonic treatment. and occasional cathartics

Max temp during first two weeks 100, Pulse 103 Res 30

Nov 27th Wt. 112# Dec 30th No change.

Jan. 30th Patient rather hypochondriacal and delusional. Always complains of some sickness or pain in some part of her body. Very melancholy and indifferent. General health seems quite good.

Personal and Medical History of Mary K. Richardson

Whole No. 6203.
Residence, Saint Paul, Minn
Resident of State 19 years: of County, 19 yrs
Date Admission, 29th September 1902.
Admitted by Dr. O. C. Heyerdale hour, 7.00 P.M.
How Sent, E. W. Bazille, Jdg P. Ramsey County
Sex, Female Age, 42 years
Civil Condition, married —
Children, Two Age Youngest Child, 15 years
Occupation, Housewife: husband, a lawyer
Degree Education, High-School
Profession of Religion, Unitarian —
Habits, not intemperate —
Nativity, Ohio: Parents born in Connecticut.
Physicians Committing, Henry Hutchinson & Arthur Sweeney
Correspondents, (Husband) Mr. Harris Richardson
Tel: 870 Main: — St Paul

No. for Year, 39
Insane Relatives, Two uncles & a Cousin
Cause Exciting, Unknown
Cause Predisposing, Heredity & prev. attk
Form, ac. melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, Very suicidal & propensity very marked:
Date of this Attack, In February 1902
Duration, — Some 7 months —
No. of Attack, 2nd (seemingly); one, 19 yrs ago
No. of Admission, 1st here: (had private care in Conn:)
Age First Attack, about 23 yrs.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale — *Date of* Sep 30 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear: somewhat sluggish
MEMORY, Past Events, good
Recent Events, good Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: Correct
REASONING POWER, Ordinary Subjects, —
Special Subjects, —
Own Mental State, Realizes her condition.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed: melancholy
DELUSIONS, Systematized, — Transitory, —
Special Subjects, Expresses many morbid delusions:
Says "she can never be well": "that she is damned" - "that she cannot live long" —
HALLUCINATIONS,
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, several years
ONSET, Gradual or Sudden, gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead
Paternal Relatives, —
Mother, Dead: apoplexy.
Maternal Relatives, —
Brothers and Sisters, 2 brothers: one living -
2 children living -
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Typhoid: 19 years ago —
HABITS, Drinking and Smoking, good
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework —
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, poor Appetite, fair Bowels, —

Personal and Medical History of Mary K. Richardson

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, NUTRITION, not well nourished
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, coated: prompt
PUPILS, Equality, equal Size, normal Response to Light, good Accommodation, good
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Deaf in left ear & partially so, in right ear —
COORDINATION, Arms, good Legs, good ~~Grasp,~~ other tests, good —
TREMORS, Hands, fine Tongue, none Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, fairly strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: yes
Expansion: fair
Breath sounds: normal
Passed Oct 7/02. Ed. Oct 7th

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. 1017 Reaction, acid Color and Appearance, Yellow Clear & a slight flaky dep. —
Albumen, Heat o: nitric acid o Tanret's o Sugar, Fehling's Sol o: Bismuth o —
Casts and Crystals, Urates, amor: Epithelium, a few cells: oxalate lime, several crystals.

GYNECOLOGICAL EXAMINATION, Uterus ante flexed, adherent; cervix lacerated, eroded, cystic; Endometritis, cervicitis, leucorrhoea —
MENSTRUATION,
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 admitted in good physical condition, but not well nourished. She is very melancholy & expresses many morbid ideas. Expresses a desire to die & says "that she is damned." and "that she cannot live long" etc - Is very restless: worries a great deal. Patient is well educated & refined & converses freely. —

1902

This patient was brought here by Mr Harris Richardson, attended by Mrs Cristadoro, in fair physical condition, with following history of case. There is no history of consanguinity, but some of heredity: two uncles & a cousin insane. This is not 1st attack: one occurred 19 years ago: duration 6 months. First symptoms of this attack manifested in February 1902, by depression. Disease seems stationary, variable & with rational intervals, but these, not regular. Derangement now shown by depression: ideas of poverty; of the unpardonable sin: and of self destruction. Has threatened to injure others: has attempted suicide, by poison and drowning: propensity active now: very marked: not disposed to filthy or destructive habits. Previously, manifested peculiarities: She has been interested in Spiritualism, Christian Science, and similar vagaries. No history of intemperance, nor of any severe disease &c, nor head-injury: Was cared for privately in Connecticut, for six months. Cause of disease, unknown. Treatment has been general tonic and hygienic measures. On personal examination, patient is restless, depressed; suicidal and talks in a despondent manner: ——

Sept 29 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair brown. eyes blue: Condition of skin, normal: no marks, scars or bruises &c noted: Eruptions on her back & chest: Is clean: patient has 16 upper and 15 lower teeth: behavior quiet; talks intelligently). ——

Note: See letter from Mrs J. Gertrude Cristadoro, patient's sister, of date Oct 5/02. "Last April, she ceased menstruating: thought that had a great deal to do with the "pressure on the head" of which she complains. Specialist in Conn: did not advise trying to reestablish the flow: so nothing was done, except to give frequent baths. My sister only 42 years of age, and, as menstruation stopped suddenly, this may account for some of the trouble. She complains of going blind, especially after using her eyes with sewing; so, before she can do any work, she will have to be fitted to glasses: on account of expense, she refused to go to an oculist: so, when they are bought for her, "of course the Hospital provides glasses, in all such cases"— She never drinks water enough, consequently her urine is uncertain: dark and thick, at times; and almost colorless, at others: by plentiful use of fruit, shredded wheat biscuit and postum-cereal for breakfast, I managed to keep her bowels in order, except when I was obliged to give her some quieting medicine, & then, that produced constipation. Cascara sagrada works well, & she does not mind bitter taste. In her work-basket is a pair of scissors, which she might use, to hurt herself, although she never has attempted to do so: but she did try to hide a pen-knife, & she frequently asked for a hatchet, razor & carving knife. She needs a flannel wrapper but; "it will have to be given by the State also". Mrs R.'s hair has fallen out, to a great extent, this summer, and, if it cannot be treated, so as to stop its falling out, I think it will have to be cut off—(may hold a consultation on this matter, when we go up next week). She is passionately fond of sweets: candy, jelly-cake or sugar: (great privation for her to have to do without some sugar, each day). In all her life, she has never suffered with any female

1902

Contd troubles, headache, nor backache. For a number of years, she had neuralgia of stomach but, lately, no trouble of that kind. It is only since Spring, that she has been at all constipated. "Always thought her a remarkably healthy woman"; "but always nervous. She is very fond of walking and riding: she tires easily of people &c."

Summary of 14 day record dictated by Dr O. C. Hyerdale
Patient admitted September 29-1902 bathed and put to bed during first 14 days T. P and R perfectly normal took regular diet, bowels regular occasional hypnotic for sleep occasional cathartic, appetite rather poor, patient very much disturbed mentally, very melancholy and agitated, expresses many delusions of a morbid nature, very restless walks about the room and ward a great deal.

Oct 12th Visited by husband, took her out for a drive.
Nov 5th " " " Taken out walking.
Nov 18th " " " and sister. Taken out by both.
Nov 20th Patient refuses nourishment: apetite very poor: fed by tube. Nov 25th Much disturbed during day & night. Walks up and down ward: melancholy, and agitated in manner. Expresses many morbid delusions. Patient receives regular electric treatment. Wt 95#. Dec 2nd visited by husband and on Dec 3rd.
Dec 4 Refused supper; threw dishes on floor.
Dec 18 For the past 2 weeks patient has been very much disturbed and rather destructive. Visited by husband.
Dec 25 Restrained by jacket and mittens. Jan 9 taken out for a drive by sister. Jan 18 patient struck by Anna causing slight laceration of skin; suture applied.

Personal and Medical History of Sarah Siewert

née Sarah Moran

Whole No. 6205.

Residence, Winona. Minn

Became resident of State 1867: of Co. June 1902

Date Admission, 1st October 1902.

Admitted by Dr O. C. Heyerdale hour, 4⁰⁰ P.M.

How Sent, D. E. Vance, J. of P. Winona County

Sex, Female Age, 35 Years

Civil Condition, married —

Children, one Age Youngest Child, 6 months

Occupation, Housekeeper: Husband, a Carpenter.

Degree Education, Common School —

Profession of Religion, Roman Catholic

Habits, not intemperate (but ?) —

Nativity, Minnesota: parents born in Ireland.

Physicians Committing, G. J. Tweedy and H. M. Lichtenstein

Correspondents, (Husband) Henry Siewert
℅ Milwaukee House: — Winona, Minn

No. for Year, 41.

Insane Relatives, None? (her mother was here) —

Cause Exciting, Unknown: (1st attk, over-study) — miss Gleason's note

Cause Predisposing, previous attacks: (Heredity see)

Form, recurrent mania

Accompanying Bodily Disorder, none mentioned

Suicidal or not, Talks of suicide: threatens others.

Date of this Attack, since May —

Duration, about 5 months

No. of Attack, many: 1884. 1887. 1898. &c

No. of Admission, 6th —

Age First Attack, about 18.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. L. A. Linton *Date of* Oct 3 - 1902

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,
—

REASONING POWER, Ordinary Subjects, somewhat impaired
Special Subjects, —
Own Mental State, appreciates

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

DELUSIONS, Systematized, Nothing determined Transitory,
Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, this attack sudden

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
One uncle died of tuberculosis.

Father, Living

Paternal Relatives, —

Mother, Died of heart disease.

Maternal Relatives, Uncle died of tuberculosis

Brothers and Sisters, 5 sisters — one brother living
one brother killed

one child living — 6 mo:
one died 2 yrs ago, a month old

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Uterine operation while at hospital —
pneumonia, when a child.

HABITS, Drinking and Smoking, habits good, according to statement of patient.

HEADACHES, VERTIGO, OR CONVULSIONS, no —
no no

OCCUPATION, Healthy or not, Housework

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

Sleep, good Appetite, Good Bowels, regular.

Personal and Medical History of Sarah Siewert

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 in PRESENT WEIGHT, 146 lbs USUAL WEIGHT, NUTRITION, Good

WOUNDS, Abnormalities, scar on right forearm, from a burn — Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, clear: prompt

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

SIGHT, Good

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

HEARING, Good

COORDINATION, Arms, good Legs, Good ~~Grasp,~~ other tests good —

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

PATELLAR REFLEX, present Other Reflexes, absent

ARTICULATION, Slurred, good Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular

Strength, Sounds, Strong

Size, normal

Apex Beat, 〃

Murmurs, None

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,

GYNECOLOGICAL EXAMINATION, slight laceration of perinaeum: small rectocele and cystocele: uterus enlarged: cervix much congested, lacerated, eroded, cystic: leucorrhoea

MENSTRUATION,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sleeps well —

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 talks freely & answers questions intelligently. Admits that, at times, she has a bad temper & does not care to control it. She seems in a condition of mild mania. She expresses no delusions of any kind & no abnormal ideas. Has the appearance & acts like a person lacking in self control & discipline. —

Personal and Medical History of Sarah Siewert

1902

This patient was brought here by Dep. John Lynch, attended by Mrs Bertha Decker, in fair physical Condition, with following history of Case. No history of Consanguinity: No Insane relatives (?) (her mother was here: note by Miss Eleason) This is not 1st attack. others occurred in 1884 – 1 year about: – 1887 – 1 Year: and 1898 – 5 months: duration, as stated: was sent to ⊗ Rochester, Minn, Hospital: and, under treatment, improved: first symptoms of this attack manifested in that she has had occasional melancholy spells, since May: became violent, about 10 days ago. Disease seems increasing: variable with rational intervals but these, not regular. Derangement now shown by being excitable, violent and abusive towards her husband: threatened to kill him; and the police-man, who arrested her: intense nervous excitement. Has only threatened to injure others; has not attempted suicide, but talks of doing so: propensity not active now: Not disposed to filthy or destructive habits. No previous peculiarities noted: no history of intemperance, nor of any severe disease &c nor head-injury: has not been restrained or confined, but was in Custody of police, last night. Cause of disease, unknown. (1st attack, over study) – Treatment, none, since discharge from Hospital. On personal Examination, it is noted her physical Condition is normal: She is highly excitable. —

⊗ Note: 6th admission: here, last time, from May 25 – 1899 to November 8 – 1899, and discharged May 2 – 1900, Improved: (See Vol 40 p 269 No 5318): from then diagnosed as "Recurrent Mania". Her Earlier Commitments were under the name of "Sarah Moran". — — —

Octo 1 On admission, was put on T.W. (G. H. N. Rpt: Complexion dark: hair black. eyes brown: Condition of Skin, normal: no marks, scars, bruises &c noted: Is clean: has 15 upper and 16 lower teeth. Behavior very noisy: talks intelligently, but uses profane and obscene language.) —

Summary of 14 day record Dict by Dr L A Linton

Received on ward Oct 1st 1902. extremely noisy and excited complained of sore throat and milk in breast drawn twice daily with breast pump, massage with cocoa butter latter beladona applied. very talkative, linament applied to neck. language sometimes profane and vulgar. is capable of conversing intelligently, has an excitable, irratable tempar has threatened violence to nurse, was put on regular diet bowels moved regular, urinated without catherizing. Maximum temp 100⁴ Pulse 100 Resp 20. At times depressed, cries considerable threatens suicide. Is up on the ward, after first two days was allowed to take exercize with the patients, assisted with the lighter ward work, at times very disagreable and interferes with other patients, also with visitors, quite quarrelsome, transferred to D-3.

Personal and Medical History of

Nov. 28th Wt 145#. For the past two weeks has been in one of her excited maniacal spells but is now somewhat more agreeable again. Quite excited at times.

Dec 6th Patient has again become more than usually disagreeable, violent and profane. Barred her door. Attacked nurses at times.

Dec. 26th Visited by husband: somewhat improved.

Jan. 14th Patient again very much disturbed during the night. Had trouble with her room-mate.

Jan. 25th Patient has been much disturbed since Jan. 16th. Visited by husband on the 14th; by two friends on the 26th.

See files

Personal and Medical History of Mary Siberson

Whole No. 6206.
Residence, Manchester, Minn
Date Admission, 3rd October 1902 -
Admitted by Dr O.C. Heyerdale hour, 8th P.M
How Sent, Herman Blackmer, Jo P. Freeborn County
Sex, Female Age, 30.
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Housework: father, a farmer.
Degree Education, Common -
Profession of Religion, Lutheran
Habits, not intemperate -
Nativity, Freeborn County Minn: Parents, Norway
Physicians Committing, G.W. Barck and H.H. Wilcox
Correspondents, (Mother) Mrs Louis Severson
Manchester Minn

No. for Year, 42.
Insane Relatives, none
Cause Exciting, probably of nervous origin
Cause Predisposing, previous attack.
Form, Ac. Melancholia
Accompanying Bodily Disorder, none mentioned -
Suicidal or not, - not -
Date of this Attack, 5 weeks ago
Duration, " " —
No. of Attack, 2nd (one, in July 1902)
No. of Admission, 1st here: was at Mayo's hospital Rochester: Palmyra Sanitarium -
Age First Attack, - 29 past -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale *Date of* October 6 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish.
MEMORY, Past Events, will not Converse
Recent Events, Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull -
REASONING POWER, Ordinary Subjects, poor
Special Subjects, poor —
Own Mental State, — poor -
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
- Depressed -
DELUSIONS, Systematized, — Transitory, —
~~Special Subjects,~~ Does not talk. It is reported that she has a Delusion that some one is after her, to do her an injury. -
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.
LENGTH INVASION, several months
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
from Mothers letter = "No Insanity in family" 10/9/02
Father, Died 3 years ago, of urinary trouble
Paternal Relatives, Patient will not talk
Mother,
Maternal Relatives,
Brothers and Sisters, 6 3 —
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 Mary Siberson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 in PRESENT WEIGHT, 107 lbs USUAL WEIGHT, — NUTRITION, poor
WOUNDS, Abnormalities, — Condition of Skin, has a dry, rough skin, especially about lower extremities.
TONGUE, Coatings, Promptness of Movement, Coated - prompt
PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, good
SIGHT, seems good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Normal
HEARING, seems good
COORDINATION, Arms, Good Legs, poor. Standing on one foot, poor: unsteady - Turning quickly Grasp, poor, unsteady -
TREMORS, Hands, none Tongue, none Facial Muscles, — General, —
PATELLAR REFLEX, exaggerated Other Reflexes, Elbow, wrist -
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
—
LUNGS,
Chest symmetry: Yes
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,

Passed Oct 7th 1902: Ex. Oct 9th
EXAMINATION URINE, Quantity, ℥XLV Sp. g. 1020 Reaction, acid Color and Appearance, Yellow Cloudy & a pink flaky dep. —
Albumen, Heat 0: nitric acid 0: Faurets 0 Sugar, Fehling's Sol 0: Bismuth. 0 -
Casts and Crystals, Urates, a large amount: mucus, several bands: Epithelium, a few cells.

GYNECOLOGICAL EXAMINATION, Genitals normal: uterus retroflexed and adherent: Endometritis: Cervicitis: leucorrhoea. -
MENSTRUATION,
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 admitted in fair physical condition, but much emaciated: will not converse: is very depressed & melancholy: seems feeble mentally: has considerable difficulty in walking: is very unsteady on her feet &c. —

Personal and Medical History of Mary Siberson

1902

This patient was brought here by Ole. R. Fassom, attended by Charles Siberson
and Mrs Seberson, in fair physical condition, with following history of case.
No history of Consanguinity or heredity: this is not 1st attack: one occurred
in July 1902: duration rather continuous: was in Mayo's hospital, Rochester
Palmyra Sanitarium: results of treatment, not favorable. First symptoms
of this attack manifested 5 weeks ago: (on what subject or in what way, not stated):
Disease seems increasing: is never entirely rational: Derangement now shown
in that she likes to get away; "thinking somebody is after her, to injure her" -
Is not disposed to injure others, nor suicidal: disposed to filthy + destructive
habits: no previous peculiarities manifested: no history of intemperance;
nor of any severe disease &c, or head-injury. Has not been restrained or
confined. Disease is probably of nervous origin: treatment has been had,
but to no purpose. On personal examination, looks idiotic. —
Oct 3 On admission, was put on T.W. (G.H.R. R'pt: Complexion dark: hair black. -
eyes gray: Condition of skin normal: no marks, eruptions or bruises noted:
a few scars on abdomen and right arm: a small bunch on left side of back,
looks like a fatty tumor: is rather dirty: has 15 upper and 14 lower teeth:
Behavior quiet: Talks very little: occasionally answers a question intelligently.
Note: See following Extract from letter of Mrs Louis Seberson, Manchester, Minn, of Oct 9/02:
" my daughter has been sick since June 10th 1894 + has not walked until about a month ago: or, she
" has not walked until she got out of her bed. The way it looked, her first sickness was lock-jaw
" as the Doctor said. The first 2 days after she was taken sick (in 1894), she was sleeping,
" all the while; we could not wake her up, nor the Doctor could not, and, most all that summer,
" she laid in a dazed condition; kind of sleeping. Her serious disease, as far as we know,
" is lock-jaw, + she wanted her own way in everything, after she got sick." ——
Summary of 14 day record dict by Dr O.C. Kyrdale.
Patient admitted October 3-1902 bathed and put to
bed, small scar on left arm, During first two
weeks T.P and R, practically normal, took regular diet, bowels
regular with occasional cathartic, patient melancholy
and quiet will answer questions quite well sleeps
well, appetite fair patient talks to herself considerable
at times is somewhat disturbed mentally.

Nov 10th Patient up on ward: quiet & agreeable: neat in habits and
appearance: seldom converses: eats and sleeps well: bowels constipated.
Takes out door exercise. Is quite melancholy.

Nov 23rd One tooth and two roots extracted. Wt. 109#.

Feb. 17th Visited by brother-in-law. No change. Takes out door exercise.

Personal and Medical History of

Personal and Medical History of Jessie Rietman

Whole No. 6208.

Residence, Hay Creek. Goodhue Co. Minn

Became resident of State of Minn: 1864 - Of County. 1864:

Date Admission, 9th October 1902.

Admitted by Dr. O. C. Heyerdale hour, 7°° P.M.

How Sent, Axel Haller. J of P. Goodhue County.

Sex, Female Age, 36.

Civil Condition, Married -

Children, 2 - Age Youngest Child, 3 years

Occupation, Housework. husband, a furrier.

Degree Education, High School -

Profession of Religion, Episcopal

Habits, not intemperate: father said to have, drunk some.

Nativity, Hay Creek, Goodhue Co. Minn: father Germany. Mother. New York.

Physicians Committing, J. V. Anderson and F. W. Dimmitt

Correspondents, (Father) P. J. Erbar Redwing -

Proof of residence &c made by Mr. S. Raymond:

No. for Year, 44.

Insane Relatives, not as far as known

Cause Exciting, Puerperal.

Cause Predisposing, "Chronic" & prev. attk -

Form, Chr. mania

Accompanying Bodily Disorder, has had convulsions

Suicidal or not, Suicidal - Jumped in Cistern, and will injure others

Date of this Attack, About August 1899.

Duration, - Over 3 years -

No. of Attack, 2nd (one about 12 years ago)

No. of Admission, 1st -

Age First Attack, about 24 -

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. O. C. Heyerdale — *Date of* Oct 14/02

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quick: Quite clear

MEMORY, Past Events, good

Recent Events, good Special Subjects, good

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

— Alert. —

REASONING POWER, Ordinary Subjects, —

~~Special Subjects~~, } Does not realize her condition:

Own Mental State, } Says "She is not insane"

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Somewhat exalted -

DELUSIONS, Systematized, — Transitory, —

~~Special Subjects~~, Has delusions "of persecution".

& believes that members of her own family & others are against her. & are trying to poison her. —

HALLUCINATIONS,

ILLUSIONS, —

SUMMARY, —

HISTORICAL.

LENGTH INVASION, 3 years

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, 3 brothers, 1 sister, well. 2 children - well

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,

Both attacks followed confinement: 1st 1890 - duration 1½ yrs. Kept at home: 2d 1899 & continued to present time. —

Sleep, poor Appetite, poor Bowels, regular.

Personal and Medical History of Jessie Rietman

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 in PRESENT WEIGHT, 143 lbs USUAL WEIGHT, NUTRITION, fairly well nourished

WOUNDS, Abnormalities, none — Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, prompt

PUPILS, Equality, Yes Size, normal Response to Light, Good Accommodation, Good

SIGHT, Good

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

HEARING, Good

COORDINATION, Arms, Good Legs, good ~~Grasp~~, other tests, Good

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

PATELLAR REFLEX, exaggerated Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular

Strength, Sounds, Strong

Size, normal

Apex Beat, normal

Murmurs, none

ARTERIES,

normal

LUNGS,

Chest symmetry: Yes.

Expansion: good.

Breath sounds: normal.

Passed Oct 14/02: L. Oct 24th

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, ℥xx iii/iv Sp. g. 1018. Reaction, neutral Color and Appearance, clear & slight flaky Dep.

Albumen, Heat 0 : Nitric acid 0 : Tanret's 0 : Sugar, Fehling's Sol 0 : Bismuth 0.

Casts and Crystals, Urates, Amor: pus, a few corp: Epithelium, a few cells. —

GYNECOLOGICAL EXAMINATION, Perinaeum & cervix lacerated. Slight retro-flexion: Endometritis, cervicitis, leucorrhoea.

MENSTRUATION,

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 admitted in good physical health & fairly well-nourished. She is quite well educated & converses intelligently on many subjects. Is very irritable & fault-finding & coarse in her speech. Has "delusions of persecution" and "of poisoning". Does not think she is insane. Says "she has had previous attacks of this trouble" -

Personal and Medical History of Jessie Reitman

1902

This patient was brought here by Sheriff P. J. Lundquist, attended by Mrs Lundquist. in fair physical condition, with following history of case. No history of consanguinity, not any insane relatives, as far as known. This is not 1st attack: one occurred about 12 years ago: Duration one and a half years: was not then sent to hospital. First symptoms of this attack manifested about August 1899; became nervous: had convulsions: became suspicious of family, and said, "they wanted to poison her": Disease seems increasing; variable & apparently rational intervals: but these, not regular. Derangement now shown in that she believes that her relatives and others are against her, and wish to get her out of the way. Is disposed to injure others: has attempted suicide jumped into cistern: do not know if propensity now active. No filthy or destructive habits no previous peculiarities manifested: father said to have drunk some: has had convulsions & puerperal mania: has been restrained momentarily from leaving home. Supposed cause of the disease puerperal. Has been treated by various physicians: became more quiet, but no great improvement. On personal examination is excitable: very voluble.

Oct 9 On admission, was put on T.W. (G. H. N. R'pt: Complexion dark: hair brown: Eyes blue: Condition of skin normal: no marks or scars noted: small bruise on right leg: is clean: 10 upper and 16 lower teeth. Behavior quiet: talks intelligently, when asked questions)-

Summary of 14 day dictated by Dr L A Linton

Patient admitted on ward Oct 9th. Is quiet in behaviour, answers questions intelligently, conversing readily, slept very little first night next day quite disturbed and very talkative, talks to herself, a great deal and restless, kept in bed with difficulty talks and scolds most of time, sometimes using profane and vulgar language, Oct 16th. was up and dressed on ward, was very disagreeable and uneasy secluded on 18th and since then has been kept in bed Maximum Temp. 100^{4} Pulse 100 Resp. 28, was put on regular diet. occasional cathartics given bromide three times day trional 20 Grains day, appetite fairly good bowels usually regular 17th menstruated

Oct 25th Visited by husband. Nov 7th Patient very much disturbed Very disagreeable profane and abusive; very delusional. Violent. Restrained at times. Nov 30th No change. Wt 130#

See files

Personal and Medical History of Anna Boe

Whole No. 6212.
Residence, St Paul, Minn
Became resident of State 27 years ago: of County 1897.
Date Admission, 13th October 1902
Admitted by Dr O.C. Heyerdale hour, 7⁴⁰ P.M.
How Sent, E.W. Bazille. J of P. Ramsey County
Sex, Female Age, 33
Civil Condition, Divorced
Children, one Age Youngest Child, 15 years
Occupation, Domestic – husband a farmer
Degree Education, Common school.
Profession of Religion, Lutheran
Habits, was dissipated, at one time.
Nativity, Norway: Parents also born there.
Physicians Committing, Arthur Sweeney and C.J. Woolway
Correspondents, none given in papers –
Sister Mrs Rose Listed – Northfield; Minn

No. for Year, 48.
Insane Relatives, none
Cause Exciting, Unknown
Cause Predisposing, not stated
Form, acute melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not –
Date of this Attack, probably recent
Duration, " short –
No. of Attack, 1st
No. of Admission, 1st here (at C & C hospl. 6 wks).
Age First Attack, not given
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale — *Date of* Oct 23-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
– Dull –
MEMORY, Past Events, Fair
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
– Dull –
REASONING POWER, Ordinary Subjects, poor
Special Subjects, poor
Own Mental State, Does not appreciate her condition.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed —
DELUSIONS, Systematized, Yes Transitory, —
Special Subjects, —
HALLUCINATIONS, "of hearing"
ILLUSIONS, —
SUMMARY, —
Birthday – July 2 – 1869.
Married – May 15 – 1884.

HISTORICAL.

LENGTH INVASION, probably a long time
ONSET, Gradual or Sudden, " Gradual
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,
Brother died of consumption
Father, Died of Dropsy
Paternal Relatives, —
Mother, Dead –
Maternal Relatives, —
Brothers and Sisters, 1 sister living
1 child – 14 years of age
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Rheumatism when a child.
HABITS, Drinking and Smoking, probably bad:
Commitment states "dissipated" –
HEADACHES, VERTIGO, OR CONVULSIONS, has headache.
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleeps fairly well: Appetite, good Bowels, somewhat constipated –

Personal and Medical History of Anna Boe

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 in PRESENT WEIGHT, 160 lbs USUAL WEIGHT, — NUTRITION, good
WOUNDS, Abnormalities, abdominal hernia – Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: brownish coating
PUPILS, Equality, equal Size, normal Response to Light, good Accommodation, good
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, good
COORDINATION, Arms, good Legs, good ~~Grasp,~~ other tests good –
TREMORS, Hands, fine tremor Tongue, none Facial Muscles, — General, —
PATELLAR REFLEX, Diminished Other Reflexes, —
ARTICULATION, Slurred, Good Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, normal
Strength, Sounds, "
Size, "
Apex Beat, "
Murmurs, "
ARTERIES,
normal
LUNGS,
Chest symmetry: normal
Expansion: "
Breath sounds: "
Passed. Oct 27/02 : 2d Oct 23d

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. 1007 Reaction, acid: Color and Appearance, light yellow clear
Albumen, Heat 0 : Nitric acid 0 : Tanret 0 : Sugar, Fehling's Sol 0 : Bismuth 0 : —
Casts and Crystals, Urates, amor: pus, a few corp: Epithelium, a few cells: Oxalate lime, a few crystals.

GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: vulvitis: vaginitis: endometritis, Cervicitis: retroflexion: purulent leucorrhoea. –
MENSTRUATION,
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 admitted in good physical health: & well-nourished: is depressed & intellect quite markedly weakened: memory is sluggish & poor: Converses freely & has some hallucinations "of hearing": is hypochondriacal: Education is very moderate: Commitment states patient has been dissipated. –

Personal and Medical History of Anna Boe

1902.

This patient was brought here by Dep. E. Johnson, attended by Mrs Fullerton, in fair physical condition, with following history of case. No history of consanguinity or heredity. This is 1st attack: when first symptoms manifested, not stated. Was picked up in Northfield, in a dazed condition. Disease seems stationary: variable and with rational intervals: but these, not regular. Derangement now shown, in that she believes that somebody is in trouble, and talks to the walls and radiators; wrings her hands and "hears voices". Is not disposed to injure others, nor suicidal: no filthy or destructive habits. Was dissipated, at one time. No history of intemperance in patient or parents: nor of any severe disease &c, or head-injury. Was confined at City & County hospital, six weeks. Cause of disease, unknown. Usual treatment. On personal examination, patient talks freely of her troubles, and cannot explain why she talks to inanimate objects.

Oct 13 On admission, was put on W.W. (G.H.N. Rpt. Complexion fair: hair brown: eyes blue: condition of skin normal: no marks, scars or bruises noted: has inguinal hernia: has no vermin; clean: has a full set of teeth: Quiet: Answers questions intelligently.)

Summary of 14 day record dict by Dr O.C. Heyerdale.

Patient admitted October 13-1902 - had large abdominal hernia, very quiet, converses freely, seems melancholy. During first two weeks T. P and R. about normal, regular diet, bowels regular, slept well, patient seems some what demented, converses readily, is dressed and up on ward on the 17th, wanders about in an aimless way, disturbed at times, assists some with the ward work.

Nov 29th While out doors on a walk, patient screamed loudly and used very profane language.

Dec 29th No change. Assists in Center Dining Room.
Patient has a dilated and prolapsed stomach.

Jan. 1st Patient operated upon by Dr. W.J. Mayo.
Gastroenterostomy performed.

Jan 30th Patient recovered nicely from operation.

Personal and Medical History of Margit Guttormson

Whole No. 6214.
Residence, Sheldon Town. ~~A~~ –
Date Admission, 14th October 1902.
Admitted by Dr. R. M. Phelps, hour, 4 10 P.M.
How Sent, L. Budahl, J of P. Houston County.
Sex, Female, Age, 76 (about).
Civil Condition, Single
Children, – Age Youngest Child, –
Occupation, General Housework & father's farming
Degree Education, Common School
Profession of Religion, Yes: Lutheran
Habits, not intemperate
Nativity, Norway: Parents also born there.
Physicians Committing, O. F. Fischer and L. K. Onsgard –
Correspondents, (nephew) Ole Guttormson Houston: – 3 m. – out on farm –

No. for Year, 50.
Insane Relatives, Yes: her sister: was not in an asylum
Cause Exciting, Senility –
Cause Predisposing, probably age
Form, Senile Dementia
Accompanying Bodily Disorder, Internal Strabismus = very defective vision (aged & feeble)
Suicidal or not, – not –
Date of this Attack, Last fall
Duration, about a year –
No. of Attack, 1st –
No. of Admission, 1st –
Age First Attack, 75 – about
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Oct 22 – 1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish: Confused.
MEMORY, Past Events, poor
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull –
REASONING POWER, Ordinary Subjects, –
Special Subjects, –
Own Mental State, Quiet: demented. –
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).
She is too demented to answer questions intelligently
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 Margit Guttormson

PHYSICAL CHARACTERISTICS.

HEIGHT, 4 ft 11 in PRESENT WEIGHT, 100 lbs USUAL WEIGHT, – NUTRITION, poor
WOUNDS, Abnormalities, – Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt
PUPILS, Equality, – Size, – Response to Light, – Accommodation, –
SIGHT, poor
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Strabismus, internal: left eye has corneal opacity –
HEARING, fair –
COORDINATION, Arms, poor Legs, poor ~~Grasp~~, other tests poor –
TREMORS, Hands, fine Tongue, – Facial Muscles, – General, –
PATELLAR REFLEX, – Other Reflexes, –
ARTICULATION, Slurred, – Hesitating, – Slow, –
FACIAL EXPRESSION, Sensibility, –
HEART, Regularity, normal
Strength, Sounds, "
Size, "
Apex Beat, "
Murmurs, none
ARTERIES,
–
LUNGS,
Chest symmetry: Yes
Expansion: fair
Breath sounds: normal
Passed oct 23/02 – 4° oct 23°

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, ℥xxxv 11/4 Sp. g. 1020 Reaction, acid Color Yellow and Appearance, clear –
Albumen, Heat 0: nitric acid 0: Tanret's 0 Sugar, Fehling's sol 0: Bismuth 0: –
Casts and Crystals, Urates amor: Triple Phos: Epithelium a few cells: oxalate lime. a few crystals.

GYNECOLOGICAL EXAMINATION, External genitals normal: patient resisted, so that internal examination not made –
MENSTRUATION,
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 is a case of Senile Dementia: Speaks only Norwegian: is too demented to converse rationally: is fairly quiet & remains in bed, causing very little trouble.

Personal and Medical History of Margit Guttormson

1902.

This patient was brought here by F. H. Evans, attended by Mrs. F. Bowers, in aged and feeble condition, with following history of case. No history of consanguinity: but some of heredity: her sister, was not in an asylum: This is the 1st attack: first symptoms manifested last Fall: first symptoms, in fear of being shot by some one; attempts to run away. Disease seems increasing: no rational intervals: is worse, every other day. Derangement now shown in that she has an idea that her clothes are being made over and sold, or taken away: Talks and sings all night, sometimes, disturbing the rest of the house. Is not disposed to injure others, nor suicidal. Has torn bed-clothes, but nothing else: disposition not to change clothes. Before accession of disease, she accused persons of stealing her clothes. v. No history of intemperance, nor of any severe disease &c, nor head-injury. Was locked in her room, to keep her from running away, nights, & sometimes in the day-time. Supposed cause of the disease, Senility. Treatment, none- Facts learned on personal examination, aged, infirm: internal strabismus. very defective vision. Commitment recommended because of reason 3. section 17.

Oct 14 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair brown: part gray: Eyes hazel: Condition of skin normal: no marks, scars, bruises &c noted: Is dirty: teeth in bad condition: left eye seems somewhat defected: Is stooped-shouldered: Behavior, very resistive: Does not speak English.)-

Summary of 14 day record diet by Dr O. C. Hayerdoer

Patient admitted on ward October 14-1902. bathed and put to bed, resistive, blind in one eye (left one) during 14 days T. P. and R about normal took regular diet, bowels regular, appetite fair, slept good, patient is old and demented, quiet most of the time, at times slightly disturbed and very resistive.

to Feb 1st 1903 Patient very feeble - grows progressively more infirm - is up and dressed a greater part of the time but is inclined to lie about on beds and couches - totters in walking and frequently falls - appetite very poor - bowels inclined to be constipated. Sleeps well at night and dozes a great deal during the day. Cries and is frequently otherwise disturbed - never voluntarily converses and rarely attempts to reply to questions.

See Files.

Personal and Medical History of Anna Miller #2

Whole No. 6216.
Residence, Winona County Minn
Became resident of Minnesota 1858: of County 1858:
Date Admission, 17th October 1902.
Admitted by Dr C. L. Chapple hour, 4.15 P.M.
How Sent, Dr Evance. J of P. Winona County
Sex, Female Age, 70.
Civil Condition, Married
Children, had 2: both dead Age Youngest Child, Dead
Occupation, Housekeeper: husband, a Carpenter.
Degree Education, Common School
Profession of Religion, not a church member
Habits, Patient addicted to intemperance -
Nativity, Philadelphia Pa: father's, Ireland: Mother's, Pa
Physicians Committing, D. A. Stewart and N. V. Lindsay
Correspondents, (Husband) J. H. Miller
Revd T. K. Allen (bro) Lacrosse Wis
Poor-Commissioner of Winona (Mrs Maria A. Boynton) - Winona Minn

No. for Year, 52.
Insane Relatives, none
Cause Exciting, Epilepsy
Cause Predisposing, Senus "chronic"
Form, Epileptic Dementia
Accompanying Bodily Disorder, Epilepsy & Convulsions
Suicidal or not, not -
Date of this Attack, 3 or 4 Years ago
Duration, " " probably
No. of Attack, 1st -
No. of Admission, 1st -
Age First Attack, about 66 -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* October 22-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
- Somewhat Confused -
MEMORY, Past Events, Fair -
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Somewhat dull
REASONING POWER, Ordinary Subjects, Poor -
Special Subjects, Poor -
Own Mental State, Does not appreciate her condition.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
- Depressed -
DELUSIONS, Systematized, "of persecution" Transitory, —
Special Subjects, —
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, Three a four Years
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
not known
Father, Died of Dropsy
Paternal Relatives, —
Mother, Dead
Maternal Relatives, —
Brothers and Sisters, —
2 Children - Dead -
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
- no -
HABITS, Drinking and Smoking, She says "good" -
Commitment states her to be intemperate -
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework.
Detail Date, Duration, and Character of Previous Attack, if any,
— none
Sleep, — Appetite, — Bowels, —
- She says good -

Personal and Medical History of Anna Miller #2

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, 125 # USUAL WEIGHT, — NUTRITION, fair
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, white coating: prompt
PUPILS, Equality, Equal Size, normal Response to Light, good Accommodation, good
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, arcus senilis present
HEARING, Good
COORDINATION, Arms, Good Legs, Good ~~Grasp,~~ other tests good
TREMORS, Hands, No Tongue, fine tremor Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, Yes Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, —
Strength, Sounds, —
Size, —
Apex Beat, —
Murmurs, normal
ARTERIES,
LUNGS,
Chest symmetry: normal
Expansion: —
Breath sounds. —
Passed Oct 22/02. LP. Oct 22/02

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, ℥xxv ½ Sp. g. 1018 Reaction, neutral Color and Appearance, Yellow Cloudy
Albumen, Heat 0: nitric acid 0: Tanret's 0: Sugar, Fehling's Sol. 0 — —
Casts and Crystals, Urates amor: pus, a few corp: Epithelium, a few cells: oxalate lime, a few crystals

GYNECOLOGICAL EXAMINATION, Perinaeum slightly lacerated: mucous membrane of urethra congested: cervix disappeared: uterus atrophied -
MENSTRUATION,
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's condition is one of Epileptic Dementia: is very depressed: Cries considerably: General health good: talks freely: Shows considerable dementia: Commitment states that she is intemperate. -

Personal and Medical History of Anna Miller #2

1902

This patient was brought here by M. J. Lins, attended by Mrs Maria A. Boynton and August Case, in poor physical condition, with following history of case. No history of consanguinity, nor of heredity. This is 1st attack: first symptoms manifested 3 or 4 years (ago): Epileptic seizures: General dementia: Disease seems increasing. Not variable; no rational intervals: not regular: Derangement now shown by General dementia; excitable and incoherent. Is not disposed to injure others; nor suicidal: propensity not active: Is of filthy and destructive habits: previously, showed peculiarities: religious fervor: insane actions on street. Patient addicted to intemperance. Has been subject to Epilepsy and Convulsions. Has not been restrained or confined. Supposed cause of the disease is Epilepsy. No treatment has been pursued. On personal examination, is excitable, erratic and incoherent. —.—

Oct 17 On admission, was put on T.W. (G.A.N. Rpt: Complexion dark: hair brown: eyes brown: Condition of skin rough: no marks, scars or bruises noted: Is dirty: Teeth: two upper roots: four lower roots: Behavior quiet: talks quite intellectually). ——— . —

Summary of 14 day record dictated by Dr O. C. Heyerdale.

Patient admitted in infirmary ward Oct 17th 1902 bathed and put to bed, during the first two weeks T. P. and R about normal: took regular diet, bowels regular slept well answers questions freely! seems to be rather feeble and somewhat demented, takes her nourishment well, is rather melancholy and weeps considerably. patient up on the ward on the 23rd took daily out of door exercise thereafter is quiet and agreeable and unoccupied.

Nov 27th Wt. 138½ # Patient is quite agreeable on the ward. Is old and feeble. Somewhat irritable. Converses readily and freely. Takes out door exercise.

Dec. 15th Visited by husband.

Dec 16th Taken home by husband. Somewhat improved both mentally and physically.

Personal and Medical History of Nora Healy

Whole No. 6219

Residence, St Paul, Minn

Became resident of State 45 years ago: of County 7 Years.

Date Admission, 22d October 1902

Admitted by Dr R.M. Phelps hour, 7⁰⁰ P.M

How Sent, E.W. Bazille, Jof P. Ramsey County.

Sex, Female Age, 48 Years

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, School teacher — (for 18 years) — father; farmer

Degree Education, Common School —

Profession of Religion, Catholic

Habits, not intemperate

Nativity, Mass: parents born in Ireland.

Physicians Committing, Dr Wellington Archibald and Chas. J. Meade

Correspondents, Miss Mary Healy
207½ W. 7th Street
St Paul

No. for Year, 55

Insane Relatives, no: (Sister died here) —

Cause Exciting, Brooding over fear of operation —

Cause Predisposing, probably heredity

Form, Melancholia

Accompanying Bodily Disorder, (hysterectomy at St Joseph's Hosp.

Suicidal or not, not, but tried to jump from window in Hosp.

Date of this Attack, Sept 15th 1902

Duration, — About 5 weeks —

No. of Attack, 2nd (one in 1892) —

No. of Admission, 1st here (was in St Joseph's Hosp).

Age First Attack, About 38 Years.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. O.C. Heyerdale *Date of* October 29-1902

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, poor

Own Mental State, appreciates, to some extent, her condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

— Depressed —

DELUSIONS, Systematized, — Transitory,

~~Special Subjects~~, Imagines she is going to die and that she is being persecuted & poisoned —

HALLUCINATIONS, —

ILLUSIONS, —

SUMMARY, —

HISTORICAL.

LENGTH INVASION, Several weeks.

ONSET, Gradual or Sudden, —

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

—

Father, Dead

Paternal Relatives, —

Mother, Living —

Maternal Relatives, —

Brothers and Sisters, 1 brother: 2 sisters.

children — none

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

—

HABITS, Drinking and Smoking, Good

HEADACHES, VERTIGO, OR CONVULSIONS, No —

OCCUPATION, Healthy or not, Housework

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

7 years ago: duration 3 years

Sleep, — Appetite, — Bowels, —

Personal and Medical History of Nora Healy

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in PRESENT WEIGHT, 136 lbs USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, none Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, prompt: Coated —

PUPILS, Equality, yes Size, normal Response to Light, Good Accommodation, Good —

SIGHT, good

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

HEARING, Good

COORDINATION, Arms, good Legs, good ~~Grasp~~, other tests good

TREMORS, Hands, — Tongue, fine tremor Facial Muscles, — General, —

PATELLAR REFLEX, present Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION,

HEART, Regularity, regular

Strength, Sounds, Strong

Size, normal

Apex Beat, normal

Murmurs, none

ARTERIES,

Slightly Sclerotic

LUNGS,

Chest Symmetry: yes

Expansion: Good

Breath Sounds: normal

Passed Oct 23/02. 2d Oct 23d

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. 1022 Reaction, Acid Color and Appearance, brownish yellow Cloudy —

Albumen, Heat 0; nitric acid 0; Tanret's 0; Sugar, Fehling's sol 0; Bismuth 0: —

Casts and Crystals, Urates amor: mucus, a few bands: pus, a few corp: Epithelium a few cells.

GYNECOLOGICAL EXAMINATION, External haemorrhoids: uterus enlarged, hard. Endometritis; cervicitis; external genitals normal. —

MENSTRUATION,

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 admitted in rather poor physical condition & rather poorly nourished. She is very melancholy & expresses delusions freely: fears that she is going to die & that she is being poisoned. Was recently at St Joseph's hospital, St Paul, where she underwent an abdominal operation for fibroid tumor. She moans a great deal & frets & worries Constantly. —

1902

This patient was brought here by Emanuel Johnson, attended by Mary Healy, in fair physical condition, with following history of case. No history of consanguinity: sister died here: this is not 1st attack: one occurred in 1892: duration 3 years: was not sent to hospital. First symptoms of this attack manifested Sept 15 1902 fear of dying from a tumor: very restless: Disease seems increasing: not variable: no rational intervals: Derangement now shown in that she says "was given poison in St Joseph's Hospital": tried to jump from window in hospital:— Is not disposed to injure others: has not attempted suicide (but see above): No filthy or destructive habits: No previous peculiarities noted: No history of intemperance: Had large fibroid tumor: has not been restrained or confined. Supposed cause of the disease is brooding over fear of operation: hysterectomy at St. Joseph's Hospital

Oct 22 On personal examination, is very restless: says "has been poisoned"— On admission, was put on T.W. (G.H.D. Rpt: Complexion dark: hair brown, partly gray. eyes blue: Condition of skin normal: burn mark on left cheek: scars on abdomen; (hysterectomy): Eruptions on forehead: no ulcers or hernia: bruise on left leg: is clean. Patient has 11 upper + 11 lower teeth: Is quiet: has delusions "of poisoning".)—

Summary of 14 day record dictated by Dr O.C. Heyerdale

Patient admitted on infirmary west Oct 22-1902 bathed and put to bed, quiet in behaviour answers questions quite readily is very melancholy awake most of the night during first 14 days T. P. and R., about normal took regular diet very sleepless, given hypnotics each night for sleep, bowels regular by aid of cathartics. Patient is very disagreeable is out of bed a great deal of the time. Very resistive at times attacks the nurses has many delusions, imagines that she is to be put to death, moans a great deal.

Nov. 12th Patient up and about ward daily. Bowels regular. Very resisting; and very noisy during night and also at times during the day. Is very irritable and disagreeable in manner.

Annoys both patients and nurses by constantly asking the same questions over and over again. Expresses many delusions of persecution. Thinks she is going to be put to death. Very much disturbed.

Nov 24th No change. Wt 119#

Jan 7th 1903 Patient vicious in habits: hands kept in mittens. Very disturbed mentally and very noisy. Constantly annoys every one about her. by asking the same questions over and over again. Attacks nurses and patients.

Personal and Medical History of Mary Jenson

Examination made on 15th October 1902. when she was Committed to the "Detention Hospital"

Whole No. 6220.
Residence, St Paul, Minn
Became resident of State 22 years ago: of County 1880.
Date Admission, 22d October 1902.
Admitted by Dr R M Phelps hour, 7.00 Pm
How Sent, E. W. Bazille, Joff. Ramsey County.
Sex, Female Age, 40 years
Civil Condition, married
Children, one Age Youngest Child, 14 years
Occupation, Housewife: husband, a Machinist.
Degree Education, Common School –
Profession of Religion, Catholic –
Habits, Not Intemperate.
Nativity, Austria: Parents also born there.
Physicians Committing, P. B. Cook and C. T. Miller
Correspondents, (Husband) Aug. Jensen
533. W. 7th St.
St Paul

No. for Year, 56.
Insane Relatives, none
Cause Exciting, unknown
Cause Predisposing, not stated
Form, Acute melancholia
Accompanying Bodily Disorder, Neurasthenia: anaemic
Suicidal or not, not –
Date of this Attack, not stated
Duration, " " "
No. of Attack, 1st –
No. of Admission, 1st here (was at Detention Hosp.)
Age First Attack, not given
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. OC Heyerdale *Date of* October 29-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quick: Confused –
MEMORY, Past Events, poor
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: illusive
REASONING POWER, Ordinary Subjects, —
Special Subjects, poor
Own Mental State, appreciates that she is not just right, mentally.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
– Depressed –
DELUSIONS, Systematized, "of persecution" Transitory, Delusions
Special Subjects, —
HALLUCINATIONS, Yes – of sight &c.
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, not known –
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). as child —
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any, —
Sleep, — Appetite, — Bowels, —

Personal and Medical History of Mary Jenson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 in PRESENT WEIGHT, 131# USUAL WEIGHT, — NUTRITION, fair
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, —
PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, good –
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, – Good –
COORDINATION, Arms, good Legs, good Grasp, —
TREMORS, Hands, none Tongue, none Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, normal –
Strength, Sounds, Strong
Size, normal
Apex Beat, "
Murmurs, normal
ARTERIES,
normal
LUNGS,
Chest symmetry: Yes
Expansion: good
Breath sounds: normal
Passed Oct 30 /02. 2d – Oct 30 /02

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, acid – Color and Appearance, reddish yellow —
Albumen, Heat 0: nitric acid 0: ; Tanret's, a trace Sugar, Fehling's sol 0: Bismuth 0: —
Casts and Crystals, Ammonium & amm urates: pus, a few corp: Epithelium, a few cells –

GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: uterus fibroid: enlarged & hard: Cervix lacerated: and cystic: enlarged: endometritis; cervicitis; leucorrhoea. –
MENSTRUATION,
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 admitted in good physical condition & fairly well nourished: She converses freely but expresses, freely, many delusions of a "persecutory type" & has also hallucinations of sight. She thinks she is being abused in many ways & also poisoned..

Personal and Medical History of Mary Jenson

1902

This patient was brought here by Geo. Krieger, attended by Mrs S. Lundvoll, in fair physical condition with following history of case. As to any Consanguinity, not known: No insane relatives: This is 1st attack: when first symptoms manifested, not stated: they were by Insomnia & delusions. Disease seems increasing: not variable: No rational intervals: Derangement now shown by delusions and hallucinations upon religious subjects. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. Has neurasthenia. No history of intemperance, nor of any severe disease &c, nor head-injury: Has not been restrained or confined: Cause of disease unknown: Treatment, none. On personal examination patient is anaemic: despondent expression of face.——

Note: Was examined on 15th October 1902, when she was committed to the "Detention Hospital": and not having improved there, is now committed here.——

Oct 22 On admission, was put on T.W. (G.H.N. Rpt: Complexion fair: hair light: eyes blue: condition of skin normal: no marks, eruptions or bruises noted: first finger of right hand has a scar. Is clean: Patient has 4 upper and 9 lower teeth, and an upper plate. Behavior quiet: Answers questions intelligently).——

Summary of 14 day record dictated by Dr O. C. Heyerdale. Patient admitted on infirmary west Oct 22-1902 bathed and put to bed, restless during night crying a great deal, During 2 weeks T. P. and R. about normal, took regular diet, bowels regular, given occasional hypnotic for sleep during first week she was quite disturbed, patient rather maniacal noisy and scolds considerable is disagreeable and resistive is rather intelligent

to Feb 1st 1903 Patient, aside from her delusions of persecution, converses intelligently. At times she is quite disagreeable and imagines she has numerous ailments - complains that the nurses do not treat her well. She works irregularly, takes exercise, attends chapel and amusements. Physically she is quite well, menstruates regularly, has a good appetite and sleeps well - Habits and appearance cleanly and neat.

See Files.

Personal and Medical History of Mary Ellestad

Whole No. 6221.
Residence, Mabel, Minn
She has been a resident of Fillmore Co. since birth
Date Admission, 23rd October 1902
Admitted by Dr. O. C. Heyerdale hour, 2:00 p.m.
How Sent, E. V. Farrington, Dept. Fillmore Co
Sex, Female Age, 34.
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, School Teacher; father's farmer
Degree Education, Common School & State Normal.
Profession of Religion, Lutheran
Habits, not intemperate
Nativity, Minnesota: parents born in Norway
Physicians Committing, J. H. Phillips and Geo. A. Love
Correspondents, (Bro). G. B. Ellestad. Lanesboro: Minn.

No. for Year, 57.
Insane Relatives, none
Cause Exciting, Dont know
Cause Predisposing, previous attack
Form, Acute Melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not —
Date of this Attack, about 2 weeks ago
Duration, " " —
No. of Attack, 2nd —
No. of Admission, 2nd — (here before 1897–'8) about 5 years ago
Age First Attack, about 28 years
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* October 30 – 1902

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, —
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, Does not converse
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
– not known –
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Not any for several years.
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, — Appetite, — Bowels, —

Personal and Medical History of Mary Ellestad

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, 131 lbs USUAL WEIGHT, — NUTRITION, —
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, coated –
PUPILS, Equality, yes Size, normal Response to Light, good Accommodation, good
SIGHT, seems good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, seems good
COORDINATION, Arms, fair Legs, fair ~~Grasp~~, other tests, fair
TREMORS, Hands, — Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, — Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, normal
Strength, Sounds, strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: yes
Expansion: good
Breath sounds: good

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,

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact; rather rigid: uterus adherent: (very resistive; so could not make complete examination) –
MENSTRUATION,
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 admitted in fair physical health, but poorly nourished: Is depressed: does not converse, but little: Is very resistive: is irrational.

Personal and Medical History of Mary Ellestad

1902

This patient was brought here by brother, G.B. Ellestad, attended by sister Caroline Ellestad, in fair physical condition, with following history of case. No history of consanguinity or heredity. This is not 1st attack: one occurred about 5 years ago: duration about 14 months when she was sent to Rochester Hospital: came back much improved. First symptoms of this attack manifested about 2 weeks ago: has delusions: talks incoherently: is very restless: Disease appears increasing: variable & with rational intervals; if regular, do not know. Derangement now shown mainly on subject of marriage: and religion. Is not disposed to injure others, nor suicidal; no filthy or destructive habits. No previous peculiarities noted, only very easily irritated. No history of intemperance nor of any severe disease &c, or head injury. Was ⊗ confined at Rochester, about 14 months. Dont know cause of the disease: Treatment only at Rochester. On personal Examination patient sits very quiet. Commitment recommended because her condition is such as to require regular aid & assistance, while under legal restraint. She has been a resident of Fillmore County, since birth. ⊗ Note: 2nd admission: herebefore from July 23-1897 to Sept 28-1898, and discharged February 8-1899, much improved: (For further particulars see Vol 34 page 285 No 4823). —

Oct 23 On admission, was put on T.W. (G.H.N. Rpt. Complexion dark: hair brown: eyes blue: condition of skin normal: no marks, scars, bruises &c noted: is dirty: has 15 upper and 11 lower, with 3 gold crowns. Quiet: talks intelligently: says she knows she is not real well, mentally).

Summary of 14 day record dictated by Dr O. C. Heyndale. Patient admitted on infirmary ward Oct 23-1902 bathed and put to bed quiet and melancholy in behaviour will answer questions, during first two weeks T. P. and R about normal took regular diet, bowels regular slept fairly well at night very restless during the day time and out of bed a great deal. is resistive and obstinate in her manner and behaviour.

to Feb 1st 1903 Patient from the first showed resistance to efforts made in caring for her - depressed, reticent, never speaking except in whispers - expresses religious delusions.

Physically her condition is poor, the existence of anaemia, rapid pulse, and a continuous temperature indicate incipient tuberculosis. Her appetite is rather poor, bowels regular. She takes out of door exercise but takes no interest in any kind of work - has attempted to escape from the ward at the opening of doors. Habits cleanly, appearance careless.

See Files.

Personal and Medical History of Lizzie Ormsby

Whole No. 6222.
Residence, St Paul. Minn
Resident of State 37 years: of County 37 years-
Date Admission, 25th October 1902. –
Admitted by Dr O.C. Heyerdale hour, 9 15 P.M.
How Sent, E.W. Bazille, Joff. Ramsey County
Sex, Female Age, 37 years
Civil Condition, Married.
Children, Two Age Youngest Child, ten years
Occupation, Housewife: husband's machinist
Degree Education, Common School
Profession of Religion, Ger. Lutheran
Habits, not intemperate
Nativity, St Paul, Minn: parents born in Germany.
Physicians Committing, A.W. Dunning & C. Eugene Riggs
Correspondents, (Husband): E. G. Ormsby
656 Lafond St.
St Paul Minn

No. for Year, 58.
Insane Relatives, No: sister puerperal Insanity
Cause Exciting, Unknown
Cause Predisposing, probably heredity
Form, Acute Melancholia
Accompanying Bodily Disorder, fine tremor of hands
Suicidal or not, Yes: by knife: propensity active now
Date of this Attack, July 1902
Duration, Some 3 months
No. of Attack, 1st ——
No. of Admission, 1st –
Age First Attack, 36 past.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale – *Date of* Oct 30-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
- Clear -
MEMORY, Past Events, fairly good
Recent Events, " Special Subjects, "
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,
Slightly 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).
Sister had an attack of "puerperal Insanity"-Duration short
Father, Dead –
Paternal Relatives, ——
Mother, Living: (well) –
Maternal Relatives, ——
Brothers and Sisters, 5 Sisters – 2 brothers
2 children —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Typhoid at 29 years -
HABITS, Drinking and Smoking, ——
HEADACHES, VERTIGO, OR CONVULSIONS, ——
OCCUPATION, Healthy or not, Housework -
Detail Date, Duration, and Character of Previous Attack, if any,
——
Sleep, poor Appetite, —— Bowels, —

Personal and Medical History of Lizzie Ormsby

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 3in PRESENT WEIGHT, 120 lbs USUAL WEIGHT, — NUTRITION, fair
WOUNDS, Abnormalities, —— Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: white coating –
PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, good
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Normal -
HEARING, good
COORDINATION, Arms, Good Legs, Good ~~Grasp~~, other tests, good
TREMORS, Hands, fine: marked Tongue, fine Facial Muscles, —— General, ——
PATELLAR REFLEX, —— Other Reflexes, ——
ARTICULATION, Slurred, —— Hesitating, —— Slow, ——
FACIAL EXPRESSION, Sensibility, ——
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: external haemorrhoids: uterus retracted: adherent, enlarged & hard: endometritis, cervicitis, leucorrhoea. -
MENSTRUATION,
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 admitted in good physical health & fairly well-nourished: She converses freely & expresses no delusions: but is mildly depressed in manner. –

Personal and Medical History of Lizzie Ormsby

1902

This patient was brought here by E. G. Ormsby, attended by sister Fredricka Schultz in fair physical condition, with following history of case. No history of consanguinity. — As to insane relatives, a sister: Puerperal Insanity. This is 1st attack: first symptoms manifested July 1902: depressed, agitated, apprehensive. Disease seems increasing: — variable & with rational intervals: but these not regular. Derangement now shown by Melancholia. Is not disposed to injure others. Has attempted suicide?, with knife: propensity active now. No filthy or destructive habits: no previous peculiarities noted: no history of intemperance: nor of any severe disease &c, or head injury: has not been restrained or confined. Cause of disease unknown: home treatment: On personal examination, the following learned: knee jerk exaggerated: fine tremor of hands: — . —

Oct 25 On admission, was put on IW. (G.H.N. R'pt. Complexion dark: hair brown: eyes gray. Condition of skin normal: no marks scars, bruises &c noted: Is clean: Patient has 12 upper teeth, and 2 gold crowns and 13 lower & 1 gold crown: behavior quiet: talks intelligently). —

Summary of 14 day record dictated by Dr O.C. Hegerdale.

Patient admitted on infirmary ward Oct 25-1902 bathed and put to bed, during first 14 days T. P. and R about normal or slightly above, took regular diet, patient very melancholy and agitated, very restless, slept fairly well at night, assists some with the work about the ward, takes regular out of door exercise.

Oct 26th Visited by husband and sister.

Nov 10th Patient is tidy in habits and appearance: takes nourishment well: Takes out door exercise. Patient is melancholy and very delusional about her family and also expresses delusions of persecution. Thinks she is to be put to death.

Nov 19th Visited by a minister. Wt 105 $\frac{3}{4}$ #

Dec 21st Patient visited by relatives. Very melancholy and agitated and delusional. Imagines she is to be killed, etc.

Jan 30th Patient somewhat more quiet, although at times becomes very melancholy.

Personal and Medical History of

Personal and Medical History of Mamie F. Murray

Whole No. 6228.
Residence, Faribault, Minn
Resident of State since birth: of County 2 mos ago.
Date Admission, 1st November 1902.
Admitted by Dr. O. C. Heyerdale hour, 6 45 P.M.
How Sent, E. W. Bazille, Jailer. Ramsey County
Sex, Female Age, 31 years
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Supervisor in School for Deaf - father's farm.
Degree Education, Common school —
Profession of Religion, R. Catholic.
Habits, Not Intemperate
Nativity, Minnesota: father's, Ireland: mother's, New York
Physicians Committing, Arthur Sweeney and Edgar T. Schmidt
Correspondents, John F. Murray
R.F.D No 5. Faribault, Minn

No. for Year, 64.
Insane Relatives, none
Cause Exciting, Financial troubles —
Cause Predisposing, not stated
Form, Ac. Melancholia
Accompanying Bodily Disorder, Sleeplessness —
Suicidal or not, attempted suicide & propensity active
Date of this Attack, In July 1902
Duration, — 3-4 months —
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, — 31 — (about)
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Nov 3-1902

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, —
Imagines that she is going to die.
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, Living —
Maternal Relatives, —
Brothers and Sisters, —
children — none
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Says "no" —
HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Supervisoress at School for Deaf at Faribault —
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, poor Appetite, poor Bowels, Constipated.

Personal and Medical History of Mamie F. Murray

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 in PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, fair
WOUNDS, Abnormalities, no Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: white coating
PUPILS, Equality, yes Size, large Response to Light, Good Accommodation, poor
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good Legs, good Grasp, other tests good
TREMORS, Hands, fine Tongue, fine Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, Elbow, wrist, jaw
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, Normal
Apex Beat, Normal
Murmurs, None
ARTERIES,
Normal
LUNGS,
Chest symmetry: yes
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact: uterus enlarged, retroflexed, free: slightly prolapsed; endometritis, cervicitis, leucorrhoea.
MENSTRUATION,
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 admitted in fair physical condition; fairly well nourished: Is very melancholy & expresses many morbid ideas. Imagines she is going to die. Sits about in a dejected attitude & takes no interest in her surroundings. Is well educated & is refined in manner & behavior. —

Personal and Medical History of Mamie F. Murray

1902

This patient was brought here by Dep. E. Johnson, attended by Mrs Fulton, in poor physical condition, with following history of case. No history of consanguinity or heredity. This is first attack: first symptoms manifested in July 1902: by depression of spirits, sleeplessness and worry over money: Disease seems increasing. variable & with rational intervals, but these, not regular. Derangement now shown in that she believes that she is dying: will not eat without forcing, and does not sleep or talk. Is not disposed to injure others. Has attempted suicide, by drinking Tr. Ferri. Chlor. with suicidal intent: propensity active now: no disposition to filthy or destructive habits. No history of any previous peculiarities, nor of intemperance, nor of any severe disease &c, or head-injury: has not been restrained or confined. Supposed cause of disease is financial troubles. Treatment has been tonic and sedative, without result. On personal examination, patient appears melancholy: says "she is dying": takes no interest in her surroundings.—

Nov 1 On admission, was put on T.W. (G. H. N. R'pt: Complexion dark: hair brown: eyes brown: Condition of skin rough & pimply: no marks scars bruises &c noted: Is clean: Teeth: upper 13: Lower 14: Behavior quiet: Expresses delusions.).—

Summary of 14 day record dictated by Dr O.C. Heyerdale Patient admitted on infirmary west Nov 1,-1902 bathed and put to bed, during first two weeks T. P. & R. about normal took regular diet bowels regular by aid of laxatives, patient very melancholy, is quiet will answer questions freely, expresses many delusions especially of religious nature thinks she has done great wrongs and will not be saved. Asks to see the Priest.

Nov 26th Patient accidentally secured the scissors from the clothes-room and cut off about a foot or more of her hair which was long and thick. Wt. 113½# Patient assists some with the work. Dec. 1st. Father Riordan visited her.
Very melancholy. Dec. 30th-31st Visited by brother.

Feb 1st 1903 Patient operated upon at 10 A.M. by Dr. W. J. Mayo assisted by Dr. A. C. Heyerdale. Gastroenterostomy performed, by means of a Mayo Robson bone bobbin. Reaction good. Patient made a good recovery. Improved thereafter physically although mentally was very much disturbed for a considerable time.

See files.

Personal and Medical History of

Personal and Medical History of Avelys Z. Strong

Whole No. 6229.
Residence, Steele County, Minn
Date Admission, 5th November 1902 –
Admitted by Dr. L. A. Linton hour 4.40 P.M.
How Sent, James Hunter, Jof P. Rice County
Sex, Female Age, 48
Civil Condition, Single.
Children, none Age Youngest Child, –
Occupation, none special: father farmer – now dead.
Degree Education, not to any extent
Profession of Religion, not a church member
Habits, not intemperate
Nativity, Black-Earth Wis: father's, New York: mother's, Michigan.
Physicians Committing, J. B. White and W. P. Baldwin
Correspondents, Mrs Emma Strong (mother) Owatonna Minn

No. for Year, 65.
Insane Relatives, Father + father's sister insane
Cause Exciting, Heredity with Epilepsy –
Cause Predisposing, Heredity
Form, Epilepsy
Accompanying Bodily Disorder, An Epileptic
Suicidal or not, not
Date of this Attack, 6 months ago –
Duration, " " —
No. of Attack, not 1st – Monthly for past 6 months –
No. of Admission, 1st (was at School for Feeble minded)
Age First Attack, 47 past.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton — *Date of* Nov 11-1902

MENTAL CHARACTERISTICS.

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

Nothing determined: Patient doesn't converse –

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). Paternal grandfather died of tuberculosis: two maternal great-grandmothers died of Cancer: one maternal great-uncle died of apoplexy
Father, Died of softening of brain + had cancer of stomach
Paternal Relatives, one uncle died, cancer of rectum; " aunt " insane –
Mother, Living –
Maternal Relatives, 3 aunts died in child-birth –; one uncle, pneumonia –
Brothers and Sisters, 5 sisters + 3 brothers living: one died of typhoid, another of Diptheria
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Said to have fallen on ice, when about 3 years old: has had Convulsions, increasing in number + severity, ever since.
HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, yes yes yes -
OCCUPATION, Healthy or not, Light housework at times.
Detail Date, Duration, and Character of Previous Attack, if any, —
Sleep,s well Appetite, Good Bowels, regular.

Personal and Medical History of Avelys Z. Strong

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3½ in PRESENT WEIGHT, 156½ lb USUAL WEIGHT, — NUTRITION, Good
WOUNDS, Abnormalities, None
Condition of Skin, Normal, with exception of bruises + scratches self inflicted. —
TONGUE, Coatings, Promptness of Movement, would not open mouth –
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, apparently good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Apparently Good
COORDINATION, ~~Arms~~, Could not determine; ~~Legs~~, patient too resistive ~~Grasp~~, and violent –
TREMORS, Hands, none Tongue, none Facial Muscles, none General, None
PATELLAR REFLEX, exaggerated Other Reflexes, Elbow + wrist
ARTICULATION, Slurred, — Hesitating, and stammering Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, Normal
Apex Beat, Normal
Murmurs, none –
ARTERIES, Normal
LUNGS,
Chest Symmetry: fine
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact: uterus retro-flexed, adherent + fibroid tumor involving.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics -
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 very noisy, violent + resistive, since admission. Impossible to do much of anything with her: kept in restraint-sheet, part of the time: at other times, will not retain clothing: tears everything off, unless kept under influence of hypnotics. Does not converse or answer questions: Grunts + makes noises like an animal: although, when at her best, seems to understand what is said to her –

Personal and Medical History of Avelys Z. Strong

1902

This patient was brought here by A. R. T. Wylie, attended by Emma Strong, in good physical condition, with following history of case. No Consanguinity— As to heredity, father & father's sister are insane. This is not 1st attack: has had an attack monthly, for past 6 months: duration, 3 to 5 days, at first; later, almost Continuous Was confined to "State School for F. M." at Faribault: has had no treatment for her insanity. First symptoms of this attack manifested by being hard to Control at home, with tendency to run away. Disease seems increasing: variable:— has more or less rational periods, between attacks: attacks violent at Menstrual periods. Derangement now shown in that she is very violent, at times, especially toward females; continually talking about her folks, but incoherently— Is disposed to injure others, but not suicidal: is of filthy and destructive habits— As to any previous peculiarities, have no early data: No history of intemperance— Is an Epileptic: was isolated at State School, only during violent attacks. Supposed cause of disease is heredity with Epilepsy. Treat for Epilepsy only.— On personal Examination, the following noted: peculiar physiognomy.— Incoherence of Speech: not prompt in answering questions. Has an ovarian tumor, probably cystic. ——

Nov 5 On admission, was put on T.W. (G. H. N. Rpt: Complexion dark: hair brown: eyes blue: Condition of Skin, normal: small scar on right Cheek and left arm: several small sores on right leg: bruises on both limbs: is clean: Teeth: lower 16: upper 10 and 2 roots. Quiet: answers some questions readily.)—

Summary of 14 day record dictated by Dr L. A. Linton

Patient admitted on ward Nov 5 bathed and put to bed. extremely restive scar noted under left arm and one on left cheek small bruise and several small open sores on different parts of the body; patient was restless violent and disturbed so that it became necessary to confine her in restraint sheet; troubled with insomnia required hypnotics; appetite poor on regular diet; Temperature during first two weeks ranged from normal to 100^{3} pulse 74 to 98 Respiration was 20. Became quieter and at times would answer questions sensibly. During 12 and 13 somewhat more agreeable but slept at times uneasy; dressed and up on ward on the 15th was given a liquid diet and at the end of two weeks slept much more better; bowels are regular; habits and appearance are much more neat than when admitted; usually answers questions

Dec 9th Patient is an epileptic. Had convulsion. Very resistive. Untidy in habits and appearance; Very disagreeable. At times violent and noisy. Attacks those about her.

Jan 23rd Visited by sister. Jan. 25-30th Patient pugnacious Broke a chair. Was extremely noisy.

Personal and Medical History of

Personal and Medical History of Minnie Eichhorn

Whole No. 5233.
Residence, Sumner Township -
Resident of Fillmore County for last 5 years past.
Date Admission, 9th November 1902.
Admitted by Dr. O. C. Heyerdale hour, 12 P.M.
How Sent, E. V. Farrington, J of P. Fillmore Co.
Sex, Female Age, 47 Years
Civil Condition, Single -
Children, — Age Youngest Child, —
Occupation, Housework: father, a farmer.
Degree Education, Can read & write -
Profession of Religion, Yes: M. E.
Habits, not intemperate -
Nativity, Germany: parents also born there.
Physicians Committing, J. H. Phillips and W. B. Grinnell
Correspondents, (Bro-in-law) Wm Flathers
Stewartville, Minn

No. for Year, 69.
Insane Relatives, None
Cause Exciting, Dont know
Cause Predisposing, previous attack -
Form, Acute Melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not —
Date of this Attack, about 6 weeks ago.
Duration, " " —
No. of Attack, 2nd (one about 12 years ago)
No. of Admission, 1st
Age First Attack, about 35 -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Nov 12 - 1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quick
MEMORY, Past Events, good
Recent Events, good Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: illusive.
REASONING POWER, Ordinary Subjects, —
Special Subjects, —
Own Mental State, Does not appreciate her mental Condition.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
- normal -
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
has many delusions, especially of a hypochondriacal nature.
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,
—
Born in Germany Dec 5 - 1855 -

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 sisters: 3 brother
Children - Single
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Rheumatism, not severe, at times.
HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, has some headaches: says she had "fits" when young -
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, fair Appetite, Good Bowels, Constipation.

Personal and Medical History of Minnie Eichhorn

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 2 in PRESENT WEIGHT, 152 lbs — USUAL WEIGHT, NUTRITION, good
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated white: prompt.
PUPILS, Equality, yes Size, normal Response to Light, Good Accommodation, good
SIGHT, poor
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good — Legs, good Grasp, other tests good -
TREMORS, Hands, fine Tongue, fine Facial Muscles, — General, —
PATELLAR REFLEX, Exaggerated. Other Reflexes, Elbow: wrist: Jaw Jerk.
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, None -
ARTERIES,
normal
LUNGS,
Chest symmetry: ✓
Expansion: ✓
Breath 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,

GYNECOLOGICAL EXAMINATION, external genitals normal: external haemorrhoids: hymen intact: uterus normal in position, enlarged, fee: Cervicitis, endometritis, leucorrhoea.
MENSTRUATION,
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 admitted in good physical condition & well nourished. Answers questions freely and readily & intelligently, except along the line of her delusions. She imagines that she has numerous pains & aches & that she is not well. Is hypochondriacal. Memory seems good - Has fairly good education. -

Personal and Medical History of Minnie Eichhorn

1902 This patient was brought here by Wm Flathers, attended by Mrs Frances Voeght. in good physical condition; with following history of case. No history of Consanguinity, or heredity. This is not 1st attack: one occurred about 12 years ago. duration, about six weeks. First symptoms of this attack manifested about six weeks ago: (in what way, is not stated). Disease seems increasing: not variable. no rational intervals: Derangement now shown in that she has delusions in regard to her health, insurance, and various other matters. Is not disposed to injure others nor suicidal: no filthy or destructive habits. No history of any previous peculiarities, nor of intemperance, nor any severe disease or, a head-injury: has not been restrained or confined. Don't know cause of the disease. Treatment, none. On personal examination, the following learned; viz: patient has delusions on various subjects; especially her health and insurance matters. Commitment recommended, because her disease is of such a nature as to require regular aid & assistance, while under legal restraint. She is now and has been a resident of Fillmore County for last 5 years past. ——

Nov 9 On admission, was put on T.W. (G.H.N. Rpt: Complexion light: hair light: eyes blue: Condition of skin normal: & clean: Teeth: upper 14: lower 16: in bad condition Behavior quiet: Expresses delusions). —— " ——

Summary of 14 day record dictated by Dr O. C. Kryerdaler Patient received on infirmary ward bathed and put to bed Nov 9-1902 during first two weeks T. P. and R. about normal took regular diet bowels regular. patient is very quiet in manner, converses freely, is delusional takes regular out of door exercise otherwise unoccupied

to Feb 1st 1903 Patient is physically quite well, appetite is good, bowels regular, sleeps well, takes exercise but thinks she is not strong enough to do any kind of work. Is inclined to be indolent and apathetic. In habits and personal appearance cleanly and neat. She is quiet and converses intelligently.

Dec 1st weight 147 lbs
" 3 visited by brotherinlaw.
" 12 " " friends
" 15 " " sister and brotherinlaw.

See Files.

Personal and Medical History of

Personal and Medical History of Josephine Proulx

Examination made on 5th Nov. 1902, when she was Committed to the "Detention Hospital" –

Whole No. 6234.
Residence, White Bear, Minn
Resident of State 20: of County 1897. –
Date Admission, 11th November 1902
Admitted by Dr. O. C. Heyerdale hour, 7 15 pm
How Sent, E. W. Bazille, J of P. Ramsey County
Sex, Female Age, 20.
Civil Condition, single
Children, none Age Youngest Child, –
Occupation, Servant Girl: father a farmer.
Degree Education, Common School –
Profession of Religion, R. Catholic.
Habits, – not intemperate –
Nativity, Centreville, Minn: Parents: Canada.
Physicians Committing, S. O. Francis and J. E. Porter
Correspondents, none given in papers.

No. for Year, 70.
Insane Relatives, none
Cause Exciting, Disappointment in love –
Cause Predisposing, not given
Form, acute mania
Accompanying Bodily Disorder, none mentioned –
Suicidal or not, not. –
Date of this Attack, October 31 – 1902.
Duration, – 11 Days –
No. of Attack, 1st. –
No. of Admission, 1st (was in Detention Hosp.) –
Age First Attack, – 20 –
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Luiton *Date of* Nov 17 – 1902.

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,
REASONING POWER, Ordinary Subjects,
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

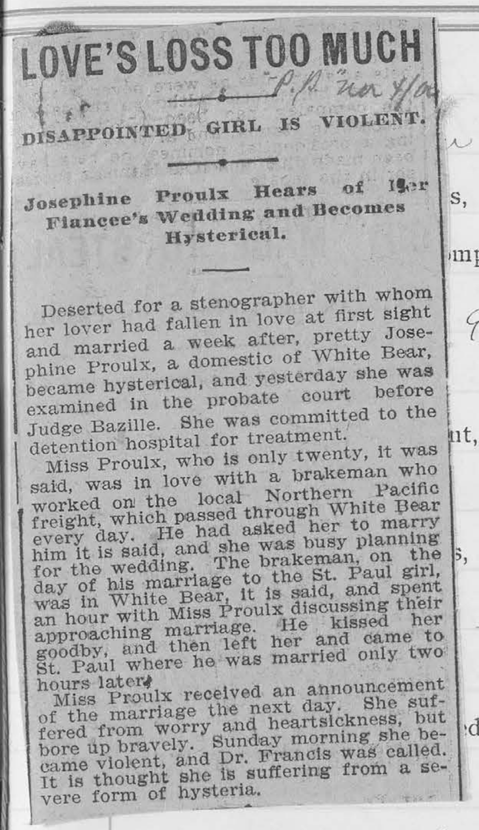
11/17/02 Nothing determined –

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,

nothing determined 11/17/02

Personal and Medical History of Josephine Proulx



LOVE'S LOSS TOO MUCH

"P.P." Nov 4/02

DISAPPOINTED GIRL IS VIOLENT.

Josephine Proulx Hears of Her Fiancee's Wedding and Becomes Hysterical.

Deserted for a stenographer with whom her lover had fallen in love at first sight and married a week after, pretty Josephine Proulx, a domestic of White Bear, became hysterical, and yesterday she was examined in the probate court before Judge Bazille. She was committed to the detention hospital for treatment.

Miss Proulx, who is only twenty, it was said, was in love with a brakeman who worked on the local Northern Pacific freight, which passed through White Bear every day. He had asked her to marry him it is said, and she was busy planning for the wedding. The brakeman, on the day of his marriage to the St. Paul girl, was in White Bear, it is said, and spent an hour with Miss Proulx discussing their approaching marriage. He kissed her goodby, and then left her and came to St. Paul where he was married only two hours later.

Miss Proulx received an announcement of the marriage the next day. She suffered from worry and heartsickness, but bore up bravely. Sunday morning she became violent, and Dr. Francis was called. It is thought she is suffering from a severe form of hysteria.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, not taken USUAL WEIGHT, – NUTRITION, good
s, none Condition of Skin, normal
mptness of Movement, Coated & mouth very foul: teeth covered with Sordes.
equal Size, Contracted Response to Light, Yes Accommodation, Yes
Did not try 11/17/02
nt, Arcus Senilis, or other troubles, –
s, Legs, Grasp,
– Tongue, – Facial Muscles, – General, –
absent – Other Reflexes, –
d, – Hesitating, – Slow, –
Sensibility, –

HEART, Regularity, regular; rapid.
Strength, Sounds, weak
Size, normal
Apex Beat,
Murmurs, none
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,

GYNECOLOGICAL EXAMINATION, external hæmorrhoids: external genitals normal: hymen intact: uterus normal –
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics –
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).

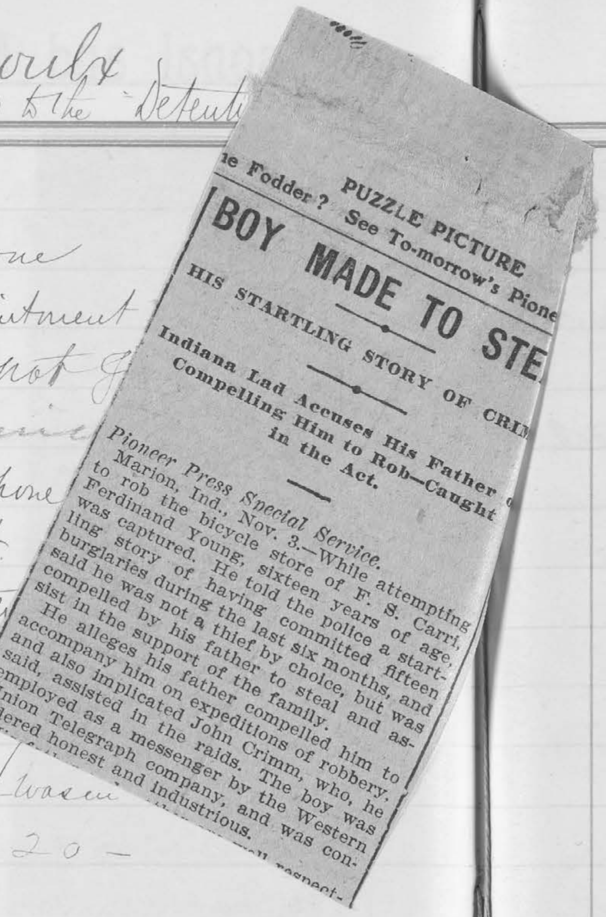
Patient has been very much disturbed & confused since admission: Is dull, apathetic: notices nothing: constantly mutters incoherently to herself. does not converse or answer questions. Stomach quite disturbed: breath & mouth very foul: constant discharge of pus from mouth over teeth & lips: impossible to keep clean: has daily lavage of stomach & takes both medicine & food by tube –

Personal and Medical History of Josephine Proulx

Examination made on 3rd Nov. 1902, when she was Committed to the Detenti

Whole No. 6234.
Residence, White Bear, Minn
Resident of State 20: of County 1897. —
Date Admission, 11th November 1902
Admitted by Dr. O. C. Heyerdale hour, 7 15 pm
How Sent, E. W. Bazille, J of P. Ramsey County
Sex, Female Age, 20.
Civil Condition, single
Children, none Age Youngest Child, —
Occupation, Servant Girl: father a farmer.
Degree Education, Common School —
Profession of Religion, Yes: Catholic.
Habits, — not intemperate —
Nativity, Centreville, Minn: Parents: Canada.
Physicians Committing, S. O. Francis and J. E. Porter
Correspondents, none given in papers.

No. for Year, 70.
Insane Relatives, none
Cause Exciting, Disappointment
Cause Predisposing, not g
Form, acute mania
Accompanying Bodily Disorder, none
Suicidal or not, not.
Date of this Attack, October
Duration, —
No. of Attack, 1st.
No. of Admission, 1st (was in
Age First Attack, — 20 —
Time of Leaving,
Time in Hospital,
Result,



e Fodder? See To-morrow's Pione

PUZZLE PICTURE

BOY MADE TO STE

HIS STARTLING STORY OF CRIM

Indiana Lad Accuses His Father
Compelling Him to Rob—Caught
in the Act.

Pioneer Press Special Service.

Marion, Ind., Nov. 3.—While attempting to rob the bicycle store of F. S. Carri, Ferdinand Young, sixteen years of age, was captured. He told the police a startling story of having committed fifteen burglaries during the last six months, and said he was not a thief by choice, but was compelled by his father to steal and assist in the support of the family.

He alleges his father compelled him to accompany him on expeditions of robbery, and also implicated John Crimm, who, he said, assisted in the raids. The boy was employed as a messenger by the Western Union Telegraph company, and was considered honest and industrious.

Examination on Admission by Dr. L. A. Linton Date of Nov 17 - 1902.

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,
REASONING POWER, Ordinary Subjects,
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

11/17/02 Nothing determined —

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,

nothing determined 11/17/02

Personal and Medical History of Josephine Proulx

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, good
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated & mouth very foul: teeth covered with sordes.
PUPILS, Equality, equal Size, Contracted Response to Light, Yes Accommodation, Yes
SIGHT,
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
Did not try 11/17/02
HEARING,
COORDINATION, Arms, Legs, Grasp,
TREMORS, Hands, — Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, absent - Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular; rapid.
Strength, Sounds, weak
Size, normal
Apex Beat,
Murmurs, none
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,

GYNECOLOGICAL EXAMINATION, external hæmorrhoids: external genitals normal: hymen intact: uterus normal —
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics —
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 very much disturbed & confused since admission: Is dull, apathetic: notices nothing: constantly mutters incoherently to herself. Does not converse or answer questions. Stomach quite disturbed: breath & mouth very foul: constant discharge of pus from mouth over teeth & lips: impossible to keep clean: has daily lavage of Stomach & takes both medicine & food by tube —

Personal and Medical History of Josephine Prouly.

1902

This patient was brought here by Dep. E. Johnson, attended by Mrs St. Pierre, in fair
physical condition, with following history of case. No history of Consanguinity
or heredity. This is 1st attack: first symptoms manifested October 31: acted queer.-
Disease seems increasing: variable & with rational intervals: but these, not regular:
Derangement now shown by being exalted. Is not disposed to injure others, nor suicidal:
no filthy or destructive habits. No history of any previous peculiarities, nor intemperance
nor of any severe disease &c, or head-injury. Has not been restrained or confined
Supposed cause of disease is disappointment in love. Treatment, narcotics, 12 hours.
On personal examination nothing learned, except that she is quite excited.
Commitment made to "Detention Hospital" - Note. Patient was on Nov. 3d 1902,
Committed to "Detention Hospital": not having improved there, is now Committed to this Hospital.
Nov 11 On admission, was put on T.W. (G.H. N.Rpt: Complexion dark: hair black: eyes brown:
condition of skin normal: small bruises on arms and ankles: is dirty: Were not able
to count teeth: Behavior very noisy and resistive: Expresses delusions). —

Summary of 14 day record dictated by Dr Laura A Linton.
Patient admitted on the ward Nov 11th extremely noisy and restive
kept in bed with extreme difficulty; at first refused to eat or take
medicine food given by tube; body covered with small bruises
teeth covered with sordes tongue thickly coated with thick
brown coating; lavage of the stomach given twice daily; is given
cathartics frequently also hypnotics; Temperature ranged from time of
confinement to bed from normal to 101 Pulse 97 to 132 respiration
16 to 28. weight 95 pounds Nov 23

Dec. 1st Patient very much disturbed. Is restrained.
Dec. 8th Had infected toe. Bichloride dressings applied.
Patient is very disturbed; untidy in habits: denudes herself.
Very destructive; incoherent; Refuses nourishment and is
fed by tube.
Jan. 30th Gradually improving both physically and mentally.
Is somewhat more quiet. Takes a good amount of nourishment.
Is still very incoherent in her talk.

See Files

Personal and Medical History of Jennie M. Krieps

Examination made 30th October 1902 when she was committed to "Detention Hospital".

Whole No. 6235.
Residence, St Paul, Minn
Became resident of State 1886: of County 1886.
Date Admission, 11th November 1902.
Admitted by Dr O. C. Heyerdale hour, 7 15 pm
How Sent, E. W. Bazille J of P. Ramsey County
Sex, Female Age, 32
Civil Condition, married.
Children, None Age Youngest Child, —
Occupation, Housewife: Husband, laborer
Degree Education, Common School
Profession of Religion, Roman Catholic.
Habits, not Intemperate
Nativity, France, Luxembourg: Parents, Luxembourg
Physicians Committing, Dr Chas Wirth and E. C. Eshelby
Correspondents, (Husband) Jos. Krieps
c/o Hamm's Brewery
St Paul Minn

No. for Year, 71 —
Insane Relatives, mother was insane at Shimenopouse?
Cause Exciting, Unknown —
Cause Predisposing, Heredity & previous attack.
Form, Melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, — not —
Date of this Attack, about 6 months ago
Duration, " " —
No. of Attack, 2nd. (one in Feby 1900) —
No. of Admission, 2nd (also at Detention Hospital)
Age First Attack, 29 Years.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Nov 14 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
variable
MEMORY, Past Events, fairly good
Recent Events, — Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
alert: generally correct, aside from delusions & hallucinations
REASONING POWER, Ordinary Subjects, somewhat impaired
Special Subjects, —
Own Mental State, appreciates
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
slightly depressed
DELUSIONS, Systematized, delusions of ~~Transitory,~~ persecution"
Special Subjects, —
HALLUCINATIONS, "of sight & hearing"
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Died from heart complication
Paternal Relatives, —
Mother, Died Insane
Maternal Relatives, —
Brothers and Sisters, 4 brothers & 3 sisters
Children — none —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
— Nothing —
HABITS, Drinking and Smoking, Good
HEADACHES (yes), VERTIGO (no), OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework.
Detail Date, Duration, and Character of Previous Attack, if any,
1st admitted Feby - 1900: duration of attack 9 mos.
Sleeps well Appetite, good Bowels, Constipated.

Personal and Medical History of Jennie M. Krieps

SENT TO HOSPITAL—Mrs. Jennie M. Krieps in the probate court yesterday was sent to the detention hospital for treatment. Her delusion is that thieves are trying to rob her.

PHYSICAL CHARACTERISTICS.

5 ft - 2 PRESENT WEIGHT, not taken 143 USUAL WEIGHT, NUTRITION, good
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, slightly coated: prompt —
PUPILS, Equality, equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good Legs, good Grasp, other tests good
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, absent Other Reflexes, absent.
ARTICULATION, Slurred, — Hesitating, — Slow, rather slow
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, fairly strong
Size, normal
Apex Beat, " "
Murmurs, none
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus normal in position & size —

MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps well, without hypnotics.
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 quiet & but slightly depressed: all physical functions seem normal: she answers questions readily, and, in most matters, intelligently: When closely questioned, expresses "delusions of persecution". Thinks there are people who are trying to injure her: "hears voices" of different people talking about her. Seems somewhat phlegmatic. —

Personal and Medical History of Jennie M. Krieps

Examination made 30th October 1902. When she was Committed to "D[illegible] Hospital".

ENTHUSIA UNBOUNDED
IN NORT ERN MINNESO

Whole No. 6235.
Residence, St Paul, Minn
Became resident of State 1886: of County 1886.
Date Admission, 11th November 1902.
Admitted by Dr O.C. Heyerdale hour, 7^{15} pm
How Sent, E.W. Bazille J of P. Ramsey County
Sex, Female Age, 32
Civil Condition, married.
Children, None Age Youngest Child, —
Occupation, Housewife: Husband, laborer
Degree Education, Common School
Profession of Religion, Roman Catholic.
Habits, not Intemperate
Nativity, France, Luxembourg: Parents, Luxembourg
Physicians Committing, Dr. Chas. Wirth and E.C. Eshelby
Correspondents, (Husband) Jos. Krieps
c/o Hamm's Brewery
St Paul Minn

No. for Year, 71. —
Insane Relatives, mother was insane at Menopause.
Cause Exciting, Unknown —
Cause Predisposing, Heredity & previous attack.
Form, Melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, — not —
Date of this Attack, about 6 months ago
Duration, " " —
No. of Attack, 2nd. (one in Feby 1900) —
No. of Admission, 2nd (also at Detention Hospital)
Age First Attack, 29 years.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L.A. Linton *Date of* Nov 14 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
variable
MEMORY, Past Events, fairly good
Recent Events, — Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
alert: generally Correct, aside from Delusions & hallucinations
REASONING POWER, Ordinary Subjects, somewhat impaired
Special Subjects, —
Own Mental State, appreciates
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
slightly depressed
DELUSIONS, Systematized, "delusions" of ~~Transitory~~, persecution"
Special Subjects, —
HALLUCINATIONS, "of sight & hearing"
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Died from heart Complication
Paternal Relatives, —
Mother, Died Insane
Maternal Relatives, —
Brothers and Sisters, 4 brothers & 3 sisters
Children — none —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
— Nothing —
HABITS, Drinking and Smoking, Good
yes no
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework.
Detail Date, Duration, and Character of Previous Attack, if any,
1st admitted Feby - 1900: duration of attack 9 mos.
Sleep, well Appetite, good Bowels, Constipated.

Personal and Medical History of Jennie M. Krieps

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken 5 ft - 2 PRESENT WEIGHT, not taken 143 USUAL WEIGHT, NUTRITION, good
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, slightly coated: prompt.
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good Legs, good Grasp, other tests good
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, absent Other Reflexes, absent
ARTICULATION, Slurred, — Hesitating, — Slow, rather slow
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, fairly strong
Size, normal
Apex Beat, " "
Murmurs, none
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus normal in position & [illegible] —

MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps well, without hypnotics.
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 quiet & but slightly depressed: all physical functions seem normal: She answers questions readily, and, in most matters, intelligently: When closely questioned, expresses "delusions of persecution". Thinks there are people who are trying to injure her: "hears voices" of different people talking about her. Seems somewhat phlegmatic. —

1902 Personal and Medical History of Jennie M. Krieps

This patient was brought here by Dep. Louis Mead, attended by husband Jos. Krieps, - in fair physical condition, with following history of case. No history of Consanguinity: As to heredity, mother was insane at menopause?. This is not 1st attack: one occurred in February 1900: duration 3 months: was sent to x Rochester Hospital & discharged. First symptoms of this attack manifested about six months ago: by delusions.- Disease seems increasing: not variable: no rational intervals: Derangement now shown in that she believes that they will lose their accumulated Earnings, would be taken away by some unknown persons. Is not disposed to injure others, nor suicidal. no filthy or destructive habits. Previously, was strongly religious. No history of intemperance, nor of any severe disease &c, or head injury. Has not been restrained or confined. Cause of disease unknown: treatment none. On personal Examination patient is talkative and excitable. Commitment made to Detention Hospital on 30th October 1902: not having improved there is now committed to this hospital. —

x (Note. 2nd admission: here before from February 1 - 1900 to April 7 - 1900 & discharged November 6 - 1900, as recovered: Form then diagnosed as "ac. melancholia (mild) with delusions." (For further particulars see - Vol 42, page 133 No 1502). —

Nov 11 On admission, was put on I.W. (G.H.N.R'pt. Complexion dark: hair brown: eyes brown: condition of skin normal: is clean: Teeth: upper 8: Lower 12: Quiet: talks intelligently). —

Summary of 14 day record dictated by Dr Laura A Hinton.

Patient admitted, bathed and put to bed Nov 11th was quiet conversed quite intelligently aside from her delusions, was put on regular diet, given occasional cathartics with bromides; Temperature ranged from normal to 100^{4} Pulse 64 to 100 Resp 18 to 24. Patient was up on the ward Nov 14th, quiet and agreeable; assisted with the lighter work of the ward. Nov 19th menstruated; has hallucinations of sight and hearing; Delusions of persecutions; weight 143 Nov 23.

Dec 15th Patient visited by husband: is very quiet. Converses intelligently. Expresses some delusions and is rather melancholy. General health good. Jan 31st No change.

See Files

Personal and Medical History of Anna Larkin

Whole No. 6238

Residence, St. Paul, Minn

Became resident of State, at birth; of County, at birth.

Date Admission, 13th November 1902. –

Admitted by Dr. C. L. Chapple hour, 7⁰⁰ P.M.

How Sent, E. W. Bazille, Jeff. Ramsey County

Sex, Female Age, 32 Years

Civil Condition, Single –

Children, – Age Youngest Child, –

Occupation, House-keeper: father's, Real Estate Dealer.

Degree Education, – Common school –

Profession of Religion, Catholic

Habits, probably temperate; father intemperate

Nativity, St. Paul, Minn: parents', Ireland.

Physicians Committing, Howard Lankester and E. H. Whitcomb

Correspondents, John Larkin (father)
507 Park Ave. near Univ.
St. Paul

No. for Year, 74.

Insane Relatives, Brother now in Rochester Asylum

Cause Exciting, – Unknown –

Cause Predisposing, Heredity? Previous attack –

Form, Chronic Mania – mild –

Accompanying Bodily Disorder, none mentioned –

Suicidal or not, – not –

Date of this Attack, Some years since

Duration, " " probably

No. of Attack, 2nd (one in Oct 1888)

No. of Admission, 2nd (here in " ")

Age First Attack, 18 years –

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Nov 22 – 1902

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good

Recent Events, good Special Subjects, good

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert –

REASONING POWER, Ordinary Subjects, –

Special Subjects,

Own Mental State, Does not realize her own condition.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Normal –

DELUSIONS, Systematized, – Transitory, –

Special Subjects, –

HALLUCINATIONS, –

ILLUSIONS, –

SUMMARY,

HISTORICAL.

LENGTH INVASION, –

ONSET, Gradual or Sudden, Gradual –

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

Father, Living – well

Paternal Relatives,

Mother, Living, well –

Maternal Relatives,

Brothers and Sisters, 4 brothers: 1 sister –

children – none

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

HABITS, Drinking and Smoking, Good

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Housework

Detail Date, Duration, and Character of Previous Attack, if any,
previous attack 8 years ago.

Sleep, poor Appetite, fair Bowels, –

Personal and Medical History of Anna Larkin

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 2½in PRESENT WEIGHT, 116½lbs USUAL WEIGHT, – NUTRITION, poor

WOUNDS, Abnormalities, none Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, Coated: prompt

PUPILS, Equality, Yes Size, normal Response to Light, Good Accommodation, good

SIGHT, good

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

HEARING, – Good

COORDINATION, Arms, good Legs, good Grasp, other tests good –

TREMORS, Hands, Yes, fine Tongue, fine Facial Muscles, – General, –

PATELLAR REFLEX, Exaggerated Other Reflexes, Elbow, wrist, Jaw. –

ARTICULATION, Slurred, – Hesitating, – Slow, –

FACIAL EXPRESSION, Sensibility, –

HEART, Regularity, regular

Strength, Sounds, Strong

Size, normal

Apex Beat, normal

Murmurs, none

ARTERIES,
Normal

LUNGS,
Chest symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, External genitals normal; uterus in normal position, free: hymen intact: –

MENSTRUATION,

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 admitted in good physical health: she converses freely, but is extremely sarcastic & bitter in her remarks. She has ideas of a "persecutory type" & imagines that there is a hidden meaning in all that is said. She is intelligent & fairly well educated. It is stated that she has a very violent temper & is very disagreeable in her manner & behavior –

Personal and Medical History of Anna Larkin

1902

This patient was brought here by Emanuel Johnson attended by Mrs A. McKey, in apparently good physical condition, with following history of case. No history of consanguinity: but brother now in Rochester Asylum. This is not 1st attack: one occurred in October 1888; duration 8 months: was then sent to ×Rochester, Minn. Hospital and discharged: First symptoms of this attack manifested some years since: ungovernable temper: Disease seems increasing: variable: rational intervals not regular: Derangement now shown at matters at home; becomes very excited & shows ungovernable temper. As to disposition to injure others, unproved: Has not attempted suicide. propensity not active. Is clean in habits: other questions (as to destruction of furniture &c) unproved. No previous peculiarities manifested: father intemperate: No history of any severe disease &c, or head-injury: has not been restrained or confined. Cause of disease unknown: Treatment, none: On personal examination, there is noted Argumentative Insanity, with an ungovernable temper.—

× Note. 2nd admission: here before, from October 10-1888 to May 6-1889 & discharged August 7-1889, as recovered. Form then "acute mania". Cause predisposing heredity? (For further particulars see Volume 11 page 79 number 1879).—

Nov 13 On admission, was put on T.W. (G.H.N.R/St: Complexion dark: hair brown: eyes brown Condition of skin normal: Is clean. Would not allow her teeth to be counted. Behavior, talkative and obstinate: did not express delusions).——

Summary of 1st day record dictated by Dr O. C. Heyerdale. Patient received on infirmary west Nov 13-1902 bathed and put to bed during first two weeks T. P. and R. normal, bowels regular took regular diet slept well at night quiet during the day time but very disagreeable, extremely sarcastic, resistive and stubborn at times refused nourishment.

Nov. 20th & 21st Visited by brother. Nov 24th Refused nourishment. Fed by tube. Disagreeable and sarcastic in manner and behavior. More or less irritable. Slightly maniacal

Nov 27th Visited by a friend. Wt 102#.

Dec 8th Refused nourishment. Fed by tube: Appetite poor.

Jan 21st No change. Patient very irritable and disagreeable. Violent and noisy and disturbs other patients, Strikes them. Also attacks nurses. Occasionally throws dishes.

See Files

Personal and Medical History of

Personal and Medical History of Priscilla Moodie

Whole No. 6241.
Residence, St Paul, Minn
Resident of State 18 months: of County, 6 months
Date Admission, 17th November 1902.
Admitted by Dr O.C. Heyerdale hour, 8^30 P.M.
How Sent, E. W. Bazille, Dep. Ramsey County
Sex, Female Age, 35 Years
Civil Condition, Widow
Children, Two, Age Youngest Child, Seven years -
Occupation, Housewife
Degree Education, High School
Profession of Religion, Christian-Church.
Habits, Not intemperate
Nativity, Illinois: Fathers, New York: Mothers, Penn.
Physicians Committing, O Wellington Archibald & A.W. Dunning
Correspondents, none given in papers -

No. for Year, 77.
Insane Relatives, none
Cause Exciting, Unknown
Cause Predisposing, not stated
Form, Paranoia
Accompanying Bodily Disorder, none mentioned.
Suicidal or not, not: but threatens to shoot others.
Date of this Attack, August 1902
Duration, - 3 months -
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 34 past.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Laiton *Date of* Nov 18 - 1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear and Quick
MEMORY, Past Events, Seems good
Recent Events, " " Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: apparently Correct.
REASONING POWER, Ordinary Subjects, Seems Good
Special Subjects, " "
Own Mental State, Says "nothing ails her"
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Normal

DELUSIONS, Systematized, Nothing determined Transitory,
Special Subjects,

HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
one sister is partially paralyzed.
Father, Died of so called old age -
Paternal Relatives, —
Mother, Died of old age -
~~Maternal Relatives~~, one sister died, valvular heart disease
Brothers and Sisters, one brother died in Civil war 5 brothers - 5 sisters living -
Children - 1 son & 1 daughter -
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
- nothing -

HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, no no no
OCCUPATION, Healthy or not, Worked in a Restaurant
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, Good Appetite, Good Bowels, Constipated

Personal and Medical History of Priscilla Moodie

See Addresses taken by Dr Phelps
Mrs Rose Schreiber (Rented)
513 Wabasha St.
St Paul

now on
Wabasha St.
bet. 8th & 9th

Priscilla Moodie

ERISTICS.
WEIGHT, — NUTRITION, poor
Condition of Skin, normal
ght, Yes Accommodation, Yes
Grasp, other tests, good -
Muscles, none General, —
absent, Other Reflexes, —
ARTICULATION, Slurred, good Hesitating, — Slow, —
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, regular
Strength, Sounds, rather weak
Size, normal
Apex Beat, normal
Murmurs, none -
ARTERIES,
atheromatous
LUNGS,
Chest symmetry: Sym
Expansion: fair
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,

GYNECOLOGICAL EXAMINATION, external genitals normal: uterus apparently fibroid: enlarged: cervix Congested, cystic: Endometritis, cervicitis, leucorrhoea.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps well.
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 quiet: Seems quite normal: claims that she is virtuous, and that she was sent to the Hospital as the result of resenting slanderous attacks on her Character. Whether this is a Delusion of persecution, it is as yet impossible to determine. -

Personal and Medical History o

Whole No. 6241.
Residence, St. Paul, Minn
Resident of State 18 months. of County
Date Admission, 17th November 190
Admitted by Dr. O. C. Heyerdale hour, 8
How Sent, E. W. Bazille, Deft. Ramsey County
Sex, Female Age, 35 years
Civil Condition, Widow
Children, Two Age Youngest Child, Seven years –
Occupation, Housewife
Degree Education, High School
Profession of Religion, Christian – Church.
Habits, not intemperate
Nativity, Illinois : Fathers, New York : Mothers, Penn.
Physicians Committing, O. Wellington Archibald and A. W. Dunning
Correspondents, none given in papers –

Suicidal or n
Date of this Attack, Aug
Duration, – 3 m
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 34 past.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Laiton *Date of* Nov 18 – 1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear and Quick
MEMORY, Past Events, Seems good
Recent Events, " " Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert : apparently Correct.
REASONING POWER, Ordinary Subjects, Seems Good
Special Subjects, " "
Own Mental State, Says "nothing ails her"
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Normal

DELUSIONS, Systematized, Nothing determined Transitory,
Special Subjects,
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
one sister is partially paralyzed.
Father, Died of so called old age –
Paternal Relatives, —
Mother, Died of old age –
~~Maternal Relatives~~, one sister dead, valvular heart disease
one brother dead in Civil war
Brothers and Sisters, 5 brothers – 5 sisters living –
Children – 1 son & 1 daughter –
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
– nothing –

HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, no no no
OCCUPATION, Healthy or not, Worked in a Restaurant
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, Good Appetite, Good Bowels, Constipated

Personal and Medical History of Priscilla Moore

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in PRESENT WEIGHT, 115 lbs USUAL WEIGHT, — NUTRITION, poor
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, clean : prompt
PUPILS, Equality, equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good –
COORDINATION, Arms, Good Legs, good Grasp, other tests, good –
TREMORS, Hands, none Tongue, none Facial Muscles, None General, —
PATELLAR REFLEX, absent, on left Other Reflexes, —
ARTICULATION, Slurred, good Hesitating, — Slow, —
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, regular
Strength, Sounds, rather weak
Size, normal
Apex Beat, normal
Murmurs, none –
ARTERIES,
Atheromatous
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,

GYNECOLOGICAL EXAMINATION, external genitals normal : uterus apparently fibroid : enlarged : cervix Congested, cystic : Endometritis, cervicitis, leucorrhoea.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps well.
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 quiet : Seems quite normal : claims that she is virtuous, and that she was sent to the Hospital as the result of resenting slanderous attacks on her Character. Whether this is a Delusion of persecution, it is as yet impossible to determine. –

Personal and Medical History of Priscilla Moodie.

1902

This patient was brought here by Dep. E. Johnson, attended by Mrs L. Rosen, in poor physical condition, with following history of case. No history of Consanguinity or heredity: this is 1st attack: first symptoms manifested August 1902: delusions. Disease seems increasing: variable & with rational intervals; but these, not regular. Derangement now shown by "delusions of persecution": believes that letters are intercepted: professes affection for public officials &c. Is disposed to injure others: and threatened to shoot. Is not suicidal: not of filthy or destructive habits: no history of any previous peculiarities, nor of intemperance, nor of any severe disease &c, or head injury. Has not been restrained or confined. Cause of disease, unknown. Treatment, none. On Personal examination, talks freely of her love for various men: weeps constantly, without tears.—

Nov 17 On admission, was put on T.W. (G.H. N.R.pt. Complexion dark: hair brown: eyes gray: Condition of skin rough: is dirty: bodily peculiarities, none noted: teeth: upper plate: lower 8, in bad condition. Behavior quiet: Answers questions quite intelligently.)

Summary of 14 day record dictated by Dr Laura A Linton.

Admitted on the ward Nov 17 patient quite agreeable converses and answers questions quite intelligently; was put on regular diet with bromide and blauds pills; seemed quite anaemic and poorly nourished temperature a good deal of the time did not raise above normal; pulse from 59 to 80 Resp 16 to 24 patient up on the ward Nov 19th Appetite good bowels regular goes out for exercise

Personal and Medical History of

Personal and Medical History of Belle. W. Spates

Whole No. 6242.

Residence, Marshall, Lyon Co. Minn

Resident of State, about 24 years: of County, about Nov 1 - 1902

Date Admission, 20th November 1902

Admitted by Dr O.C. Heyerdale hour, 4.00 P.M

How Sent, D.E. Vance, J of P. Winona County

Sex, Female Age, 46.

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Schoolteacher + housekeeper

Degree Education, High School – father, a farmer

Profession of Religion, Yes: Methodist Episcopal

Habits, not intemperate

Nativity, Jacksonville Ills: Parents Kentucky

Physicians Committing, Thos. A. Peirce and L.A. Kelly

Correspondents, (Bro-in-Law) Walter A. Hodgins

By letter 12/29/02 Virgil. B. Seward notifies us that Mr. Eli S. Frick has been appointed } Winona Minn Guardian – (letter from Marshall. Minn)

No. for Year, 78.

Insane Relatives, Brother at Asylum at Rochester, Minn

Cause Exciting, Don't know – (In change of life) –

Cause Predisposing, possibly some heredity

Form, acute mania – mild

Accompanying Bodily Disorder, None specially mentioned

Suicidal or not, Talks of suicide + propensity active

Date of this Attack, About Nov 1st 1902

Duration, 3 weeks –

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, — 46 —

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. L.A. Linton *Date of* Nov – 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear – Quick

MEMORY, Past Events,

Recent Events, Seems good Special Subjects, " "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert: Seems Correct

REASONING POWER, Ordinary Subjects, —

Special Subjects, Somewhat impaired

Own Mental State, Does not appreciate.

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

– Normal –

DELUSIONS, Systematized, — Transitory, Delusions of Persecution

Special Subjects, —

HALLUCINATIONS, Nothing

ILLUSIONS, —

SUMMARY, —

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, —

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

Paralysis, in Case of father: Brother, Insane, at St. Peter.

Father, Died of paralysis with kidney + heart Complications

Paternal Relatives, uncle died of Cancer of Stomach

Mother, Living –

Maternal Relatives, —

Brothers and Sisters, one brother – one sister one half sister

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

– Nothing –

HABITS, Drinking and Smoking, Good

HEADACHES, VERTIGO, OR CONVULSIONS, Yes Yes No

OCCUPATION, Healthy or not, Teaching + housework

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

—

Sleep, Poorly Appetite, variable Bowels, regular.

48/185 No 6242

M Belle. W. Spates

Copy of Order for Hearing Petition of Virgil. B. Seward of said City of Marshall for appointment of — as guardian for Said Belle. W. Spates — insane; served and service admitted Notice Received Dec 8/02 by me for hearing set for Dec 29/02 in Probate office Marshall Lyon Co Minn

(Papers filed with commitment papers.)

Belle. W. Spates

RACTERISTICS.

USUAL WEIGHT, NUTRITION, Poor

Condition of Skin, Normal

g : prompt –

nse to Light, Yes Accommodation, Yes

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

HEARING, Good

Stamory, me fort, fair.

COORDINATION, Arms, Good Legs, Good Grasp, other tests good –

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

PATELLAR REFLEX, Diminished Other Reflexes, Elbow, wrist.

ARTICULATION, Slurred, Good Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular

Strength, Sounds, Fairly Strong

Size, —

Apex Beat, lowered to right

Murmurs, Haemic

ARTERIES,

Normal

LUNGS,

Chest symmetry: Sym

Expansion: fair –

Breath 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,

Es.

GYNECOLOGICAL EXAMINATION, Uterus fibroid, prolapsed, retroverted, adherent: endometritis Cervicitis; Cervix eroded: urethral caruncle –

MENSTRUATION,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, has needed hypnotics –

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 quiet + agreeable, though very nervous, since admission. She talks freely + apparently reliably, aside from her "delusions of persecution" –

Personal and Medical History of Belle.

Whole No. 6242.
Residence, Marshall, Lyon Co. Minn
Resident of State, about 20 years: of County, about Nov 1-1902
Date Admission, 20th November 1902
Admitted by Dr O. C. Heyerdale hour, 4.00 P.M.
How Sent, D. E. Vance, J of P. Winona County
Sex, Female Age, 46.
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Schoolteacher & housekeeper
Degree Education, High School — father a farmer
Profession of Religion, Yes: Methodist Episcopal
Habits, not intemperate
Nativity, Jacksonville Ills: Parents Kentucky.
Physicians Committing, Thos. A. Peirce and L. A. Kelly
Correspondents, (Bro-in-Law) Walter A. Hodgins
By letter 12/29/02 Virgil B. Seward notifies us that Mr Eli S. Frick has been appointed Guardian — (letter from Marshall, Minn) Winona Minn

No. for Year, 78.
Insane Relatives, Brother at
Cause Exciting, Don't know — Ton
Cause Predisposing, possibly some
Form, acute mania — mild
Accompanying Bodily Disorder, None specially mentioned
Suicidal or not, Talks of suicide & propensity active
Date of this Attack, About Nov 1st 1902
Duration, 3 weeks —
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, — 46 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Nov — 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear — Quick
MEMORY, Past Events,
Recent Events, Seems good Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: Seems Correct
REASONING POWER, Ordinary Subjects, —
Special Subjects, Somewhat impaired
Own Mental State, Does not appreciate.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
— Normal —
DELUSIONS, Systematized, — Transitory, Delusions of Persecution
Special Subjects, —
HALLUCINATIONS, Nothing
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Paralysis, in Case of father: Brother, Insane, at St. Peter.
Father, Died of paralysis with kidney & heart Complications
Paternal Relatives, uncle died of Cancer of Stomach
Mother, Living —
Maternal Relatives, —
Brothers and Sisters, one brother — one sister one half sister
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
— Nothing —
HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, Has Yes no
OCCUPATION, Healthy or not, Teaching & housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, Poorly Appetite, variable Bowels, regular.

Personal and Medical History of Belle. W. Spates

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in PRESENT WEIGHT, 113 3/4 lbs USUAL WEIGHT, NUTRITION, poor
WOUNDS, Abnormalities, None Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, white coating: prompt —
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, wears glasses
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, hyperopia
HEARING, Good Memory, impt, fair.
COORDINATION, Arms, Good Legs, Good Grasp, other tests good —
TREMORS, Hands, None Tongue, None Facial Muscles, None General, —
PATELLAR REFLEX, Diminished Other Reflexes, Elbow, wrist.
ARTICULATION, Slurred, Good Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Fairly Strong
Size, —
Apex Beat, lowered to right
Murmurs, haemic
ARTERIES,
Normal
LUNGS,
Chest symmetry: Sym
Expansion: fair —
Breath 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,

Ex. GYNECOLOGICAL EXAMINATION, Uterus fibroid, prolapsed, retroverted, adherent: endometritis Cervicitis: Cervix eroded: urethral caruncle —
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, has needed hypnotics —
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 quiet & agreeable, though very nervous, since admission. She talks freely & apparently reliably, aside from her "delusions of persecution" —

1902 Personal and Medical History of Belle. W. Spates.

This patient was brought here by M. J. Luis, attended by Mrs Lottie Rice, in poor physical condition, with following history of case. No history of consanguinity. Brother at asylum, at Rochester, Minn. This is 1st attack: was not sent to hospital. First symptoms of this attack manifested about November 1st 1902: suspicious of friends. Eratic; wandering in mind. Disease seems increasing: variable: rational periods irregular. Short duration; becoming more continuous(?) and pronounced. Derangement now shown on all subjects: general irrational and eratic condition: Is not disposed to injure others. – Has not attempted suicide, but talks of suicide: propensity active now: No filthy or destructive habits. Previously, manifested temper, at times, at times uncontrolable: (father + mother both very passionate in temper): No history of intemperance; nor of any severe disease &c, or head-injury. Has not been restrained or confined. Dont know cause of disease – (In change of life). Treatment, none. On personal examination, patient enervated and restless and talkative. Pulse 106. Temperature 98 8/10°. –

Nov 20 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair brown: eyes brown: Condition of skin normal: is clean: Teeth, upper 16: lower 16: Quiet: talks quite intelligently).

Summary of 1st day record dictated by Dr L.A. Linton

Admitted Nov 20th 1902 seemed quiet at time of admission conversed readily was reported as being unrosey the second day and quite disagreeable but quieted down. On the 23rd of Nov was menstruating: bowels regular was given regular diet; temperature ranged from 97^{6} to 101; pulse 88 to 104 respirations 18 to 28 complains occasionally of nausea; lavage of the stomach given occasionally. On the 29th of Nov was up on the ward; quiet and agreeable assisting with the lighter work on the ward; Transferred to B-3 - Dec 1st 1903

Dec 1st '02 Patient neat in habits and appearance. Fairly quiet and agreeable. Assists some with the work: Takes out door exercise. Complains a great deal of her stomach.

Jan 1st Visited by her cousin. Jan. 31st, Patient rather quarrelsome. Irritable. Occasionally becomes quite excited and is more or less delusional.

See Files.

Personal and Medical History of

Personal and Medical History of Gertrude Conley

Whole No. 6243.

Residence, Olmsted County, Minn
Became resident of Minnesota, 41 years ago: of County, 7 yrs ago.

Date Admission, 21st. November 1902

Admitted by Dr. R. M. Phelps hour, 11.00 am

How Sent, J.A. Leonard, J of P. Olmsted County

Sex, Female Age, 47.

Civil Condition, married –

Children, – 8 – Age Youngest Child, 5 years –

Occupation, Housewife: husband, a farmer.

Degree Education, Common School –

Profession of Religion, not a church member

Habits, Not intemperate –

Nativity, Wisconsin: Parents' Isle of Man.

Physicians Committing, A.W. Adams and Chas. T. Granger

Correspondents, Mr. John Conley –
Oronoco.

No. for Year, 79.

Insane Relatives, none

Cause Exciting, Worry & climactic –

Cause Predisposing, previous attack.

Form, Acute Melancholia

Accompanying Bodily Disorder, none mentioned –

Suicidal or not, Suicidal & propensity active.

Date of this Attack, 6 weeks ago

Duration, – 6 weeks –

No. of Attack, 2nd (one in 1902) –

No. of Admission, 2nd —

Age First Attack, about 46

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. O.C. Heyerdale *Date of* Nov 22 - 1902

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good

Recent Events, good Special Subjects, good

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
——

REASONING POWER, Ordinary Subjects, —

Special Subjects, —

Own Mental State, Does not appreciate her Condition

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

DELUSIONS, Systematized, has ~~Transitory,~~ delusions
~~Special Subjects,~~ of a "persecutory type" – thinks her family have lost all of their property & that they are defrauding the Government.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, about 6 weeks

ONSET, Gradual or Sudden, ——

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

Father, Living – well

Paternal Relatives, —

Mother, Dead.

Maternal Relatives, —

Brothers and Sisters, 1 brother: 1 sister

Children 8 – 4 boys – 4 girls

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
No

HABITS, Drinking and Smoking, Good

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Housework

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

Sleep, poor Appetite, poor Bowels, Constipated

Personal and Medical History of Gertrude Conley

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4½ in PRESENT WEIGHT, 115 lbs USUAL WEIGHT, NUTRITION, poor

WOUNDS, Abnormalities, none Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, Coated: prompt

PUPILS, Equality, yes Size, normal Response to Light, good Accommodation, good

SIGHT, good

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

HEARING, Good

COORDINATION, Arms, Good Legs, good ~~Grasp~~, Other tests Good –

TREMORS, Hands, fine Tongue, fine Facial Muscles, — General, —

PATELLAR REFLEX, exaggerated Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION,

Sensibility, —

HEART, Regularity, regular

Strength, Sounds, strong

Size, normal

Apex Beat, normal

Murmurs, none –

ARTERIES,
normal

LUNGS,
Chest symmetry: yes
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,

GYNECOLOGICAL EXAMINATION, Perinaeum & cervix lacerated: uterus free: anteflexed: Cervix cystic; somewhat eroded: cervicitis; leucorrhoea.

MENSTRUATION,

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 admitted in good physical health, but poorly nourished. Depressed & delusional. Imagines she has done wrong: that her family is being persecuted.

Personal and Medical History of Gertrude Conley

1902

This patient was brought here, by Sheriff Vice, attended by Mr. John Conley, in fair physical condition, with following history of case. No history of Consanguinity or heredity. This is not 1st attack: one occurred in 1902: duration about 3 months: was sent to Rochester State Hospital: result beneficial. First symptoms of this attack manifested 6 weeks ago: restlessness and insomnia: Disease seems increasing. Not variable: no rational intervals. Derangement now shown by delusions of conscience; thinks she has committed a wrong. Is disposed to injure others. Has attempted suicide, by strychnia: has threatened suicide repeatedly: propensity active now: no filthy or destructive habits. No previous peculiarities manifested. No history of intemperance, nor of any severe disease &c, or head injury. Has been confined at ×Rochester State Hospital, one month. Supposed cause of the disease is worry & Climactic. Treatment has been by bromides &c, and at State Hospital. On personal Examination, it is learned that patient is suffering from Acute mania.

× Note. 2nd admission: here before from October 7-1901 to November 9-1901 & discharged May 13-1902, as recovered. Form then "Acute Melancholia": was suicidal and propensity active. (For further particulars see Volume 46 page 53 No 5938). —

Nov 21 On admission, was put on T.W. (G.H.N. R'pt. Complexion fair: hair brown: eyes gray: Condition of skin normal: Is clean. Varicose veins on limbs. Teeth; upper plate: lower plate. Behavior quiet: Examined by P. Finney). ——

Summary of 14 day record dictated by Dr D.S. Heyerdale. Patient received on infirmary west Nov 21-1902, bathed and put to bed, during first two weeks T. P and R. about normal or slightly above took regular diet bowels regular, patient seems very disappointed is very quiet and melancholy, attempted suicide on the 23rd of Nov., by tying a piece of the sheet about her neck and to the radiator screen was immediately transferred to C-1-40 where she could be more closely watched sleeps quite well at night during the day time very restless, is delusional and at times quite disturbed.

Nov 23rd Patient attempted suicide by tying strips from a sheet about her neck and about the heater cover. Found by the nurses. No injury done.

Nov 24th Visited by son. Wt 105#.

Nov. 29th " " ".

See Files

Personal and Medical History of

Personal and Medical History of Della Carey

Whole No. 6244.
Residence, Stewartville, Minn.
Became resident of Minnesota 1893: of County 1893.
Date Admission, 24th November 1902.
Admitted by Dr. O.C. Heyerdale hour, 12^{30} P.M.
How Sent, J. A. Leonard, J of P. Olmsted County
Sex, Female Age, 35
Civil Condition, married
Children, none Age Youngest Child, —
Occupation, Wife: husband, traveling salesman
Degree Education, - Common school -
Profession of Religion, If church member, not known.
Habits, — not known if intemperate
Nativity, Kentucky: parents born in Vermont.
Physicians Committing, A.S. Adams and Christopher Graham.
Correspondents, (Husband) Mr. N. C. Carey
Stewartville

No. for Year, 80.
Insane Relatives, none
Cause Exciting, not known
Cause Predisposing, "Chronic" -
Form, General Paresis
Accompanying Bodily Disorder, none mentioned specially
Suicidal or not, not, but will injure others.
Date of this Attack, 3 years ago
Duration, Seemingly continuous
No. of Attack, 1st —
No. of Admission, 1st here (was at Hudson, Wis)
Age First Attack, about 32.
Time of Leaving, December 10 – 1902.
Time in Hospital, – 16 Ds –
Result, Died: Exhaustion in General Paresis
(last illness – 2 wks)

Examination on Admission by Dr. O C Heyerdale (evening) *Date of* Nov – 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish – Stupid
MEMORY, Past Events, none
Recent Events, " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
– Dull –
REASONING POWER, Ordinary Subjects, none
Special Subjects, " "
Own Mental State, " "
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Indifferent
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, 3 years
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, —
Paternal Relatives, —
Mother, —
Maternal Relatives, —
Brothers and Sisters, —
Children — No
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
—
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework –
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, poor Appetite, poor Bowels, —

Personal and Medical History of Della Carey

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 in PRESENT WEIGHT, 112 lbs USUAL WEIGHT, — NUTRITION, poor
WOUNDS, Abnormalities, has small round scar on small of back. Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, whitish coating –
PUPILS, Equality, yes Size, normal Response to Light, yes Accommodation, poor
SIGHT, seems fair –
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, seems good –
COORDINATION, Arms, poor Legs, poor – Grasp, other tests, poor
TREMORS, Hands, present Tongue, fine tremor Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, regular
Strength, Sounds, strong
Size, normal
Apex Beat, " "
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: yes
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,

GYNECOLOGICAL EXAMINATION, Genitals normal: uterus normal in position – free.

MENSTRUATION,
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 admitted in a very maniacal & excited condition: she is very demented: does not understand what is said to her, & does not converse intelligently. Her periods of excitement vary with periods of quiet. Condition is one of General Paresis.

Personal and Medical History of Della Carey

1902

This patient was brought here by Dep. A. Granger, attended by Hattie Temple, in poor physical condition, with following history of case. As to any Consanguinity, not known: no Insane relatives: This is 1st attack: 3 years ago first began & never fully recovered: no complete recovery: was sent to hospital at Hudson, Wis: no improvement: First symptoms of this attack manifested by tendency to make large purchases: Exalted idea to wealth. Disease seems increasing: not variable: no rational intervals. Derangement now shown by "chronic mania": Is disposed to injure others, but not suicidal: Disposed to filthy and destructive habits. Previously was excitable & quarrelsome. As to any history of intemperance, not known: No history of any severe disease &c, or head-injury: has been restrained or confined: watched for 3 years. Cause of disease not known: Treatment, symptomatic only: On personal examination, is suffering from "chronic mania" at this examination.

Nov 24 On admission, was put on T.W. (G.H.N. Rpt: Complexion light: hair light brown: eyes blue: condition of skin normal: small scar on left side of back: also, small scar on left forearm: second finger on right hand bruised; also, bruise on left hip: & clean: Teeth: upper 12: lower, 10: Quite disturbed & resistive: Ex'd by Cinthia Tinny)

Very resistive, noisy and incoherent in speech:

Trying to throw herself out of bed injuring herself.

Was restrained.

Dec 10th Patient died at 9:30 A.M. of General Paresis.

Her failure has been rapid since admission.

She was a very difficult patient to care for.

Personal and Medical History of

Personal and Medical History of Lizzie Person

Whole No. 5245.
Residence, 496 Prior avenue, St Paul
Became resident of State 1899: of County 17 months.
Date Admission, 24th November 1902
Admitted by Dr. L. A. Luiton hour, 7⁰⁰ Pm
How Sent, E. W. Bazille, Jaff. Ramsey County
Sex, Female Age, 21
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Servant - Girl
Degree Education, - Common School -
Profession of Religion, Mission (?) Church
Habits, not intemperate -
Nativity, Sweden: Parents also born there:
Physicians Committing, Geo. B. Moore and E. M. Lundholm
Correspondents, H. O. Larson
496 - 498 Prior avenue
Merriam Park

No. for Year, 81.
Insane Relatives, mother -
Cause Exciting, Don't Know
Cause Predisposing, - Heredity -
Form, acute mania
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not -
Date of this Attack, 10 days ago
Duration, - 10 Days -
No. of Attack, 1st.
No. of Admission, 1st.
Age First Attack, - 21 -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Luiton *Date of* Nov 29 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Too disturbed to determine anything -
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,
- 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).
no history obtained
Father,
Paternal Relatives, Could ascertain nothing.
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Nothing obtained
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 Lizzie Person

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, Good
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated: prompt
PUPILS, Equality, Equal Size, dilated Response to Light, Yes Accommodation, Yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, would not do Legs, — Grasp, —
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, present Other Reflexes, absent
ARTICULATION, Slurred, good Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, —
Strength, Sounds, Strong
Size, —
Apex Beat, Normal
Murmurs, none
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,

GYNECOLOGICAL EXAMINATION, Ext. genitals normal: hymen intact: uterus retroflexed, free: cervicitis; endometritis: slight leucorrhoeal discharge.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics.
BOWELS, Present Condition, Receives Cathartics.

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 very much disturbed ever since admission: examination delayed with hope that she might become calmed & more rational. She has been uninterruptedly noisy, incoherent, & at times, untidy, destructive & violent. Talks incessantly & has had no lucid interval.

Personal and Medical History of Lizzie Person

1902

This patient was brought here by Dep. E. Johnson, attended by S. B. Carter and Mrs S. Lynch, in good physical condition, with following history of case. No consanguinity: mother insane: this is 1st attack: first symptoms manifested 10 days ago: crying and talking incoherently: disease seems increasing: not variable: no rational intervals: Derangement now shown on no particular subject, on all subjects. Is not disposed to injure others, nor suicidal: but is disposed to filthy & destructive habits: previously, manifested peculiarities on religious subjects: No history of intemperance, nor of any severe disease &c or head-injury: has been confined, since Saturday, at County Jail: Dont know cause of disease: no treatment: On personal examination, shows incoherent talk &c.

Nov 24 On admission, was put on T.W. (G. H. N. Rpt: Complexion fair: hair light: Eyes hazel: Condition of skin normal: a great many bruises on body & limbs: is dirty: Bodily peculiarities, none noted: Teeth, upper 11: lower 14: Noisy & somewhat resistive: remarks incoherent).

Summary of 14 day record dictated by Dr L. A. Linton

Patient admitted Nov 24th very much disturbed noisy and resistive talking incessantly and incoherently. Nov 26th menstruated; very untidy in appearance and habits troubled with insomnia hypnotics seemed to have little effect; Temp ranged from normal to 100° pulse 60 to 90 - respirations 18 to 24. Was put on regular diet; weight Nov 25th was 130 lbs.

Condition remained unchanged throughout December, during January a slight improvement noted - at times answers questions intelligently but still untidy and careless and at times quite disturbed and generally disagreeable. General health very good.

To Feb. 1 1903.

See Files.

Personal and Medical History of Mary I. Avery

Examination made on 15th November 1902, when she was committed to Detention Hospital:

Whole No. 6246.

Residence, St Paul Minn —

Resident of State, always: of County, always —

Date Admission, 25th November 1902.

Admitted by Dr Arthur F. Kilbourne hour, 7:00 P.M.

How Sent, E. W. Bazille Jo P. Ramsey County.

Sex, Female Age, 46 years

Civil Condition, married

Children, none Age Youngest Child, —

Occupation, Housewife: husband, a lawyer.

Degree Education, High School

Profession of Religion, Yes: Catholic

Habits, not Intemperate

Nativity, St Paul Minn: Parents: St Louis, Mo.

Physicians Committing, Arthur Sweeney & Talbot Jones

Correspondents, Joseph T. Avery
(husband) Gilfillan Block
873 Cedar Street

No. for Year, 82.

Insane Relatives, none

Cause Exciting, Unknown

Cause Predisposing, not stated

Form, ~~Acute mania~~ Delusional Insanity

Accompanying Bodily Disorder, always nervous

Suicidal or not, Not attempted: if propensity active, unknown

Date of this Attack, In May 1902: Acute Nov 12-02

Duration, about 7 months —

No. of Attack, 1st —

No. of Admission, 1st here (at St. Joseph's Hospl. 1 mo.)

Age First Attack, 45 last

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Nov — 1902.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Fairly good

Recent Events, " " Special Subjects, "

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

REASONING POWER, Ordinary Subjects, —

Special Subjects, Good on most subjects,

Own Mental State, Except her Delusions

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

DELUSIONS, Systematized, — Transitory, —

Special Subjects, —
Has "delusions of persecution"

HALLUCINATIONS, —

ILLUSIONS, —

SUMMARY,
Birthday Jany 19 — 1856.

HISTORICAL.

LENGTH INVASION, 18 Days

ONSET, Gradual or Sudden, —

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
mother died of consumption
sister " " " "

Father, Dead

Paternal Relatives, —

Mother, Dead: Consumption

Maternal Relatives, 4 brothers — 2 sisters

Brothers and Sisters, —

Children — none

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
— no

HABITS, Drinking and Smoking, —

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Housework

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

Sleep, Poor Appetite, Poor Bowels, Constipated.

Personal and Medical History of Mary I. Avery

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7½ PRESENT WEIGHT, 124 lbs USUAL WEIGHT, — NUTRITION, poor

WOUNDS, Abnormalities, — Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, prompt: white thick coating

PUPILS, Equality, normal Size, normal Response to Light, good Accommodation, fair

SIGHT, good

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

HEARING, — good

COORDINATION, Arms, good Legs, good Grasp, other tests good —

TREMORS, Hands, — Tongue, fine Facial Muscles, — General, —

PATELLAR REFLEX, present Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, normal

Strength, Sounds, strong

Size, normal

Apex Beat, " "

Murmurs, normal

ARTERIES,
—

LUNGS,
Chest symmetry: yes
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,

GYNECOLOGICAL EXAMINATION, Genitals normal: uterus normal in position — free.
Cervix cystic —

MENSTRUATION,

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 admitted in good physical condition, but poorly nourished —
Converses freely & expresses many delusions of a "persecutory type" —
Quiet in manner & behavior —

Personal and Medical History of Mary. J. Avery

1902

This patient was brought here by Henry Lange, attended by Mrs Bogart. in poor physical condition, with following history of case. No history of Consanguinity or heredity. This is 1st attack: first symptoms manifested in May 1902: had hallucinations of smell: became acutely insane November 12th 1902. Disease seems increasing: variable and with rational intervals, but these, not regular. Derangement now shown in that she believes that she is being poisoned and that there is a Conspiracy to destroy her. Is not disposed to injure others: has not attempted suicide: if propensity active, unknown: not of filthy or destructive habits. Patient was always nervous. No history of intemperance, nor of any severe disease &c or head-injury. Was confined at St Joseph's Hospital St Paul for one month. Cause of disease unknown. has had tonic & nutritive treatment, without effect. On personal Examination, patient talks freely of her delusions of poisoning: Note. Patient was, on 15th November 1902, Committed to the "Detention Hospital", & not having improved there is now committed to this Hospital; (November 25th 1902)-

Nov 25 On admission, was put on TW. (G.H. N. R'pt: Complexion dark: hair brown: eyes brown: Condition of skin normal: Is clean: several moles on body: Teeth: upper 8 and plate: Lower, 10. Behavior quiet: Talks quite intelligently: Examined by Pruthia Finney)-

Wt. 105#

Dec 25th Visited by husband. Feb. 11th by husband. Patient converses readily but expresses many delusions. Becomes very disturbed at times and very resistive. Appetite good. Sleeps well. Neat and clean in habits & appearance.

Personal and Medical History of Mary E. Cline

Examination made on 22nd November 1902 — when she was sent to "Detention Hosp." —

Whole No. 6247.
Residence, St Paul. Minn
Became resident of State 20 yrs ago: of County 20 yrs ago.
Date Admission, 25th November 1902.
Admitted by Dr Arthur F. Kilbourne hour, 7.00 P.M.
How Sent, E. W. Bazille, J of P. Ramsey County
Sex, Female Age, 41 Years.
Civil Condition, married —
Children, Two Age Youngest Child, 14 Years
Occupation, Housewife: Husband, Insurance Agent
Degree Education, — Common School —
Profession of Religion, Roman Catholic
Habits, not Intemperate
Nativity, New York State: Parents born in Ireland.
Physicians Committing, E. C. Eshelby and Geo. E. Senkler
Correspondents, (Husband) Geo. H. Cline
491 B'd-way St Paul
Telephone, Henry McCall, Drug Store 9th + B'd way

No. for Year, 83.
Insane Relatives, None
Cause Exciting, Worry + menopause
Cause Predisposing, not stated
Form, Acute Melancholia
Accompanying Bodily Disorder, None — (Menopause?)
Suicidal or not, Yes: Gashed her throat Yesterday — propensity active
Date of this Attack, About 3 months ago
Duration, " " —
No. of Attack, 1st
No. of Admission, 1st here.
Age First Attack, — about 41 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Luitow *Date of* Nov 29 - 1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused: Sluggish.
MEMORY, Past Events, very much impaired
Recent Events, Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull: not dependable
REASONING POWER, Ordinary Subjects, —
Special Subjects, Much impaired
Own Mental State, Does not appreciate.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Indifferent
DELUSIONS, Systematized, — Transitory, Delusional
Special Subjects, —
HALLUCINATIONS, "of sight + hearing" —
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
nothing determined
Father, Dead: unknown.
Paternal Relatives, —
Mother, Dead: unknown.
Maternal Relatives,
Brothers and Sisters, one brother living — one sister living: one Dead.
Children — Two.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
nothing determined —
HABITS, Drinking and Smoking,
HEADACHES, VERTIGO, OR CONVULSIONS, yes yes Says "has had fainting spells" —
OCCUPATION, Healthy or not, Housework.
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleeps poorly Appetite, poor Bowels, Constipated.

Personal and Medical History of Mary E. Cline

Mary E. Cline, another patient at the detention hospital for several days, was committed to Rochester.

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3½ PRESENT WEIGHT, 104 lbs USUAL WEIGHT, — NUTRITION, Poor
WOUNDS, Abnormalities, none Condition of Skin, anaemic
TONGUE, Coatings, Promptness of Movement, Coated — prompt.
PUPILS, Equality, equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, — good —
COORDINATION, Arms, Good Legs, good {Finger to nose, eyes shut, fair / Turning quickly Grasp, standing, eyes shut, poor.
TREMORS, Hands, fine Tongue, fine Facial Muscles, none General, none
PATELLAR REFLEX, exaggerated Other Reflexes, Elbow: wrist
ARTICULATION, Slurred, — Hesitating, — Slow, Slow —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Fairly strong
Size, normal
Apex Beat, " "
Murmurs, Haemic
ARTERIES,
Normal
LUNGS, Barrel shaped chest: left side somewhat more prominent —
Chest symmetry: Barrel shaped chest: left side somewhat more prominent —
Expansion: poor —
Breath Sounds: Hyperresonance
Sibilant râles in subclavicular spaces.

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,

GYNECOLOGICAL EXAMINATION, perinaeum + cervix lacerated: cervix eroded: uterus anteflexed large + fibroid — leucorrhoea — cervicitis — endometritis
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics —
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 very restless, both day + night: refuses all medicine: is delusional and thinks "she hears voices" + "sees people + other things" — She is depressed, indifferent + apathetic — Mental activity very sluggish — her memory seems poor — and it is doubtful whether the history, as given by her, meagre as it is, is reliable —

Personal and Medical History of Mary. E. Cline

1902

This patient was brought here by E. A. La Dow, attended by Geo. H. Cline, in poor physical condition, with following history of case. No history of consanguinity or heredity. This is 1st attack: first symptoms manifested about 3 months ago: despondency. Disease seems increasing: variable + with rational intervals: but these not regular. Derangement now shown by fixed delusions, that she will be confined in a box + sent to insane asylum. Is not disposed to injure others. Has suicide ever been attempted? Yes? - gashed her throat: attempt made yesterday: propensity active now. Not disposed to filthy or destructive habits. No history of any previous peculiarities, intemperance, nor of any severe disease +c, or head-injury. Has not been restrained or confined. Supposed cause of the disease is worry and menopause: treatment, sedatives + tonics: General health improved. On personal examination, nothing further seems noted -

Note. Patient was, on 22nd November 1902, committed to the "Detention Hospital" - not having improved there, was duly committed to this Hospital (November 25th 1902) -

Nov 25 On admission, was put on T.W. (G. H. N. Rpt: Complexion dark: hair black: eyes dark brown. condition of skin normal: several small scars on throat. Is clean: teeth: upper plate. Lower. 6. + 4 on plate. Behavior quiet: talks quite intelligently: examined by Pruthia Finney) -

Summary of 14 day record dictated by Dr L. A. Linton

Patient admitted Nov 25th was restless and sleepless the first few nights was given hypnotics seemed quite depressed but answered questions intelligently inclined to be resistive refused to remain in bed was secluded at times, at these times patient was noisy rapped on the door; was allowed up on the ward December 1st appetite fair occasionally refused food was fed by mechanical means. medicine given by tube in particular as she refused it. Temp ranged during first 2 weeks from normal to 101^{6} pulse 60 to 102 resp 18 to 28.

Nov. 29th wt. 88 lbs. visited by friend.

Dec 10th Very melancholy and disturbed. Fed by tube.

Dec 12 Visited by husband. Feb. 12 Patient very despondent. Cries a great deal. Will converse readily. Talks a great deal about her children and home. Takes out door exercise.

Personal and Medical History of

Personal and Medical History of Estelle O. Young

Whole No. 6248.
Residence, St Paul Minn
Resident of state, born here: of County, born here.
Date Admission, 25th November 1902
Admitted by Dr Arthur F. Kilbourne hour, 7⁰⁰ PM
How Sent, E. W. Bazille, Dept. Ramsey County
Sex, Female Age, 21 Years
Civil Condition, Single —
Children, — Age Youngest Child, —
Occupation, School-Teacher: father, Steamboat man
Degree Education, — High School —
Profession of Religion, Methodist —
Habits, not Intemperate ? (father a drunkard)
Nativity, St Paul, Minn: Parents' St Paul, Minn
Physicians Committing, Arthur B. Ancker and A. W. Dunning
Correspondents, Mrs Mary Young (mother)
336 W 3d Street
St Paul

No. for Year, 84.
Insane Relatives, none
Cause Exciting, Unknown
Cause Predisposing, not stated
Form, Acute mania
Accompanying Bodily Disorder, Nervousness —
Suicidal or not, not, but will injure others
Date of this Attack, Last Spring —
Duration, about 7 months —
No. of Attack, 1st —
No. of Admission, 1st here (In C&C Hosp. since Oct 23/02)
Age First Attack, 20 past
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Luiton *Date of* Nov 29 — 1902

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,
— Exalted —

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

Nothing obtainable from patient as she is wholly irrational & incoherent —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, 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 Estelle O. Young

SENT TO ROCHESTER—Estelle O. Young, who has been undergoing treatment at the detention hospital for some time, was adjudged insane yesterday in the probate court and committed to Rochester. She is twenty-one years of age and was formerly a school teacher.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, not taken USUAL WEIGHT, NUTRITION, Good
WOUNDS, Abnormalities, None — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Slightly Coated — prompt
PUPILS, Equality, equal Size, large Response to Light, Yes Accommodation, Yes
SIGHT, — Good —
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, — good —
COORDINATION, Arms, good Legs, Good { Finger & nose, eyes shut, would not do. Standing on one foot, fair. Standing, eyes shut, good. Grasp, —
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, absent on right side Other Reflexes, elbow present on left.
ARTICULATION, Slurred, Good Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, irregular & slow
Strength, Sounds, Strong
Size, normal
Apex Beat,
Murmurs, None
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus free, enlarged: retroflexed: endometritis; leucorrhoeal discharge.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics —
BOWELS, Present Condition, requires occasional Cathartics

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 very restless & disturbed: out of bed, most of the time: given to gesticulating: talks incoherently to herself, or sings most of the time: at times, destruction of clothing: has had no lucid interval, since admission —

Personal and Medical History of Estelle O. Young

terested Says It's
—
Pioneer Press Special Service.
Chicago, Nov. 25.—The merger of C
cago's beef packing firms has been

Whole No. 6248.
Residence, St Paul Minn
Resident of state, born here: of County, born here.
Date Admission, 25th November 1902
Admitted by Dr. Arthur F. Kilbourne hour, 7.00 P.M.
How Sent, E. W. Bazille, Jofr. Ramsey County
Sex, Female Age, 21 Years
Civil Condition, Single –
Children, Age Youngest Child, —
Occupation, School-Teacher: father, Steamboat man
Degree Education, – High School –
Profession of Religion, Methodist –
Habits, not Intemperate ? (father a Drunkard)
Nativity, St Paul, Minn: Parents' St. Paul, Minn
Physicians Committing, Arthur B. Ancker and A. W. Dunning
Correspondents, Mrs Mary Young (mother)
336 W 3d Street
St Paul

No. for Year, 84.
Insane Relatives, none
Cause Exciting, Unknown
Cause Predisposing, not stated
Form, Acute mania
Accompanying Bodily Disorder, Nervousness –
Suicidal or not, not, but will injure other
Date of this Attack, Last Spring –
Duration, about 7 months –
No. of Attack, 1st –
No. of Admission, 1st here (In C&C Hospl since Oct 23/02)
Age First Attack, 20 past
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Nov 29 - 1902

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

nothing obtainable from patient as she is wholly irrational & incoherent –

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, 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 Estelle O. Young

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, NUTRITION, good
WOUNDS, Abnormalities, None — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Slightly Coated – prompt
PUPILS, Equality, equal Size, large Response to Light, Yes Accommodation, Yes
SIGHT, — Good —
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, — good —
COORDINATION, Arms, good Legs, Good } Finger to nose, eyes shut, would not do. Standing on one foot, fair. Standing, eyes shut, good.
Grasp, —
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, Absent on right side Other Reflexes, elbow present on left.
ARTICULATION, Slurred, Good Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, Irregular & slow
Strength, Sounds, Strong
Size, Normal
Apex Beat,
Murmurs, None
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus free, enlarged: retro-flexed: endometritis; leucorrhoeal discharge.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics –
BOWELS, Present Condition, requires occasional Cathartics

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 very restless & disturbed: out of bed, most of the time: given to gesticulating. talks incoherently to herself, or sings most of the time: at times, destruction of clothing: has had no lucid interval, since admission –

1902 Personal and Medical History of *Estelle O. Young*

This patient was brought here by Emanuel Johnson, attended by Mary Young, in
poor physical condition, with following history of case. No history of Consanguinity
or heredity. This is 1st attack: first symptoms manifested last spring: nervous
and talkative. Disease seems increasing; not variable: no rational intervals:—
Derangement now shown by apparent confusion, restlessness, religious delusions -
Is disposed to injure others, but not suicidal: not of filthy or destructive habits.
No previous peculiarities manifested: father drunkard, before and after birth.-
Has not been subject to any severe disease or a head-injury. Has been confined in
City & County Hospital since Oct 23/02. Cause of disease unknown: treatment has
been rest, sedatives, baths. On personal examination, is nervous and reticent.-
Nov 25 On admission, was put on T.W. (G.H.N.R.H.: Complexion dark: hair brown: eyes brown: Condition
of skin normal: scar on left limb: face rough & pimply: is dirty: teeth, full set,
with the exception of one tooth on left side, lower jaw. Behavior very noisy & resistive:
Talks incoherently).

Summary of 14 day record dictated by Dr L.A. Linton.

Patient admitted Nov 25th very much disturbed and noisy and
quite exalted; this condition continued; sedatives and hypnotics
had no effect in quieting her; both cold and warm baths
were tried without avail was put on regular diet with
bromides occasional cathartics temps ranged during
the first two weeks from normal to 104; pulse 63 to 103
respirations 18 to 28.

Dec 17 visited by mother.

Feb 14. Patient still very much disturbed most of the time - sings
1903 and talks to herself incoherently, never converses intelligently,
makes irrelevant answers to questions. Habits cleanly, but
appearance careless. General health very good.
See Files.

Personal and Medical History of

Personal and Medical History of Hannah Swanson

Whole No. 6249.
Residence, Red Wing, Minn
Became resident of Minnesota 1881: of County Goodhue: 1881.
Date Admission, 25th November 1902
Admitted by Dr. L. A. Linton hour, 7.00 P.M.
How Sent, Axel Haller, Jo. P. Goodhue County
Sex, Female Age, 53.
Civil Condition, married
Children, 13 Age Youngest Child, 8 years
Occupation, Housekeeper; husband, a laborer.
Degree Education, Common school
Profession of Religion, Yes: Saved: Baptist.
Habits, not intemperate
Nativity, Sweden, Europe: Parents also born there:
Physicians Committing, J. O. Anderson & Bruno Jaehnig
Correspondents, Nels Swanson (husband) 325. Buchanan St. Redwing:
Mrs U Branch (daughter) 1150 Iglehart St. St Paul:
Information of Insanity &c made by Nils Swanson:—

No. for Year, 85.
Insane Relatives, Mother's sister brother's child. Mrs Swanson's Cousin
Cause Exciting, probably uterine hemorrhage.
Cause Predisposing, Heredity & previous attack
Form, acute melancholia
Accompanying Bodily Disorder, Looks haggard: nervous.
Suicidal or not, not attempted, but talks of suicide—
Date of this Attack, August 15th. 1902
Duration, over 3 months—
No. of Attack, 3rd—(one 21 yrs ago: one, 20 yrs ago)
No. of Admission, 1st here: was at Bethesta Hospl.
Age First Attack, about 32
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Nov 27—1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Fairly Clear
MEMORY, Past Events, fair
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Somewhat dulled
REASONING POWER, Ordinary Subjects, fair
Special Subjects, —
Own Mental State, Thinks she is perfectly well
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed & restless
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,
Born October 29—1849—Sweden—

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
No
Father, Dead—
Paternal Relatives, —
Mother, Dead
Maternal Relatives, —
Brothers and Sisters, 6—two living) 1 sister living—
13 children—4 dead.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
No
HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, poor Appetite, fair Bowels, regular

Personal and Medical History of Hannah Swanson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3 in PRESENT WEIGHT, 147 lbs USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt — Coated
PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, good
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good —
COORDINATION, Arms, good Legs, good Grasp, other tests good—
TREMORS, Hands, fine Tongue, fine Facial Muscles, — General, —
PATELLAR REFLEX, Diminished Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, None
ARTERIES,
Slightly sclerotic
LUNGS,
Chest symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, Perineum lacerated — rectocele: cystocele: uterus much enlarged — fibroid: endometritis: Cervix lacerated: leucorrhoea—
MENSTRUATION,
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 admitted in good physical health. She is depressed mentally: and very active & restless & sleepless: her condition is probably due to overwork.

Personal and Medical History of Hannah Swanson

1902

This patient was brought here by O. J. Lundquist, attended by Mrs U Branch, in fair physical condition, with following history of case. No consanguinity: Insane relatives mother's sister brother's childs Mrs Swanson's cousin were insane. This is not first attack: Others occurred 21 years ago, 20 years ago: durations 1/2 year each: was not sent to hospital. First symptoms of this attack manifested August 15th 1902: became depressed and worried about salvation. Disease seems increasing: not variable: no rational intervals: Derangement now shown on subject of religion. Is not disposed to injure others: has not attempted suicide, but talks about suicide. Is negligent in personal habits. Previously was very religious. No history of intemperance. Had injury to head at 18 years of age: has not been restrained or confined. Supposed cause of disease probably uterine haemorrhage. Was treated in Bethesda Hospital, 2 weeks: no marked improvement. On personal examination, looks haggard & is excited walks the floor, and complains that her soul is lost.

Nov 25 On admission was put on T.W. (G.H.N. Rpt: Complexion dark: hair brown; part gray. Eyes brown: condition of skin normal. Is very dirty: Teeth: lower 7 and 2 roots. - no upper teeth: Behavior quiet: Expresses delusions: Examined by Printhia Viney) -

Summary of 14 day record dictated by Dr O. C. Heyerdale
Patient admitted on infirmary ward west Nov 25-1902 first two weeks T. R. and P., about normal or slightly above took regular diet bowels regular, very restless both during night and day, condition is one of senile dementia, constantly asks to be sent home, and does not seem to be able to comprehend why she is kept here, is very troublesome.

Very resistive and dirty in habits. Patient old and very much run down physically. Very disturbed mentally. Persistently talkative.

Dec 16th Visited by gentleman friend.

Jan 30th No change. Very troublesome on ward. Wanders about persistently talkative. Begs to be sent home and says she is perfectly well.

Personal and Medical History of

Personal and Medical History of Louisa Monson.

Whole No. 6255.
Residence, Mower County
Date Admission, 10th December 1902.
Admitted by Dr. L. A. Linton hour, 8:20 P.M.
How Sent, S. S. Washburn, J of P. Mower County
Sex, Female Age, 48
Civil Condition, Married -
Children, 4 Age Youngest Child, 17 Years
Occupation, Housewife: husband, a farmer.
Degree Education, not educated
Profession of Religion, Yes: Lutheran.
Habits, not intemperate -
Nativity, Norway: Parents also born there.
Physicians Committing, J. E. Daigneau and A. W. Allen
Correspondents, Gunder Monson (husband)
Moscow. Mower Co. Minn

No. for Year, 91.
Insane Relatives, None
Cause Exciting, Menstruation stopped re.
Cause Predisposing, Chronic & prev. attks.
Form, Simple Melancholia
Accompanying Bodily Disorder, appears in ill health probably some "female trouble" -
Suicidal or not, not: propensity not active.
Date of this Attack, several weeks ago
Duration, probably 3 months -
No. of Attack, not 1st - probably very many for 4-5 yrs
No. of Admission, 1st. —
Age First Attack, about 43.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Dec 13-1902

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Could not determine much as patient understands but little English -
Recent Events, Special Subjects,

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

REASONING POWER, Ordinary Subjects, Special Subjects, Own Mental State, Does not understand English, so could not determine.

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

DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
Nothing obtainable

HALLUCINATIONS,
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Nothing obtainable
Father, Dead -
Paternal Relatives, —
Mother, Dead —
Maternal Relatives, —
3 Brothers and 6 Sisters, living: one sister 2 brothers dead -
4 children living - one dead.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
- Nothing determined -

HABITS, Drinking and Smoking, Good -
HEADACHES, VERTIGO, OR CONVULSIONS, — headaches: no
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, Poor - says Appetite, poor Bowels, Constipated.

JOHN C. JOHNSON JR. +
Gunder Monson.
SHERIFF OF MOWER CO.
AUSTIN, MINN.

---

l History of Louisa Monson

PHYSICAL CHARACTERISTICS.

WEIGHT, 132½ lbs USUAL WEIGHT, — NUTRITION, Good
WOUNDS, Abnormalities, Lipoma of left forearm, above tendons. Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: slight coating
PUPILS, Equality, Yes Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, — glasses —
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, hyperopia —
HEARING, — Good —
COORDINATION, Arms, Good Legs, Good ~~Grasp,~~ Other tests good -
TREMORS, Hands, none Tongue, none Facial Muscles, none General, None
PATELLAR REFLEX, present Other Reflexes, Elbow: wrist. —
ARTICULATION, Slurred, — Hesitating, — Slow, slow -
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular, but slow
Strength, Sounds, weak
Size, Normal
Apex Beat,
Murmurs, None
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,

GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: uterus free & normal in position: slight leucorrhoeal discharge
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics -
BOWELS, Present Condition, Takes cathartics

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 quiet, since admission; only slightly depressed: Could not determine much as to her mental condition, as she does not speak or understand English. -

Personal and Medical History of Louisa

Whole No. 6255.
Residence, Mower County
Date Admission, 10th December 1902.
Admitted by Dr L. A. Linton hour, 8^20 P.M.
How Sent, S. S. Washburn, J of P. Mower County
Sex, Female Age, 48
Civil Condition, Married –
Children, 4 Age Youngest Child, 17 Years
Occupation, Housewife: husband, a farmer.
Degree Education, not educated
Profession of Religion, Yes: Lutheran.
Habits, not intemperate –
Nativity, Norway: Parents also born there.
Physicians Committing, J. E. Daigneau and A. W. Allen
Correspondents, Gunder Monson (husband)
Moscow. Mower Co. Minn

No. for Year,
Insane Relatives, —
Cause Exciting, Menstruation stopped re
Cause Predisposing, Chronic & prev. attks.
Form, Simple Melancholia
Accompanying Bodily Disorder, appears in ill health probably some "female trouble" –
Suicidal or not, not: propensity not active.
Date of this Attack, Several weeks ago
Duration, probably 3 months –
No. of Attack, not 1st – probably very many for 4–5 yrs
No. of Admission, 1st. —
Age First Attack, about 43.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Dec 13-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
– Quick –
MEMORY, Past Events, Could not determine much as patient understands but little English –
Recent Events, Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
alert.
REASONING POWER, Ordinary Subjects, Special Subjects, Own Mental State, } Does not understand English, so could not determine.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Slightly depressed
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
Nothing obtainable
HALLUCINATIONS,
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
nothing obtainable
Father, Dead –
Paternal Relatives, —
Mother, Dead –
Maternal Relatives, —
Brothers 3 and Sisters 6, } living: one sister & brother dead –
4 children living – one dead.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
– nothing determined –
HABITS, Drinking and Smoking, Good –
HEADACHES, VERTIGO, OR CONVULSIONS, headaches: no —
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, poor – days Appetite, poor Bowels, Constipated.

Personal and Medical History of Louisa Monson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3½ in PRESENT WEIGHT, 132½ lbs USUAL WEIGHT, — NUTRITION, Good
WOUNDS, Abnormalities, Lipoma of left forearm, above tendons. Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: slight coating
PUPILS, Equality, Yes Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, – glasses –
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, hyperopia –
HEARING, – Good –
COORDINATION, Arms, Good Legs, Good ~~Grasp,~~ Other tests good –
TREMORS, Hands, none Tongue, none Facial Muscles, none General, None
PATELLAR REFLEX, present Other Reflexes, elbow: wrist. –
ARTICULATION, Slurred, — Hesitating, — Slow, slow –
FACIAL EXPRESSION,
HEART, Regularity, regular, but slow
Strength, Sounds, weak
Size, Apex Beat, Normal
Murmurs, none
ARTERIES,
Normal
LUNGS,
Chest symmetry: Sym
Expansion: Good
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,

GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: uterus free & normal in position: slight leucorrhoeal discharge
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics –
BOWELS, Present Condition, Takes cathartics

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 quiet, since admission: only slightly depressed: Could not determine much as to her mental condition, as she does not speak or understand English. –

Personal and Medical History of Louisa Monson.

This patient was brought here by John. C. Johnson Jr., attended by Gunder Monson, in fair physical condition, with following history of case. As to any Consanguinity. Not known: no insane relatives. This is not 1st attack: Others occurred at intervals for 4 or 5 years: duration 4 or 5 days: was not sent to hospital. First symptoms of this attack manifested several weeks ago; by violence of temper, melancholia &c. Disease seems increasing: variable & with rational intervals: but these not regular: the attacks come on at variable intervals: Derangement now shown by being moody: melancholia: fits of temper: will go; for several days, without saying a word to any one. Has shown disposition to injure others, but is not suicidal. propensity not active: no filthy or destructive habits: previously manifested peculiarities: She was always very religious & had a violent temper, at times. No history of intemperance, nor of any severe disease &c, or head-injury: has not been restrained or confined. Supposed cause of the disease is that her menstruation stopped when she came from Norway: "has acted "queer" ever since. Treatment, none. On personal Examination, she appears like a person in ill health: Melancholic: Easily moved to tears: Commitment recommended, because she is in need of medical treatment, while under legal restraint.——

Dec 10 On admission, was put on I.W. (G.H.N.Rpt: Complexion dark: hair black, part gray: Eyes blue: Condition of skin, normal: vermin in hair and is dirty: left arm, above wrist, swollen: Teeth: upper 15: lower 10: Behavior, very quiet).——

Has a tumor on left arm. Patient is very quiet and neat in habits and personal appearance. Agreeable on the ward. Appetite fair. Is somewhat melancholy. Jan. 30th No change.

See Files.

Personal and Medical History of Hattie Frost

Whole No. 6256.

Residence, St Paul, Minn

Became resident of State 1889: of County 1889.

Date Admission, 11th December 1902.

Admitted by Dr. R.M. Phelps hour, 7.00 P.M.

How Sent, E.W. Bazille, Jdg P. Ramsey County.

Sex, Female Age, 24

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Clerk: father a fireman.

Degree Education, Common School –

Profession of Religion, Yes: Roman Catholic.

Habits, Not intemperate –

Nativity, Germany: Parents also born there.

Physicians Committing, J. Wellington Archibald & Howard Lankester

Correspondents, (Father)
278 Stinson Street
St Paul

No. for Year, 92.

Insane Relatives, None

Cause Exciting, Self abuse?

Cause Predisposing, Probably " –

Form, Melancholia

Accompanying Bodily Disorder, None mentioned

Suicidal or not, Suicidal by hanging & Drugs: propensity active

Date of this Attack, 8 months ago –

Duration, " " probably

No. of Attack, 1st –

No. of Admission, 1st –

Age First Attack, 23 Past.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. L. A. Guitou – *Date of* Dec 13 – 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear, aside from delusions – Quick –

MEMORY, Past Events, good

Recent Events, " " Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: in part Correct.

REASONING POWER, Ordinary Subjects, —

Special Subjects, Impaired

Own Mental State, Does not appreciate

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
– Depressed –

DELUSIONS, Systematized, — Transitory, Delusional

Special Subjects, —

HALLUCINATIONS, "of hearing and Sight"

ILLUSIONS, —

SUMMARY,

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, —

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Could get no history

Father, Living –

Paternal Relatives, —

Mother, Living

Maternal Relatives, —

Brothers and Sisters, 6 brothers: 2 sisters

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Nothing

HABITS, Drinking and Smoking, Good

HEADACHES, VERTIGO, OR CONVULSIONS, headache – No —

OCCUPATION, Healthy or not, Housework & translating for Land office –

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

Sleep, Poor Appetite, Poor Bowels, Constipated.

Personal and Medical History of Hattie Frost

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4½ PRESENT WEIGHT, 121½ lbs USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, Goitre – Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, Slightly Coated – prompt –

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

SIGHT, wears glasses

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

HEARING, good

COORDINATION, Arms, good Legs, good Grasp, other tests good –

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

PATELLAR REFLEX, exaggerated Other Reflexes, Elbow – wrist

ARTICULATION, Slurred, good Hesitating, — Slow, —

FACIAL EXPRESSION, — Sensibility, —

HEART, Regularity, regular

Strength, Sounds, fairly strong

Size, normal

Apex Beat, normal

Murmurs, None –

ARTERIES,
Normal

LUNGS,
Chest symmetry: 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,

GYNECOLOGICAL EXAMINATION, Did not make Complete examination, (because so resistive?). External Genitals normal, aside from excoriation, due to leucorrhoeal discharge: hymen intact.

MENSTRUATION,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Takes hypnotics –

BOWELS, Present Condition, requires cathartics –

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's condition appears to be one of melancholia, induced, according to her statements, by first, disappointment in love, & secondly, worry over her work. She was translator in a land-office in St. Paul, &, for some time, worried, because she thought she was not doing the work well enough. At time of admission, was both homicidal & suicidal in intent –

Personal and Medical History of Hattie Frost

1902

This patient was brought here by Emanuel Johnson, attended by Frank Frost, father in fair physical condition, with following history of case. No history of Consanguinity or heredity. This is 1st attack: first symptoms manifested six months ago: Delusions and melancholia. Disease seems increasing: not variable: no rational intervals: — Derangement now shown by continual desire to commit suicide. Is disposed to injure others: has attempted suicide, by hanging & Drugs: propensity active now: not disposed to filthy or destructive habits: No history of intemperance, nor of any severe disease &c, or head-injury. No history of any previous peculiarities. Has not been confined or restrained. Supposed Cause of the disease is self-abuse (?) Treatment pursued has been general. — On personal examination, there are noted progressive melancholia, with delusions, and admitted determination to commit suicide, at any or all opportunities: —

Dec 11 On admission, was put on TW. (G.H.N. Rpt: Complexion dark: hair brown: eyes blue: Condition of skin rough & pimply: small bruise on left arm: is clean: Goitre: Teeth: upper 16: lower 16: in good condition. Behavior quiet: Expresses delusions). —

Summary of 14 day record dictated by Dr L.A. Linton.

Patient admitted December 11th was very quiet slept well and very much depressed answers questions rationally sometimes volunteers conversation; was put on regular diet; Temp ranged during first two weeks from normal to 101. Pulse 72 to 108 resp's 18 to 28; menstruated Dec 16th

Dec 31st Very resistive. Fed mechanically. Has many delusions. Extremely melancholy. Cries a great deal.

Jan 6th Patient attempted suicide by choking herself with her belt.

" 7th Again attempted suicide.

Feb 4th Patient very hysterical and melancholy

Personal and Medical History of

Personal and Medical History of Margaret Delaney

Whole No. 6257

Residence, St Paul, Minn

Resident of State, 37 years. Of County 37 yrs Ramsey.

Date Admission, 12th December 1902.

Admitted by Dr A.M. Phelps hour, 8:00 PM

How Sent, E. W. Bazille, Jaf? Ramsey County

Sex, Female Age, 55 years

Civil Condition, single –

Children, × Age Youngest Child, —

Occupation, Housekeeper (?) : father's farmer

Degree Education, Common School –

Profession of Religion, Roman Catholic.

Habits, not intemperate

Nativity, Ireland: parents also born there

Physicians Committing, W. D. Kelly and H. J. O'Brien

Correspondents, (Brother) Mr William Delaney
186 St Anthony Ave
St Paul Minn

No. for Year, 93.

Insane Relatives, Brother –

Cause Exciting, no knowledge

Cause Predisposing, Heredity possibly & prev. attk

Form, Chronic Mania ~~Delusional Insanity~~

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not –

Date of this Attack, Last April

Duration, about 8 months.

No. of Attack, 2nd (one 6 a 7 yrs ago) –

No. of Admission, 1st here (was at St Joseph's) –

Age First Attack, about 48.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. L. A. Linton *Date of* Dec 15 – 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear, in some respects: Quick –

MEMORY, Past Events, Fair.

Recent Events, — Special Subjects, —

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

REASONING POWER, Ordinary Subjects, Impaired

Special Subjects, —

Own Mental State, Does not appreciate

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
– Exalted –

DELUSIONS, Systematized, Transitory,

Special Subjects,
Quite delusional on religious subjects. Thinks she is inspired and that she is to be a second Virgin Mary.

HALLUCINATIONS, of hearing + sight –

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, —

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
No history

Father, Dead

Paternal Relatives, —

Mother, Dead

Maternal Relatives, —

Brothers and Sisters, 6 dead – 1 living; 1 Sister dead: 2 living –

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
– nothing –

HABITS, Drinking and Smoking, Good.

HEADACHES, VERTIGO, OR CONVULSIONS, headache – vertigo – —

OCCUPATION, Healthy or not, housework

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

Sleep, Appetite, Bowels,
Says she slept well + ate well: took occasional Cathartics

Personal and Medical History of Margaret Delaney

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, 200 lbs USUAL WEIGHT, — NUTRITION, good

WOUNDS, Abnormalities, normal. Condition of Skin, Normal

TONGUE, Coatings, Promptness of Movement, Coated – prompt

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

SIGHT, poor: wears glasses

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

HEARING, good

COORDINATION, Arms, good Legs, Good ~~Grasp,~~ other tests good –

TREMORS, Hands, fine tremor Tongue, fine tremor Facial Muscles, none General, None

PATELLAR REFLEX, Exaggerated Other Reflexes, Elbow + wrist

ARTICULATION, Slurred, Good Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular

Strength, Sounds, Strong

Size, Normal

Apex Beat,

Murmurs, None

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,

GYNECOLOGICAL EXAMINATION, External genitals normal: hymen intact: excoriation due to leucorrhoeal discharge. (Did not make complete examination, because so resistive).

MENSTRUATION,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Does not require hypnotics.

BOWELS, Present Condition, Requires Cathartics

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 quiet: gives fairly intelligent answers to questions, aside from her delusions but becomes somewhat exalted in discussing matters of religion. Thinks she is inspired and has been selected as a Second Virgin Mary & that this will be the second Coming of Christ.

Personal and Medical History of Margaret Delaney

1902

This patient was brought here by Emanuel Johnson, attended by Mary Delaney, in fair physical condition, with following history of case. No Consanguinity: Brother insane: This is not 1st attack: one occurred 6 or 7 years ago: duration? never since: Was sent to St. Joseph's Hospital: result, improvement. First symptoms of this attack manifested last April: religious delusions. Disease seems increasing: variable one with rational intervals, but, as to these, no regularity. Derangement now shown on religion. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. No previous peculiarities manifested: no history of intemperance, nor of any severe disease or a head-injury. Has been confined in St. Joseph's Hospital. No knowledge of cause of the disease: no treatment. On personal examination, no further facts seem to have been learned.

Dec 12 On admission, was put on I.W. (G.A.N. R/pt: Complexion fair: hair gray: eyes blue: Condition of skin normal: three small scars back of left ear: bruises on both limbs: Is dirty: Teeth: upper 4: lower 9: Behavior quiet: talkative: Expresses delusions)-

Summary of 14 day record dictated by Dr O. C. Heyerdale
Patient admitted on infirmary west Sept 12-1902 during first two weeks T. P. and R about normal or slightly above, bowels regular took regular diet occasional hypnotics for sleep, is rather restless and disturbed during day time sleeps quite well at night, asks to be sent home. has delusions of a religious nature.

Patient very disagreeable: converses readily.

Dec. 19th " " meddlesome; up on ward. Is acutely maniacal. Expresses many delusions in regard to religion. Says she is a Prophetess appointed by the Lord. Endeavors to convert the other patients. Is very restless.

Feb. 7th No change.

See files

Personal and Medical History of

Personal and Medical History of Mary Proell

Whole No. 6258.
Residence, Winona, Minn.
Became resident of Minnesota 1884: of County 1884.
Date Admission, 13th December 1902.
Admitted by Dr. A. M. Phelps hour, 4^15 P.M.
How Sent, D. E. Vance, Jof P. Winona County
Sex, Female Age, 28.
Civil Condition, Single
Children, none Age Youngest Child, —
Occupation, Housekeeper: Father, a laborer
Degree Education, Common School
Profession of Religion, German Catholic
Habits, not intemperate
Nativity, Germany: parents also born there.
Physicians Committing, L. G. Wilberton and H. G. McGaughey
Correspondents, write Mary Proell
654 Hoff Street
Winona

No. for Year, 94.
Insane Relatives, none. —
Cause Exciting, {Don't know: Deafness + inability to communicate contributes. —
Cause Predisposing, previous attacks.
Form, Recurrent mania
Accompanying Bodily Disorder, Impaired hearing.
Suicidal or not, Not: but would injure others.
Date of this Attack, December 7-1902
Duration, — about a week
No. of Attack, 3rd (others in 1894 + 1899)
No. of Admission, 3rd
Age First Attack, about 20 -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Dec - 1902

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,

Nothing obtainable from patient

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 Mary Proell

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft - PRESENT WEIGHT, 134 lbs USUAL WEIGHT, NUTRITION, good
WOUNDS, Abnormalities, portion of right eye brow. Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Slightly coated: prompt.
PUPILS, Equality, equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal —
HEARING, Deaf
COORDINATION, Arms, good Legs, good would Grasp, not do other tests
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, Exaggerated — Other Reflexes, Elbow, on both sides.
ARTICULATION, Slurred, good Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat,
Murmurs, none
ARTERIES,
normal
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus ante flexed but free.

MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, requires hypnotics -
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 continuously noisy & destructive: very restless: would not remain in bed: troubled with insomnia: mutters incoherently to herself: owing to deafness, it has been impossible to communicate with her, except by signs.

Personal and Medical History of Mary Proell.

1902

This patient was brought here by A.C. Case, attended by Mary Proell, in fair physical condition, with following history of case. No history of Consanguinity, or heredity.— This is not 1st attack: others occurred in 1894 + 1899: Durations (1894) 4 months (1899) 5 mos: was sent to ×Rochester, Minn. hospital; discharged, as recovered, each time. First symptoms of this attack manifested December 7th 1902: singing + talking, night and day: incoherent and incessant: Disease seems increasing: not variable; no rational intervals: is less disturbed, in day-time: Derangement now shown by incessant and incoherent singing and talking: restless movements. Disposed to injure others: throws articles at sister-in-law: not suicidal: as to filthy or destructive habits, not in this attack. No history of any previous peculiarities, nor of intemperance; had typhoid fever, 18 years ago: caused impaired hearing: Watching, night and day, has been employed. Don't know cause of the disease: deafness, and inability to communicate, contributes: Treatment; none in present attack. On personal Examination, the following noted: depressed appearance: talking irrational: does not reply to most questions. ——— - ———

× Note. 3rd admission: here before, 1st time, from May 4 - 1894 to August 28 - 1894 and discharged February 6 - 1895, recovered: (See Vol 26 page 109 No 3713) - and 2nd time, from Dec 1 - 1899 to April 2 - 1900 + discharged Nov 7 - 1900, as improved: (See Vol 40 page 69 - No 5453): Form, each time, diagnosed as: "Acute Mania"-

Dec 13 On admission, was put on T.W. (G.H.N. R'pt: Complexion dark: hair brown:— Eyes; left blue; right brown: Condition of skin, normal: small bruise on right limb: is clean: Teeth: upper 14: lower 11: Behavior is noisy: Does not speak English. Examined by nurse Mary Shea). —

Patient admitted on the infirmary, bathed and put to bed - very wakeful, restless and noisy day and night. Out of bed most of the time, hypnotics and sedatives have little effect. Destructive of clothing and bedding, hands confined in mittens part of the time. Temperature for the first two weeks ranged from normal to 101.6° - Pulse 73 to 100 - Respiration 16-28.

Was put on regular diet - appetite rather poor, bowels regular. Fed by tube. Very disturbed and noisy; maniacal. Is quite deaf.

Feb. 2nd. No change -

See files.

Personal and Medical History of

Personal and Medical History of Barbara Hammer.

Whole No. 6260.
Residence, Brownsville, Minn
Date Admission, 17th December 1902 -
Admitted by Dr. R. M. Phelps, hour, 4:35 P.M.
How Sent, L. Budall, J. of P. Houston County
Sex, Female Age, 52.
Civil Condition, Widowed -
Children, - Age Youngest Child, none
Occupation, Farming -
Degree Education, Yes: Can read + write.
Profession of Religion, Yes: Lutheran
Habits, Not intemperate -
Nativity, Germany: Parents also born there.
Physicians Committing, D. C. Rhines and W. E. Browning
Family Physcn. Dr. Liedeman Lacrosse, Wis
Correspondents, (Bro) Henry Forschler Brownsville Minn
in town - Telephone in town -

No. for Year, 96.
Insane Relatives, None
Cause Exciting, Do not know
Cause Predisposing, not given
Form, mild mania
Accompanying Bodily Disorder, None: healthy looking -
Suicidal or not, probably so inclined
Date of this Attack, Three weeks or more
Duration, " " "
No. of Attack, 1st -
No. of Admission, 1st -
Age First Attack, - 52 -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Guiton *Date of* Dec - 1902.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear, except concerning delusions - Quick
MEMORY, Past Events, —
Recent Events, apparently good Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
alert: seems correct
REASONING POWER, Ordinary Subjects, —
Special Subjects, —
Own Mental State, Does not appreciate -
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
—
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
Apparently "delusions of persecution"
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
No history
Father, Died from injury, when old -
Paternal Relatives, —
Mother, Died of La Grippe -
Maternal Relatives, —
Brothers and Sisters, one living - one brother, 2 sisters died, when infants
3 children - all died young -
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Nothing
HABITS, Drinking and Smoking, Good -
HEADACHES, none VERTIGO, none OR CONVULSIONS, None
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, poorly Appetite, Good Bowels, Constipated

Personal and Medical History of Barbara Hammer

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 in PRESENT WEIGHT, 133½ lb USUAL WEIGHT, — NUTRITION, Good
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated - prompt
PUPILS, Equality, equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Poor - wears glasses
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, myopia
HEARING, Good
COORDINATION, Arms, Good Legs, Good Grasp, other tests good.
TREMORS, Hands, none Tongue, none Facial Muscles, none General, None
PATELLAR REFLEX, present Other Reflexes, Elbow.
ARTICULATION, Slurred, Good Hesitating, — Slow, —
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, Normal
Apex Beat,
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest Symmetry: 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,

GYNECOLOGICAL EXAMINATION, Mucous membrane of urethra congested: perinaeum and cervix lacerated: uterus normal in position, + free: some leucorrhoea + excoriation of external genitals:
MENSTRUATION,
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 is quiet; converses intelligently aside from delusions. Is neither exalted nor depressed: Has delusions concerning her property. "Thinks her house is being constantly watched, with the object of plunder." She has had the locks on doors changed several times, because she thinks people have keys, that will open her doors. —

Personal and Medical History of Barbara Hammer.

1907

This patient was brought here by J. H. Evans, attended by Mrs Frank Brown, in fair physical condition, with following history of case. No Consanguinity: no heredity: This is 1st attack: first symptoms manifested 3 weeks or more: standing in front of approaching train: Disease seems increasing: not variable: no rational intervals: Derangement now shown in that she is suspicious of everybody: "hearing people talk from below her house". Is not disposed to injure others: has not attempted suicide: (Probably so inclined P.M.) No filthy or destructive habits: was always quick-tempered: no history of intemperance, nor of any severe disease &c, or head-injury: has not been restrained or confined. Do not know cause of the disease: treatment, none pursued.— On personal examination is healthy looking: has right arm bandaged with handkerchief: "has pity for arm"— Commitment recommended because of reasons Nos. 1 & 5 in Sec. 17.

Dec 17 On admission, was put on T.W. (G.H.N. Rpt: Complexion light: hair brown; part gray: eyes gray: Condition of skin normal & clean. Teeth: 4 upper & 5 lower:— Behavior quiet; quite resistive when bath being given. Exd. by Nurse Mary Shea)—

Very resistive and talkative. Neat in habits and appearance

Very disagreeable on the ward; meddlesome

Jan. 30th. No change.

See files

Personal and Medical History of

Personal and Medical History of Kate Dethorn

Whole No. 6261.
Residence, St Paul, Minn
Became resident of State July 1901: of County July 1901.
Date Admission, 17th December 1902.
Admitted by Dr C. L. Chapple hour, 7.00 PM
How Sent, E. W. Bazille, Jaff. Ramsey County.
Sex, Female Age, 35
Civil Condition, Married
Children, Two Age Youngest Child, 10 years
Occupation, Housework: husband, a driver
Degree Education, Common school
Profession of Religion, Roman Catholic
Habits, not intemperate –
Nativity, Germany: parents also born there
Physicians Committing, Ethelbert F. Geer and A. W. Dunning).
Correspondents, Mother's address is
Mrs Frank Pfannanstill, Grace Lake
Lake County – Illinois

No. for Year, 97.
Insane Relatives, No, excepting one brother, from drink.
Cause Exciting, Domestic trouble.
Cause Predisposing, Possibly some heredity –
Form, Ac. – man. Delusional –
Accompanying Bodily Disorder, None mentioned
Suicidal or not, Not: propensity not active.
Date of this Attack, Two weeks ago
Duration, " " –
No. of Attack, 1st –
No. of Admission, 1st here (at City Hospl 10 D)
Age First Attack, – 35 –
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Dec 20 – 1902.

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, except on subject of delusions
REASONING POWER, Ordinary Subjects, ——
Special Subjects, ——
Own Mental State, Does not appreciate her condition –
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
——
DELUSIONS, Systematized, —— Transitory, ——
Special Subjects, ——
Delusions "of persecution" & "poisoning" –
HALLUCINATIONS, ——
ILLUSIONS, ——
SUMMARY,

HISTORICAL.

LENGTH INVASION, Two weeks ago
ONSET, Gradual or Sudden, ——
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
One brother insane from intemperance, for a short time: has a cousin insane. –
Father, Dead ——
Paternal Relatives, ——
Mother, Living ——
Maternal Relatives, ——
Brothers and Sisters, 3 brothers: 2 sisters
2 children –
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Had a gynaecological operation several years ago. –
HABITS, Drinking and Smoking, Drank beer moderately –
HEADACHES, VERTIGO, OR CONVULSIONS, ——
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
——
Sleep, Poor Appetite, good Bowels, Constipated –

Personal and Medical History of Kate Dethorn

SENT TO ROCHESTER—Kate Dethorn, a married woman thirty-five years of age, was declared insane yesterday in the probate court, and she was committed to the state hospital at Rochester. She has been under treatment at the detention hospital for ten days. She has two children.

48/237
No 6261

M Kate Dethorn

Copy of Order for Hearing Petition of John F. Diethorn
for appointment of
as guardian for
Kate Diethorn insane; served and
service ~~admitted~~ on Dr. O. F. K 2.45 PM. 1/16 – Ruml. by Deff Davis

(Papers filed with commitment papers.)

Hearing on 3d Feby 1903, Probate Court, St Paul

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 125 lb USUAL WEIGHT, —— NUTRITION, good
Condition of Skin, normal
: prompt –
nse to Light, good Accommodation, good –
nal
air Grasp, other tests good –
Facial Muscles, —— General, ——
Other Reflexes, Elbow: wrist: Jaw. –
—— Slow, ——
FACIAL EXPRESSION, ——
Sensibility, ——
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, " "
Murmurs, none
ARTERIES,
Normal
LUNGS,
Chest symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, Genitals normal: cystic degeneration of cervix: Endometritis: leucorrhoea. –
MENSTRUATION,
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 admitted in good physical condition, & is fairly well-nourished. She complains of having some rheumatic pains. She is quick & clear, mentally, on subjects, other than her delusions, which she expresses freely. She has delusions of persecution. Patient is rather irritable in her manner: is fairly well educated. –

Personal and Medical History of Ka Dethorn

Whole No. 8261.
Residence, St Paul, Minn
Became resident of State July 1901: of County July 1901.
Date Admission, 17th December 1902.
Admitted by Dr C. L. Chapple hour, 7^00 PM
How Sent, E. W. Bazille, Jaff. Ramsey County
Sex, Female Age, 35
Civil Condition, Married
Children, Two Age Youngest Child, 10 Years
Occupation, Housework: husband, a driver
Degree Education, Common school
Profession of Religion, Roman Catholic
Habits, not intemperate -
Nativity, Germany: parents also born there
Physicians Committing, Ethelbert F. Geer and A.W. Dunning).
Correspondents, Mother's address is
Mrs Frank Pfannanstill, Grace Lake
Lake County - Illinois

No.
In
C
Da
Duration,
No. of Attack, 1st
No. of Admission, 1st here (at City Hosp.
Age First Attack, - 35 -
Time of Leaving,
Time in Hospital,
Result,

ans for the enlargement of t
polis public building. They wi
pleted in time to permit of wo
project in the spring.
The work of preparing plan
improvements authorized on se
lic buildings throughout the co
cluding the old one at St. Pau
has progressed

Examination on Admission by Dr. O. C. Heyerdale *Date of* Dec 20 - 1902.

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, except on subject of delusions
REASONING POWER, Ordinary Subjects, ——
Special Subjects, ——
Own Mental State, Does not appreciate her condition -
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
——
DELUSIONS, Systematized, —— Transitory, ——
Special Subjects, ——
Delusions "of persecution" + "poisoning" -
HALLUCINATIONS, ——
ILLUSIONS, ——
SUMMARY,

HISTORICAL.

LENGTH INVASION, Two weeks ago
ONSET, Gradual or Sudden, ——
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
One brother insane from intemperance, for a short time: has a cousin insane. -
Father, Dead ——
Paternal Relatives, ——
Mother, Living —
Maternal Relatives, —
Brothers and Sisters, 3 brothers: 2 sisters
2 children -
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Had a gynaecological operation several years ago. -
HABITS, Drinking and Smoking, Drank beer moderately -
HEADACHES, VERTIGO, OR CONVULSIONS, ——
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
——
Sleep, Poor Appetite, good Bowels, Constipated -

Personal and Medical History of Kate Dethorn

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 in PRESENT WEIGHT, 125 lb USUAL WEIGHT, — NUTRITION, Good
WOUNDS, Abnormalities, normal Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated, gray: prompt -
PUPILS, Equality, Yes Size, normal Response to Light, Good Accommodation, Good -
SIGHT, — Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good -
COORDINATION, Arms, Good Legs, fair ~~Grasp,~~ Other tests good -
TREMORS, Hands, none Tongue, fine Facial Muscles, —— General, ——
PATELLAR REFLEX, present Other Reflexes, Elbow: wrist: Jaw. -
ARTICULATION, Slurred, —— Hesitating, —— Slow, ——
FACIAL EXPRESSION, —— Sensibility, ——
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, " "
Murmurs, none
ARTERIES,
Normal
LUNGS,
Chest symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, Genitals normal: cystic degeneration of cervix: Endometritis: leucorrhoea. —
MENSTRUATION,
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 admitted in good physical condition, + is fairly well-nourished. She complains of having some rheumatic pains. She is quick + clear, mentally, on subjects other than her delusions, which she expresses freely. She has delusions of persecution. Patient is rather irritable in her manner: is fairly well educated. -

Personal and Medical History of Kate Dethorn

1902

This patient was brought here by Emanuel Johnson, attended by Mrs Mary Young, in fair physical condition, with following history of case. No consanguinity: as to insane relatives, no, excepting one brother, from Drink. This is 1st attack: first symptoms manifested two weeks ago: delusion — suspected poisons. Disease seems increasing, not variable: no rational intervals. Derangement now shown by fixed delusions on subject of poisoning: Is not disposed to injure others: has not attempted suicide: propensity not active: no filthy or destructive habits: as to any previous peculiarities, not known: no history of intemperance (?), nor of any severe diseases or head-injury. Has not been confined or restrained, but has been under observation, at City Hospital, 10 days. Supposed cause of the disease is Domestic Trouble: On personal Examination, nothing further seems to have been learned.

Dec 17 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair black: eyes brown: Condition of skin, normal. Is clean. Ankles slightly swollen. Teeth: upper 14 teeth lower, 12. Behavior quiet: talks quite intelligently — Rd. by Cynthia Finney)-

Summary of 14 day record dictated by Dr O.C. Hagerdale

Patient admitted on infirmary Sept 17-1902 bathed and put to bed T. P. and R slightly above normal bowels regular took regular diet, converses freely but is very delusional imagines that people are conspiring against her and trying to poison her, sleeps well at night but suspicious in manner and behaviour during day time.

Personal and Medical History of

Personal and Medical History of Augusta Wegner

Whole No. 6262.
Residence, Morristown, Minn.
Date Admission, 18th December 1902.
Admitted by Dr. R. M. Phelps hour, 9:00 PM
How Sent, James Hunter, Dept. Rice County
Sex, Female Age, 44.
Civil Condition, Married.
Children, -8- Age Youngest Child, 7 years.
Occupation, Housewife: husband's, farming.
Degree Education, Common School -
Profession of Religion, Yes: Baptist
Habits, Not known if intemperate
Nativity, Minnesota: Parents born in Germany.
Physicians Committing, P. A. Smith and J. S. Warren
Correspondents, John C. Wagner
nearest telephone } P.O. Waterville R.F.D. #2
telegraph } Morristown: - 5 m - from Morristown
Satchel.

No. for Year, 98.
Insane Relatives, Not known
Cause Exciting, Fall in 1883.
Cause Predisposing, previous attacks -
Form, Chronic Melancholia
Accompanying Bodily Disorder, Injury to head 1883.
Suicidal or not, Suicidal with any instrument, and propensity active: - would injure others.
Date of this Attack, March 1902
Duration, about 9 months
No. of Attack, 3rd -
No. of Admission, 3rd - also in Faribault Hosp. 7 weeks
Age First Attack, - 25 years -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Dec 22 - 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear, except on subject of her delusions -
MEMORY, Past Events, fair
Recent Events, fair Special Subjects, ——
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct, except on subject of her delusions
REASONING POWER, Ordinary Subjects, fair
Special Subjects, — " "
Own Mental State, ——
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, fear of damnation Transitory, —
Special Subjects, Melancholy Ideas -
HALLUCINATIONS, —
ILLUSIONS,
SUMMARY, —

Born Aug 25 - 1858. HISTORICAL.
LENGTH INVASION, since 1883
ONSET, Gradual or Sudden, ——
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
No
Father, Dead: Cancer Stomach
Paternal Relatives, ——
Mother, Living
Maternal Relatives, ——
Brothers and Sisters, 1 6 4 living -
9 children - 7 living -
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Typhoid at 17 years: had 2 operations, while here at hospital, during previous commitments
HABITS, Drinking and Smoking, ——
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework & farm-work
Detail Date, Duration, and Character of Previous Attack, if any,
One in 1883 - for 3 years: also in 1896, for 3 years.
Sleep, fair Appetite, fair Bowels, regular

Personal and Medical History of Augusta Wegner

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft PRESENT WEIGHT, 125 lbs USUAL WEIGHT, —— NUTRITION, fair
WOUNDS, Abnormalities, No - Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt
PUPILS, Equality, —— Size, —— Response to Light, —— Accommodation, ——
SIGHT, fair - wears spectacles
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, ——
HEARING, good
COORDINATION, Arms, good Legs, good ~~Grasp,~~ other tests good -
TREMORS, Hands, fine Tongue, —— Facial Muscles, —— General, ——
PATELLAR REFLEX, patellar Other Reflexes, " ——
ARTICULATION, Slurred, —— Hesitating, —— Slow, ——
FACIAL EXPRESSION, Sensibility, ——
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, None -
ARTERIES,
Slightly sclerotic
LUNGS,
Chest symmetry: yes
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,

GYNECOLOGICAL EXAMINATION, Patient has been previously operated upon for laceration of os, and perinaeum & prolapse of uterus, ventro-fixation & oophorectomy performed: parts ~~MENSTRUATION,~~ now seen free from inflammation and fairly normal. -
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 admitted in fairly good physical condition. She is melancholy & quiet: occasionally weeps: Is actively suicidal & is inclined to injure others. Answers questions quite freely.

1907

Personal and Medical History of Augusta Wegner

This patient was brought here by J.B. Thompson, attended by husband, in fair physical condition, with following history of case. No Consanguinity: as to any heredity, not known. This is not 1st attack; others occurred Sept 22-1896 and Feby 8-1883; Duration 3 years: was sent to Rochester Hospital: result of treatment, improvement. First symptoms of this attack manifested March 1902: restlessness, insomnia melancholic: Disease seems increasing: variable & with rational intervals, but these not regular. Derangement now shown by fear of impending evil: this to injure others; is so disposed: has attempted suicide, with any instrument, and the propensity is active now: not of filthy or destructive habits. Displays a tendency to be cross & irritable: fear of Damnation. As to any history of intemperance, not known Had injury to head, 1883: has been restrained or confined at hospital in Faribault, 7 weeks, and at Rochester. Supposed cause of the disease is Fall in 1883.- Hospital treatment: (See records): On personal examination, Temp. 99° Pulse 84. Tongue slightly coated: melancholic: crying by spells: ——— . ———

Note: 3rd admission: here, 1st time, from Feby 10-1883 to October 18-1883 & discharged October 18-1883, as recovered. Cause exciting then given, as fall from step-ladder: form, "Acute Mania" (See Vol 3 page 32 No 393): and 2nd time, from Sep 22-1896 to November 8/99, and discharged May 2-1900, as improved (See Vol 30 p 345 No 4536): was then suicidal: Cause exciting, Suppressed Menstruation: On each of these occasions was committed as "Augusta Wagner". ——— .. ———

Dec 18 On admission, was put on T.W. (G.H. N. R'pt: Complexion, dark: hair black: eyes hazel: Condition of skin normal: is clean: teeth: upper 2: lower 4: Behavior very quiet: Examined by B. Sommerberg and Eva Wheeler, night nurses). ——— .. ———

Patient very much disturbed and noisy. Dirty in habits.
Very violent and treacherous. Will attack nurses without warning.
At times is quiet. Has many delusions. Patient has been here before.

Jan 20th Patient attacked nurses during the day and was secluded. About 10:15 in the morning she wrenched the window screen away from the window and threw herself out of the south window of B.2 West fracturing her left arm near the wrist and injuring her side and sustaining bruises to other parts of the body. Arm put in cast

Jan 25th Wound dressed with hot boric compress. Cast partially removed.
" 27th Entirely removed and hand put in splints.
Feb. 17th Arm does not seem to be healing well, Patient very maniacal, disturbed and resistive.

See files

Personal and Medical History of

Personal and Medical History of Mary E. Horsman

Whole No. 6263.

Residence, Fillmore County, and patient has been a resident of Fillmore Co. for 40 years

Date Admission, 19th December 1902

Admitted by Dr. O. C. Heyerdale hour, 10 30 am

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

Sex, Female Age, 46

Civil Condition, — Single —

Children, None Age Youngest Child, —

Occupation, Housewife: father a farmer

Degree Education, Not educated

Profession of Religion, United Brethren

Habits, Not intemperate.

Nativity, Canada: parents born in England

Physicians Committing, C. D. Utley and C. B. Eby.

Correspondents, mother Sarah Horsman Washington Minn

No. for Year, 99.

Insane Relatives, None

Cause Exciting, Menopause

Cause Predisposing, Previous attack

Form, Epileptic – Defective

Accompanying Bodily Disorder, None mentioned –

Suicidal or not, Suicidal with knife: propensity active

Date of this Attack, December 11th 1902

Duration, — 8 Days –

No. of Attack, 2nd (one 7 years ago) –

No. of Admission, 1st

Age First Attack, about 39.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. L. A. Luiton *Date of* Dec – 1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear – Sluggish

MEMORY, Past Events, Defective —

Recent Events, — Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull – Correct –

REASONING POWER, Ordinary Subjects, Defective

Special Subjects, —

Own Mental State, appreciates

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

— Normal –

DELUSIONS, Systematized, Nothing determined 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 paralyzed: one niece died of tuberculosis

Father, Dead: paralytic: hemiplegia from apoplexy.

Paternal Relatives, —

Mother, Living

Maternal Relatives, —

Brothers and Sisters, 3 Sisters living — one dead – / 3 brothers living — one dead –

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

– nothing –

HABITS, Drinking and Smoking, good

HEADACHES, VERTIGO, OR CONVULSIONS, frontal headache vertigo — convulsions –

OCCUPATION, Healthy or not, Housework –

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

—

Sleep, — Says she sleeps well — Appetite, fair Bowels, Constipated –

Personal and Medical History of Mary E. Horsman

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, 118 lbs USUAL WEIGHT, — NUTRITION, Fair

WOUNDS, Abnormalities, Congenital hip-disease, causing shortening right leg – Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, Slightly coated, prompt in action, but somewhat tied —

PUPILS, Equality, unequal Size, right pupil contracted Response to Light, Yes Accommodation, Yes

SIGHT, Good

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

HEARING, Good

COORDINATION, Arms, fair Legs, poor { Standing eyes shut fair – / Finger to nose eyes shut – fair / Standing on one foot fair – / Turning quickly poor } Grasp,

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

PATELLAR REFLEX, present Other Reflexes, absent

ARTICULATION, Slurred, — Hesitating, — Slow, Slow, indistinct, due to shape of palate which is very high & narrow: tongue also slightly tied.

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, fairly strong

Size, normal

Apex Beat,

Murmurs, none –

ARTERIES,

Normal

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,

GYNECOLOGICAL EXAMINATION, Genitals normal: hymen intact: uterus normal in position & free: cervicitis, leucorrhoea –

MENSTRUATION,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sleeps well –

BOWELS, Present Condition, requires occasional cathartics

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 a defective, and, aside from the statement made in her commitment papers that she had been actively suicidal, she would be a fit subject for the Institution for the "Feebleminded" – She has been quiet: has had no convulsions, and has made no attempt on her life. —

This Patient was brought here by Dep. E. A. Leonard, attended by Chas. Horsman, brother, in fair physical condition, with following history of case. No consanguinity. No history of heredity. This is not 1st attack: one occurred 7 years ago: duration 3 months: was not sent to hospital: First symptoms of this attack manifested December 11th 1902; became violent & threatened suicide: Disease seems increasing: there are rational intervals, but these not regular: Derangement now shown by being melancholy: attempted suicide: not lately disposed to injure others: Has attempted suicide, with knife: propensity active now. Not disposed to filthy or destructive habits: No previous peculiarities manifested except has been feeble minded. No history of intemperance, nor of any severe disease &c, or head-injury. Has not been restrained or confined. Supposed cause of the disease is menopause. Treatment none. On personal examination the following noted: facial appearance and timidity: Commitment recommended because it is reasonably certain by her threats or otherwise that she has dangerous tendencies or uncontrollable propensity toward crime & patient resident of Gilmer Co 40 yrs.

Dec 19 On admission, was put in 1W. (G.H.N. Rpt: Complexion dark: hair gray: eyes gray: Condition of skin normal. Is clean: walks lame, left limb. Teeth. Upper 11. - Lower 7. Behavior quiet: Expressed no delusions.)

Summary of 14 day record dictated by Dr L. A. Linton.

Patient admitted Dec 19th patient was quiet answered questions sensibly is neat and clean; put on regular diet allowed to be up on the ward Dec 22nd began to assist with the lighter work of the ward; Temp ranged during first two weeks from normal to 100^{8} pulse 72 to 90 respirations 14 to 24. Transferred to the Annex on the 26th because of a violent attachment that sprung up between her and another patient. Patient quite disturbed and cried a great deal after removal quite stubborn and careless in her dress. she gradually became clear and more contented.

Personal and Medical History of Mary Hochwin

Whole No. 6264.
Residence, St. Paul, Minn
Became resident of State 1888: of County 1888.
Date Admission, 19th December 1902.
Admitted by Dr L. A. Linton — hour, 7.00 PM
How Sent, E. W. Bazille, J of P. Ramsey County
Sex, Female Age, 60.
Civil Condition, married
Children, 2 Age Youngest Child, 20.
Occupation, Wash-woman
Degree Education, not educated.
Profession of Religion, Catholic.
Habits, Not intemperate
Nativity, Austria: Parents also born there.
Physicians Committing, John A. Vieregge MD Geo. B. Moore
Correspondents, none given in papers -
See letter Jany 5/03. from Michael Mandl, Florist. 165-167 S. Franklin St. St Paul Minn, saying he has been duly appointed administrator }

No. for Year, 100.
Insane Relatives, none
Cause Exciting, unknown
Cause Predisposing, probably age & privation.
Form, Senile Dementia
Accompanying Bodily Disorder, none specially mentioned
Suicidal or not, — not —
Date of this Attack, Dec 18 - 1902
Duration, — 1 Day —
No. of Attack, not 1st. (2nd) - one in Feby 1902.
No. of Admission, 1st —
Age First Attack, — about 59 - past
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale — *Date of* Dec 23 - 1902

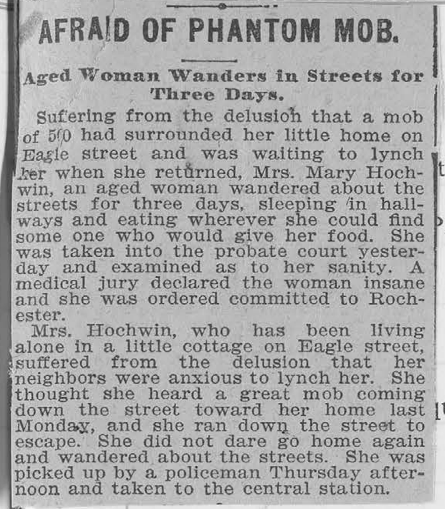
MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quick, but not wholly clear.
MEMORY, Past Events, poor
Recent Events, " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert —
REASONING POWER, Ordinary Subjects, poor
Special Subjects, poor
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
— Normal —
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,
Patient is demented
Born Dec 8 - 1842 - 60 years old — Austria

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,~~ 2 Children
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
—
HABITS, Drinking and Smoking, —
no HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework -
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, poor Appetite, fair Bowels, Constipated.

Personal and Medical History of Mary Hochwin



AFRAID OF PHANTOM MOB.

Aged Woman Wanders in Streets for Three Days.

Suffering from the delusion that a mob of 500 had surrounded her little home on Eagle street and was waiting to lynch her when she returned, Mrs. Mary Hochwin, an aged woman wandered about the streets for three days, sleeping in hallways and eating wherever she could find some one who would give her food. She was taken into the probate court yesterday and examined as to her sanity. A medical jury declared the woman insane and she was ordered committed to Rochester.

Mrs. Hochwin, who has been living alone in a little cottage on Eagle street, suffered from the delusion that her neighbors were anxious to lynch her. She thought she heard a great mob coming down the street toward her home last Monday, and she ran down the street to escape. She did not dare go home again and wandered about the streets. She was picked up by a policeman Thursday afternoon and taken to the central station.

PHYSICAL CHARACTERISTICS.

½ in PRESENT WEIGHT, 109½ lbs. USUAL WEIGHT, — NUTRITION, poor
ties, None Condition of Skin, normal
romptness of Movement, white Coating: prompt -
Yes Size, yes Response to Light, good Accommodation, good
good
quint, Arcus Senilis, or other troubles, normal
good finger to nose, eyes shut, good: —
COORDINATION, Arms, good Legs, standing on one foot fair Grasp, standing eyes shut, fair
TREMORS, Hands, — Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, Normal
Strength, Sounds, normal
Size, Normal
Apex Beat, " "
Murmurs, None
ARTERIES,
Somewhat sclerotic
LUNGS,
Chest Symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, Perinaeum slightly lacerated: senile vaginitis: Cervix atrophied: uterus free, atrophied.-
MENSTRUATION,
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 is old & demented; is quiet & causes no trouble. She converses freely. Is quite feeble, physically. —

Personal and Medical History of Mary Hochwin

Whole No. 6264.

Residence, St. Paul, Minn

Became resident of State 1888: of County 1888.

Date Admission, 19th December 1902.

Admitted by Dr L. A. Linton — hour, 7.00 PM

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

Sex, Female Age, 60.

Civil Condition, married.

Children, 2 Age Youngest Child, 20.

Occupation, Wash-woman

Degree Education, not educated.

Profession of Religion, Catholic.

Habits, Not intemperate

Nativity, Austria: Parents also born there.

Physicians Committing, John A. Vieregge MD Geo. B. Moore

Correspondents, none given in papers —

See letter Jany 5/03. from Michael Mandl, Florist, 165-167 E. Franklin St. St Paul Minn, saying he has been duly appointed administrator

No. for Year, 100.

Insane Relatives, no

Cause Exciting, Unk

Cause Predisposing, pro

Form, Senile D

Accompanying Bodily Disorder,

Suicidal or not,

Date of this Attack, Dec

Duration, — 1 Day —

No. of Attack, not 1st. (2nd) - one in Feby 1902.

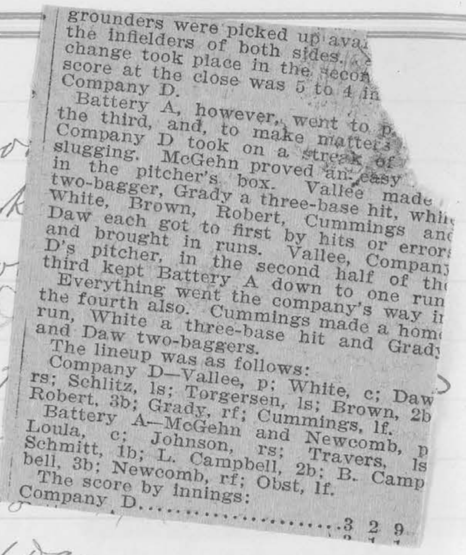
No. of Admission, 1st —

Age First Attack, — about 59 - past

Time of Leaving,

Time in Hospital,

Result,



grounders were picked up ava
the infielders of both sides.
change took place in the secon
score at the close was 5 to 4 in
Company D.

Battery A, however, went to p
the third, and, to make matter
Company D took on a streak of
slugging. McGehn proved an easy
in the pitcher's box. Vallee made
two-bagger, Grady a three-base hit, whi
White, Brown, Robert, Cummings an
Daw each got to first by hits or error
and brought in runs. Vallee, Compan
D's pitcher, in the second half of th
third kept Battery A down to one run
Everything went the company's way i
the fourth also. Cummings made a hom
run, White a three-base hit and Grad
and Daw two-baggers.

The lineup was as follows:

Company D—Vallee, p; White, c; Daw
rs; Schlitz, ls; Torgersen, ls; Brown, 2b
Robert, 3b; Grady, rf; Cummings, lf.

Battery A—McGehn and Newcomb, p
Loula, c; Johnson, rs; Travers, ls
Schmitt, 1b; L. Campbell, 2b; B. Camp
bell, 3b; Newcomb, rf; Obst, lf.

The score by innings:

Company D.......................3 2 9

Examination on Admission by Dr. O. C. Heyerdale — *Date of* Dec 23-1902

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quick, but not wholly clear.

MEMORY, Past Events, poor

Recent Events, " Special Subjects, " "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert —

REASONING POWER, Ordinary Subjects, poor

Special Subjects, poor

Own Mental State, —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

— Normal —

DELUSIONS, Systematized, — Transitory, —

Special Subjects, —

HALLUCINATIONS, —

ILLUSIONS, —

SUMMARY,

Patient is demented

Born Dec 8 - 1842 - 60 years old — Austria

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~~, 2 Children

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

—

HABITS, Drinking and Smoking, —

HEADACHES, VERTIGO, OR CONVULSIONS, no —

OCCUPATION, Healthy or not, Housework —

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

—

Sleep, poor Appetite, fair Bowels, Constipated.

Personal and Medical History of Mary Hochwin

AFRA

Aged V

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of 5

Ea

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1½ in PRESENT WEIGHT, 109½ lb. USUAL WEIGHT, — NUTRITION, poor

WOUNDS, Abnormalities, None Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, white Coating: prompt —

PUPILS, Equality, Yes Size, yes Response to Light, good Accommodation, good

SIGHT, good

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

HEARING, good finger to nose, eyes shut, good: —

COORDINATION, Arms, good Legs, standing on one foot fair Grasp, standing eyes shut, fair

TREMORS, Hands, — Tongue, — Facial Muscles, — General, —

PATELLAR REFLEX, present Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, Normal

Strength, Sounds, normal

Size, Normal

Apex Beat, " "

Murmurs, None

ARTERIES,

Somewhat sclerotic

LUNGS,

Chest Symmetry: Yes

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,

GYNECOLOGICAL EXAMINATION, Perinaeum slightly lacerated: senile vaginitis: Cervix atrophied: uterus free, atrophied. —

MENSTRUATION,

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 is old & demented; is quiet & causes no trouble. She converses freely. Is quite feeble, physically. —

Personal and Medical History of Mary Hockwin

1902

This patient was brought here by Dep. E. Johnson, attended by Mrs Bucker, in fair physical condition, with following history of case. No consanguinity: No heredity. This is not 1st attack: one occurred February 1902; duration 3 or 4 weeks: was not sent to Hospital: first symptoms of this attack manifested Dec 18-02 wandering around, and hallucinations: Disease seems increasing: variable and with rational intervals; but these not regular. Derangement now shown in that she imagines that people are trying to kill her: also claims she is "haunted by spirits". Is not disposed to injure others, nor suicidal: not of filthy or destructive habits. No history of any previous peculiarities, nor of intemperance, severe disease &c, nor head-injury: has not been restrained or confined. Cause of disease, unknown. Treatment none. On personal Examination, mind wandering is noted.

Dec 19 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair gray: eyes hazel: Condition of skin normal: scar on right breast: bruises on both hands: is dirty: thumb & third finger, on left hand, crippled: varicose veins on both legs: &c Behavior quiet: Speech coherent):

Summary of 14 day record dictated by Dr O. C. Heyerdale
Patient admitted on infirmary west Dec 19-1902 bathed and put to bed. during first two weeks T. P and R about normal took regular diet bowels regular is quiet in manner and behaviour sits quietly about the ward. gives no trouble. typical case of senile dementia.

Personal and Medical History of

Personal and Medical History of Rebecca Fein

also Henry Fein (residence) 130 Eaton ave. St Paul
775 Main (telephone) Greenberg Bros (work here)

Whole No. 6268.

Residence, St Paul, Minn

Became resident of State 1900: of County 1900.

Date Admission, 29th December 1902

Admitted by Dr. R.M. Phelps hour, 7.30 p.m.

How Sent, E.W. Bazille, Jof P. Ramsey County

Sex, Female Age, 27 years

Civil Condition, Married

Children, Two – Age Youngest Child, six months

Occupation, Housewife: husband, a laborer.

Degree Education, Can read & write.

Profession of Religion, Yes: Jewish

Habits, not intemperate

Nativity, Russia: parents also born there.

Physicians Committing, A.L. Whitcomb and Arthur Sweeney

Correspondents, Henry Fein (husband) – 9th & Rosabell Sts. St Paul

Main 775 Northwestern

No. for Year, 104.

Insane Relatives, none

Cause Exciting, Injury to head

Cause Predisposing, probably " " "

Form, Acute Melancholia, with delusions

Accompanying Bodily Disorder, head – injury –

Suicidal or not, not attempted: if propensity active, unkn.

Date of this Attack, a month ago

Duration, " " –

No. of Attack, 1st

No. of Admission, 1st here (at Bethesda Hosp. 24 hrs)

Age First Attack, 27 years.

Time of Leaving, 15th Jany 1903

Time in Hospital, 17 Days.

Result, Unimproved: Disp Feb 9/03 by B of C.

Examination on Admission by Dr. Dr. O.C. Heyerdale *Date of* Jany 8-1903.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear on some subjects: Confused on others –

MEMORY, Past Events, Fair

Recent Events, " " Special Subjects, " "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct, except along line of delusions –

REASONING POWER, Ordinary Subjects, poor

Special Subjects, " "

Own Mental State, —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

– Depressed –

DELUSIONS, Systematized, — Transitory, —

~~Special Subjects,~~ Of a persecutory type: Believes she is going to die –

HALLUCINATIONS, "of hearing"

ILLUSIONS, —

SUMMARY, —

Acute Melancholia

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, four weeks

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). no

Father, Living –

Paternal Relatives, —

Mother, Dead –

Maternal Relatives,

Brothers and Sisters, 3 sisters: 1 brother. –

3 children: 2 now living –

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

HABITS, Drinking and Smoking, Drinks stimulants moderately.

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Housework

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

Sleep, poor Appetite, poor Bowels, —

Personal and Medical History of Rebecca Fein

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, — USUAL WEIGHT, — NUTRITION, poorly nourished

WOUNDS, Abnormalities, — Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, Prompt: grayish Coating –

PUPILS, Equality, — Size, — Response to Light, — Accommodation, —

SIGHT, good

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

HEARING, good —

COORDINATION, Arms, good Legs, good ~~Grasp,~~ other tests good

TREMORS, Hands, — Tongue, fine Facial Muscles, — General, —

PATELLAR REFLEX, — Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, Regular

Strength, Sounds, Strong

Size, Normal

Apex Beat, normal

Murmurs, None –

ARTERIES, Normal

LUNGS,

Chest symmetry: Yes

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,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus normal in position, Enlarged: Cervicitis, Endometritis, leucorrhoea. –

MENSTRUATION,

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 admitted in fair physical health, but rather poorly nourished. She is a Jew; born in Odessa, Russia: Came to U.S. in 1896. She is Melancholy & Delusional; has delusions of persecution & hallucinations of hearing. She is restless, resistive & stubborn. –

Personal and Medical History of Rebecca Fein

1902

This patient was brought here by Emanuel Johnson, attended by Henry Fein
(hus), in fair physical condition, with following history of case. No consanguinity:
no heredity: This is 1st attack: first symptoms manifested a month ago: by
delusions of persecution: disease seems increasing: variable and with rational
intervals; but these not regular. Derangement now shown in that she believes
she is going to die: "hears voices", talking about her: believes the papers contain
articles about her. Is not disposed to injure others: has not attempted suicide:
if propensity now active, unknown: not disposed to filthy or destructive habits.
no previous peculiarities manifested: no history of intemperance. Was
kicked in head, a month ago. Has been confined at Bethesda hospital, w[illegible] [illegible].
Supposed cause of the disease is injury to head. Treatment, sedative: no result.
On personal examination, talks freely: talks of "hearing rappings" in wall: is listless & depressed.
Dec 29 On admission, was put on I.W. (G.H.N. R'pt: Complexion dark: hair black: eyes brown:
Condition of skin normal: scars on left limb: slight bruise on right limb: & clean:
Teeth: upper 14: lower 12: Quiet: Speech coherent: Examined by Nurse Mary Shea).-
Summary of 14 day record dictated by Dr L.C. Linton
Patient admitted December 29th quite noisy and restive
out of bed almost constantly walking listlessly about the
room would not remain properly clothed on the
30th of Dec became weak and went into a sort of stouporous
condition from which she did not fully raise. bowels
moved very frequently during the next few days odor
Void quite bad breath also offensive tongue and teeth covered
with thick brown coating; was fed by mechanical
means during the time; Temp ranged from normal
to 103 4/5 Pulse from 65 to 140: resp's from 18 to 36. became
very weak and unable to swallow died at 7'10 P.M.
Jan 4 - 1903

Personal and Medical History of Sarah Smith

Information + Proof of residence made by William B. Hancock. —

Whole No. 6269.

Residence, Red Wing — Minn:
Became resident of Minnesota Apl 30-1870: of Co. Goodhue Apl 30-1870.

Date Admission, 29th December 1902.

Admitted by Dr. R.M. Phelps hour, 7:30 pm

How Sent, Axel Haller, Soft. Goodhue County

Sex, Female Age, 56 —

Civil Condition, Single

Children, ✓ Age Youngest Child, ✓

Occupation, Housekeeping: Father, a Carpenter.

Degree Education, Common School

Profession of Religion, not a church member

Habits, not intemperate

Nativity, Berlin, Washington Co. Vermont: Father's Vermont: Mother New Hampshire

Physicians Committing, J. W. Dimmitt and A. W. Jones

Correspondents, (Bro) W. E. Smith, Hastings, Minn:
W. B. Hancock, 1208 Walnut St. Redwing — (Telephone in city, only)

No. for Year, 105.

Insane Relatives, One sister + a maternal uncle

Cause Exciting, Unknown — (Head injuries see)

Cause Predisposing, Heredity — + many atts.

Form, Chronic Mania

Accompanying Bodily Disorder, Head Injuries — weakness —

Suicidal or not, — not —

Date of this Attack, December 20 — 1902

Duration, — 9 days —

No. of Attack, Many: (During past 42 years)

No. of Admission, 1st

Age First Attack, about 14 —

Time of Leaving, January 4 — 1903.

Time in Hospital, 6 Ds

Result, Died; organic heart disease

Examination on Admission by Dr. L. A. Linton *Date of* Dec 31/02

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,

Nothing could be obtained from patient as she has been too disturbed to realize anything.

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).

Nothing obtained

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 Sarah Smith

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, poor

WOUNDS, Abnormalities, selfinflicted scratches, all over body — bruise on right elbow. Condition of Skin, normal, except for scratches —

TONGUE, Coatings, Promptness of Movement, thick brown Coating —

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

SIGHT, —

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

HEARING, —

COORDINATION, Arms, — Legs, — Grasp, —

TREMORS, Hands, fine tremor Tongue, — Facial Muscles, none General, none

PATELLAR REFLEX, Present — Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, poor Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular but weak + pulse of low tension

Strength, Sounds, weak

Size, enlarged

Apex Beat, lowered to left

Murmurs, mitral regurgitation

ARTERIES, normal

LUNGS,
Chest Symmetry: Symmetrical but Emphysematous: Pigeon chested —
Expansion: poor). Whole chest
Breath Sounds: hyperresonant rales in lower part of left lung — hyperresonance all over chest

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,

GYNECOLOGICAL EXAMINATION, not made —

MENSTRUATION,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sleeps poorly —

BOWELS, Present Condition, has 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, during first day after admission, was very restless; pulled her bed to pieces + was constantly picking at something: walked the floor + muttered to herself. Since that time she has been in a semi-stuporous condition. Her abdomen is distended and tympanitic throughout. She seems to have gastric distress, judging from her expression + movements. Her breath, exhalations from body + stools are quite offensive. She has developed a large bed sore that is black + sloughing: she refuses all food + medicine. —

Personal and Medical History of Sarah Smith

1902

Proof of residence made by

This patient was brought here by W. E. Smith, attended by Wm. H. Watson and Miss
Maud Hancock, in aged condition, with following history of case. No consanguinity:
but one sister and a maternal uncle insane. This is not 1st attack: others occurred at
irregular intervals, during the past 42 years: duration from a few weeks to three months.
First symptoms of this attack manifested December 20 - 1902: Complained of Dizziness,
had a slight fever; later, hallucinations. Disease seems increasing; not variable:
no rational intervals: Derangement now shown in that she fears she will die:
Imagines others want to injure her; talks incoherently: Is not disposed to injure others
nor suicidal: nor of filthy or destructive habits: As to any previous peculiarities,
no; not before first attack; but the attacks were accompanied by excessive irritability:
no history of intemperance. Received injuries of head, at 4 years of age & at about 14 years:
Only manual restraint, at times, has been employed. Cause of disease is unknown.
Ordinary sedative treatment: results temporary: On personal examination, the
following noted: Gesticulations - staring eyes - tendency to be poetical: acce-
lerated pulse: scar on head: mental excitement - Incoherent speech:—
Dec 29 On admission, was put on T.W. (G.H.N. Rpt: Complexion light: hair gray:
eyes gray: condition of skin normal: scar on right arm & scratches
on back and limbs: open sore on right elbow: Is clean: Teeth: upper 3:
lower: 4: Behavior, very disturbed: talks incoherently: Examined by Mary Shea)—
Summary of 14 day record dictated by Dr L.A. Linton
Patient admitted Dec 29th quite noisy and resistive out
of bed almost constantly walking listlessly about
the room would not remain properly clothed; on the
evening of Dec 30th became weak went into a sort
of stuporous condition from which she did not
fully raise bowels moved very frequently during the
next few days odor quite bad breath also offensive
tongue and teeth covered with thick brown coating
was fed mechanically during this time temp ranged
from normal to 103+ pulse from 65 to 140 resp from
18 to 36; patient became very weak and unable to
swallow Died at 7:10 P.M. Jan 4-1903

Personal and Medical History of Mary Ann Fitzpatrick #2

Whole No. 6270.
Residence, Stewartville, Minn.
Became resident of Minnesota, at Birth. of County, at birth.
Date Admission, 30th December 1902.
Admitted by Dr. O.C. Heyerdale — hour, 3:30 P.M.
How Sent, J.A. Leonard, Jof P. Olmsted Co.
Sex, Female Age, 39? (29)
Civil Condition, Single
Children, None Age Youngest Child, —
Occupation, Housework; father, a farmer.
Degree Education, Common school
Profession of Religion, Catholic
Habits, Probably good: father used tobacco to excess.
Nativity, Olmsted Co. Minn.; Parents, Ireland
Physicians Committing, A.S. Adams and Chas. T. Granger.
Correspondents, Laurence E. Fitzpatrick
Stewartville, Minn.

No. for Year, 106
Insane Relatives, Yes: father is now under guardianship
Cause Exciting, Heredity
Cause Predisposing, " & prev. attk.
Form, Acute Melancholia —
Accompanying Bodily Disorder, None mentioned.
Suicidal or not, — not —
Date of this Attack, 3 weeks ago —
Duration, " " —
No. of Attack, 2nd (one in 1895) —
No. of Admission, 2nd
Age First Attack, about 22 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale *Date of* Jany 8-1903.

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,
— Alert —
REASONING POWER, Ordinary Subjects, Fair
Special Subjects, —
Own Mental State, Does not appreciate her Condition.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
—
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,
Acute Melancholia —
Born Feby 23-1870 —

HISTORICAL.

LENGTH INVASION, 3 weeks
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
— Father Insane —
Father, Living —
Paternal Relatives, —
Mother, Living —
Maternal Relatives,
Brothers and Sisters, 2 sisters living — one dead
1 brother " 1 dead.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
—
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
Was here in 1892 or 91 for 2 months
Sleep, poor Appetite, fair Bowels, regular

Personal and Medical History of Mary Ann Fitzpatrick #2

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, 138 lbs USUAL WEIGHT, — NUTRITION, fairly well nourished
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Prompt
PUPILS, Equality, Yes Size, normal Response to Light, fair Accommodation, fair
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, Good Legs, good Grasp, other tests good.
TREMORS, Hands, Coarse Tongue, fine Facial Muscles, — General, —
PATELLAR REFLEX, present: diminished. — Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, None
ARTERIES,
Normal
LUNGS,
Chest Symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus retro flexed: adherent on the right: somewhat enlarged: cervicitis: leucorrhoea —
MENSTRUATION,
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 admitted in fairly good Physical health: & fairly well nourished: She is melancholy: somewhat nervous: frets & worries constantly: & unoccupied. Converses freely: has a fair education. —

Personal and Medical History of Mary Ann Fitzpatrick #2

1902

This patient was brought here by Sheriff Vine, attended by Mrs Annie Liskow, in fair physical condition, with following history of case. No consanguinity: as to insane relatives, Yes: father is now under guardianship. This is not 1st attack: One occurred in 1895: duration 2 months: was sent to Rochester State Hospital. x Committed on Oct 2nd 1895: first symptoms of this attack manifested 3 weeks ago: nervousness, irritability and tendency to wander. Disease seems increasing: variable & with rational intervals; Derangement now shown by extreme nervousness: irritable & excitable. Is not disposed to injure others, nor suicidal. not disposed to filthy or destructive habits. No previous peculiarities manifested. Father used tobacco to excess. Has not been subject to any severe disease &c, or head injury: Has been confined at State Hospital, as noted: Cause of the disease is heredity.— Treatment, none. On personal examination, nothing learned, except as noted above.

x Note. 2nd admission: here before from Oct 2–1895 to Dec 15–1895, & discharged May 6–1896 as Improved: Form, then, "Pubescent Insanity". Cause given as worry: For further particulars of patient's previous history see Vol 28 p381 No 4214)—

Dec 30 On admission, was put on I.W. (G. H. N. Rpt. Complexion light: hair red: eyes blue: condition of skin, slight eruption on back: Is clean: has large Goitre: Teeth: Upper 10: Lower, 9: Behavior quiet: Speech coherent: Ex by Nurse, Mary Shea).—

Patient received on ward, bathed and put to bed: Is quiet in behavior and converses readily: restless during the night.

Jan. 2nd Has a slight infection on the finger. Alcohol and dressings applied daily.

Jan 14th & 15th Patient visited by brother-in-law. Jan. 16th She expresses a great many delusions; is restless and nervous in manner: neat and clean in habits and appearance: appetite good: bowels regular. sleeps well at night. Has a stye on left eye.

Jan 16th Visited by two ladies and a gentleman friend.

Jan. 31st Patient seems to be steadily growing more nervous and excitable: Has a delusion that she is going to have an operation and is continually talking about it, and asks almost every time physicians enter the ward that they promise not to operate on her. At times is so disturbed that she is put in seclusion. At times bars herself in her room. Is resistive and violent.

Personal and Medical History of

Personal and Medical History of Zata Di Bene

Whole No. 6273.
Residence, St Paul, Minn
Became resident of State 1892: of County 1892.
Date Admission, 5th January 1903.
Admitted by Dr L. A. Linton hour, 7.00 P.M.
How Sent, E. W. Bazille, Jeff. Ramsey County
Sex, Female Age, 54 years
Civil Condition, married
Children, Three Age Youngest Child, 16 years
Occupation, Housewife: husband, a fruit merchant
Degree Education, not educated –
Profession of Religion, Yes: Roman Catholic
Habits, not intemperate
Nativity, Italy: parents also born there.
Physicians Committing, J. A. Quinn and O. W. Archibald
Correspondents, none given in papers

No. for Year, 109.
Insane Relatives, none
Cause Exciting, worrying over loss of child
Cause Predisposing, "Chronic"
Form, Melancholia
Accompanying Bodily Disorder, None mentioned –
Suicidal or not, not –
Date of this Attack, never fully recovered from 1st att.
Duration, about 9 months
No. of Attack, 2nd (one in March 1902)
No. of Admission, 1st here (was at Detention Hosp.)
Age First Attack, about 53.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Jany – 1903

MENTAL CHARACTERISTICS.

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

Patient speaks only Italian. Does not understand English, excepting a few words

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 Zata Di Bene

Rochester Bulletin
12/7/03

Insanity Caused by Grief.

Mrs. Zata Di Bene was today committed to the Rochester hospital by the probate court of Ramsey county. She is the wife of an Italian who used to keep a fruit store in St Paul, and is now in Italy. It is supposed that her mind has become affected from brooding on the loss of her son, a small boy who was drowned in the river before her eyes. When she has found opportunity, it is said, she has been accustomed to wade into the river and search for the boy.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 143 lbs USUAL WEIGHT, — NUTRITION, fair
ties, Small lipoma in left groin Condition of Skin, normal
romptness of Movement, Slightly coated: prompt
equal Size, normal Response to Light, yes Accommodation, yes
good
uint, Arcus Senilis, or other troubles, normal
good
rms, good Legs, good ~~Grasp,~~ Other tests good.
none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, Diminished Other Reflexes, Elbow & wrist
ARTICULATION, Slurred, good Hesitating, ——— Slow, ———
FACIAL EXPRESSION, Sensibility, ———
HEART, Regularity, regular
Strength, Sounds, fairly strong
Size, normal
Apex Beat,
Murmurs, none
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,

GYNECOLOGICAL EXAMINATION, Perineum lacerated: slight rectocele: carunculae some-what hypertrophied: slight prolapse of uterus: cervical polypi: bleeding
~~MENSTRUATION,~~ at touch: endometritis: cervicitis.
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps well –
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 quiet: slightly depressed: seems alert: understands when she is addressed, but cannot converse, except in Italian. –

Personal and Medical History of Zata Di Bene

Whole No. 6273.

Residence, St Paul, Minn

Became resident of State 1892: of County 1892

Date Admission, 6th January 1903.

Admitted by Dr L. A. Linton hour, 7oo PM

How Sent, E. W. Bazille, Jeff. Ramsey County

Sex, Female Age, 54 years

Civil Condition, married

Children, Three Age Youngest Child, 16 years

Occupation, Housewife: husband, a fruit merchant

Degree Education, not Educated –

Profession of Religion, Yes: Roman Catholic

Habits, not Intemperate

Nativity, Italy: Parents also born there.

Physicians Committing, J. A. Quinn and O. W. Archibald

Correspondents, none given in papers

No. for Year, 109.

Insane Relatives, non

Cause Exciting, worrying over

Cause Predisposing, "Chron

Form, Melancholi

Accompanying Bodily Disorder, none men

Suicidal or not, not –

Date of this Attack, never fully recovered from 1st atk

Duration, about 9 months

No. of Attack, 2nd (one in March 1902)

No. of Admission, 1st here (was at Detention Hospl)

Age First Attack, about 53.

Time of Leaving,

Time in Hospital,

Result,

pecial

DAY,

TY DETENTI

Examination on Admission by Dr. L. A. Linton *Date of* Jany – 1903

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

MEMORY, Past Events,

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Seems alert

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Somewhat Depressed

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

Patient Speaks only Italian. Does not understand English; understand a few words

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, —

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 Zata Di Bene

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 6in PRESENT WEIGHT, 143lbs USUAL WEIGHT, — NUTRITION, fair

WOUNDS, Abnormalities, Small lipoma in left groin Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, Slightly coated: prompt

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

SIGHT, good

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

HEARING, good

COORDINATION, Arms, good Legs, good ~~Grasp,~~ Other tests good.

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

PATELLAR REFLEX, Diminished Other Reflexes, Elbow & wrist

ARTICULATION, Slurred, good Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular

Strength, Sounds, fairly strong

Size, normal

Apex Beat,

Murmurs, none

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,

GYNECOLOGICAL EXAMINATION, Perinaeum lacerated: slight rectocele: carunculae somewhat hypertrophied: slight prolapse of uterus: cervical polypi: bleeding at touch: endometritis: cervicitis.

~~MENSTRUATION,~~

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sleeps well –

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 quiet: slightly depressed: seems alert: understands when she is addressed, but cannot converse, except in Italian. –

Personal and Medical History of Zata Di Bene

1903

This patient was brought here by Dep'y. E. Johnson, attended by Mary B. Young, in fair physical condition, with following history of case. No history of consanguinity or heredity: This is not 1st attack: one occurred in March 1902.- duration six weeks: was sent to Detention Hospital & discharged. Never fully recovered from 1st attack: brooding over the drowning of her son- Disease seems increasing: not variable: no rational intervals. Derangement now shown in that she believes that her sons want to poison her. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. As to any previous peculiarities unknown. No history of intemperance, nor of any severe disease &c, nor head-injury. Has not been restrained or confined. Supposed cause of disease is worrying over loss of child. Treatment none.

On personal examination, patient is talkative. ——

Jan 6 On admission, was put on T.W. (G.H.N. R'pt: Complexion dark: hair black: eyes brown: condition of skin normal: scars on back & upper part of right thigh: Is very dirty: right ankle somewhat swollen. Teeth, lower 12 & 2 roots: Teeth, upper 8 and 1 root. Behavior quiet. Does not speak English)-

Patient received on ward, bathed and put to bed. Is quiet and slept well during the first night. Converses readily in her own language although she does not understand or speak English very well.

During first two weeks after admission her range of temperature was from 98.2° to 101.4°: Respiration 19 to 28: Pulse 70 to 82.

Was put on regular diet and sedatives. Appetite seemed very good.

Personal and Medical History of

Personal and Medical History of Anna, Olson #3

Whole No. 6276

Residence, St Paul, Minn

Became resident of State 1897: of County 1897

Date Admission, 8th January 1903.

Admitted by Dr. O. C. Heyerdale hour, 7:30 P.M.

How Sent, E. W. Bazille, Jof P. Ramsey County.

Sex, Female Age, 32

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Sewing-Girl

Degree Education, Common School

Profession of Religion, Yes: Lutheran

Habits, not intemperate

Nativity, Norway; Parents also born there.

Physicians Committing, Haldor Sneve & L. E. Penny

Correspondents, Rev. Chr. O. Brohaugh - 298 Williams St. St Paul Minn

Guardian for Anna Olson }

No. for Year, 112.

Insane Relatives, Not as far as known

Cause Exciting, Worry & ill-health

Cause Predisposing, Probably " "

Form, Ac. Melancholia with delusions

Accompanying Bodily Disorder, Insomnia

Suicidal or not, not —

Date of this Attack, 6 months ago

Duration, 6 months

No. of Attack, 1st —

No. of Admission, 1st here (was at Bethesda Hospl.).

Age First Attack, 31 past.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Jany 19/03

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quick: Confused

MEMORY, Past Events, good

Recent Events, " " Special Subjects, " "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert

REASONING POWER, Ordinary Subjects, fair

Special Subjects, poor, along line of delusions

Own Mental State, —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed —

DELUSIONS, Systematized, — Transitory, —

~~Special Subjects,~~ Has many delusions: thinks she has committed great wrongs & crimes.

HALLUCINATIONS,

ILLUSIONS, —

SUMMARY,

Melancholy & Delusional.

Age 32 - Jany 6 - 1871 HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, —

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

Mother died of Consumption

Father, Dead —

Paternal Relatives, —

Mother, Dead — Consumption

Maternal Relatives, —

Brothers and Sisters, 2 sisters: 1 brother -

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

— No

HABITS, Drinking and Smoking, Seem good-

HEADACHES, VERTIGO, OR CONVULSIONS, has severe headaches every month -

OCCUPATION, Healthy or not, Housework & sewing.

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

—

Sleep, good Appetite, fair Bowels, Constipated

Personal and Medical History of Anna, Olson #3

48/269

No 6276 M Anna Olson #3

Copy of Order for Hearing Petition of C. O. Brohaugh

for appointment of

as guardian for

Anna Olson insane; served and

service admitted Jany 8 - 03 DK

(Papers filed with commitment papers.)

Hearing on Jany 26 - 1903, Probate Office, St Paul

RACTERISTICS.

USUAL WEIGHT, NUTRITION, poor

Condition of Skin, normal

prompt.

nse to Light, good Accommodation, good

al.

ood Grasp, other tests good

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

PATELLAR REFLEX, — Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular

Strength, Sounds, strong

Size, normal

Apex Beat, normal

Murmurs, none

ARTERIES,

normal

LUNGS,

Chest Symmetry: Yes

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,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus free & position normal. Hymen intact; External haemorrhoids. —

MENSTRUATION,

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 admitted in fair physical health, but somewhat emaciated: Converses freely & expresses her melancholy & morbid delusions freely; says "she has committed great wrongs & crimes". Is rather confused along the line of her delusions. Is quiet in manner & behavior. —

Personal and Medical History of Ann

Whole No. 6276
Residence, St Paul, Minn
Became resident of State 1897: of County 1897
Date Admission, 8th January 1903.
Admitted by Dr. O.C. Heyerdale hour, 7:30 P.M.
How Sent, E.W. Bazille, Jof P. Ramsey County.
Sex, Female Age, 32
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Sewing-Girl
Degree Education, Common School.
Profession of Religion, Yes: Lutheran
Habits, not intemperate
Nativity, Norway: Parents also born there.
Physicians Committing, Haldor Sneve & L.E. Penny
Correspondents, Rev. Chr. O. Brohaugh –
Guardian for Anna Olson } 298 Williams St
St Paul Minn

No. for Year, 112
Insane Relatives, Not a
Cause Exciting, Worry
Cause Predisposing, Probably
Form, Ac. Melancholia
Accompanying Bodily Disorder, Insomn
Suicidal or not, not –
Date of this Attack, 6 months ago
Duration, 6 months
No. of Attack, 1st —
No. of Admission, 1st here (was at Bethesda Hospl.).
Age First Attack, 31 past.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale *Date of* Jany 19/03

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quick: Confused
MEMORY, Past Events, good
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert
REASONING POWER, Ordinary Subjects, Fair
Special Subjects, Poor, along line of Delusions
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed –
DELUSIONS, Systematized, — Transitory, —
~~Special Subjects,~~ Has many delusions: Thinks she has committed great wrongs & crimes.
HALLUCINATIONS,
ILLUSIONS, —
SUMMARY,
Melancholy & Delusional.

Age 32 – Jany 6 – 1871 HISTORICAL.
LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Mother died of Consumption
Father, Dead —
Paternal Relatives, —
Mother, Dead – Consumption
Maternal Relatives, —
Brothers and Sisters, 2 sisters: 1 brother –
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
– No
HABITS, Drinking and Smoking, Seem good –
HEADACHES, VERTIGO, OR CONVULSIONS, has severe headaches every month –
OCCUPATION, Healthy or not, Housework & sewing
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, good Appetite, Fair Bowels, Constipated

Personal and Medical History of Anna, Olson

#3

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 3 in PRESENT WEIGHT, 110½ lbs USUAL WEIGHT, NUTRITION, poor
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated: prompt.
PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, good
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal.
HEARING, good
COORDINATION, Arms, good Legs, good Grasp, other tests good
TREMORS, Hands, fine Tongue, none Facial Muscles, — General, —
PATELLAR REFLEX, — Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus size & position normal. Hymen intact: External haemorrhoids. —
MENSTRUATION,
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 admitted in fair physical health, but somewhat emaciated: Converses freely & expresses her melancholy & morbid delusions freely: Says "she has committed great wrongs & crimes". Is rather confused along the line of her delusions. Is quiet in manner & behavior. —

Personal and Medical History of Anna Olson #3

1903

This patient was brought here by E. Johnson, attended by Miss Anderson, - in fair physical condition, with following history of case. No consanguinity: as to heredity, not as far as known. This is 1st attack: was at Bethesda, St Paul: results of treatment, negative. First symptoms of this attack manifested six months ago: began to brood & run down physically. Disease seems increasing: not variable: no rational intervals. Derangement now shown by being depressed: hallucinations of hearing: thinks she has committed many crimes: insomnia. Is not disposed to injure others, nor suicidal, nor of filthy or destructive habits. No previous peculiarities manifested: no history of intemperance, nor of any severe disease &c, or head-injury: has had home & hospital treatment, for one month. Supposed cause of the disease is Worry & ill-health: treatment pursued, hypnotics, hydrotherapy, tonics. On personal examination, patient cries and insists on going to jail. Talks about "hearing voices". -

Jany 8 On admission, was put on T.W. (G.H.N. Rpt: Complexion fair: hair brown. Eyes brown: Condition of skin normal: & clean: Teeth: upper 13: Lower 14: - Behavior quiet: expressed no delusions).

Jan 31st No change. Disturbed at times and expresses many delusions.

Personal and Medical History of

Personal and Medical History of Mary McCarron

Whole No. 6277

Residence, St Paul, Minn

Resident of State, Always: of County, always

Date Admission, 13th January 1903.

Admitted by Dr C. L. Chapple hour, 6⁵⁵ PM

How Sent, E. W. Bazille, Jof P. Ramsey County

Sex, Female Age, 40

Civil Condition, Widowed

Children, none Age Youngest Child, —

Occupation, Housewife; father's, none

Degree Education, Common School –

Profession of Religion, Yes: Catholic

Habits, not intemperate

Nativity St Paul, Minn: parents' Ireland

Physicians Committing, Arthur Sweeney & W. D. Kelly

Correspondents, Mrs Chas Braithwate (sister)
24 Gilman Terrace
St Paul

No. for Year, 113.

Insane Relatives, none

Cause Exciting, Unknown

Cause Predisposing, probably syphilis

Form, General paresis

Accompanying Bodily Disorder, Syphilis, 10 years ago.

Suicidal or not, suicidal by strangulation; propensity active.

Date of this Attack, Eight months ago

Duration, " " probably

No. of Attack, 1st –

No. of Admission, 1st – (at St Lukes Hosp. 1 month

Age First Attack, 39 past

Time of Leaving, 4th February 1903

Time in Hospital, 22 D

Result, Died: Exh in General paresis

Examination on Admission by Dr. L. A. Linton *Date of* Jany 19 – 1903.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Patient is not in a condition to answer questions or converse intelligently –
Recent Events, — Special Subjects, —

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

REASONING POWER, Ordinary Subjects, —

Special Subjects, —

Own Mental State, —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
– Depressed –

DELUSIONS, Systematized, Not determined 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 Mary McCarron

48/273
no 6277

M Mary A. McCarron

Copy of Order for Hearing Petition of Benjamin B. Maguire
for appointment of
as guardian for
Mary A McCarron insane; served and
service ~~admitted~~ made 2/3/03 E. Emanuel Johnson D.P.

(Papers filed with commitment papers.)

Hearing at Probate Office St Paul: Feb 23/03

Jan. 28, 1903

e a personal talk

) but have found it

a disease(syphilis)

at caused her to

from her husband, and it was breeding

loose her mind. She has been doctoring for this, but I do not believe that she got it out of her blood for the doctor had to dress her once a month and besides she had very bad sores in her mouth a few months ago.

I write you thinking it only right that you should know this for hers is a most pitible case, and I ask you to keep this disease in check and do all you can to alleviate her suffering.

This is from her brother so you will understand my interest.

Trusting that she is doing well, believe me,

Yours sincerely,

B. B. Maguire,

24 Gilman Terrace.

NUTRITION, Good

Condition of Skin, Normal

Sluggish —

Accommodation, Yes

Tests fair –

l, none

ist

Pow

NTS.

Casts and Crystals,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus normal in position but enlarged: some endometritis & leucorrhoea.

MENSTRUATION,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sleeps without hypnotics –

BOWELS, Present Condition, Requires occasional cathartics

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 restless, out of bed, most of the time, during the day: mutters incoherently to herself, most of the time: is rather sluggish & stupid: unable to answer questions intelligently –

Personal and Medical History of Mary Mc

Whole No. 6277.
Residence, St Paul, Minn
Resident of State, Always: of County, always
Date Admission, 13th January 1903.
Admitted by Dr C. L. Chapple hour, 6.55 PM
How Sent, E. W. Bazille, Jof P. Ramsey County
Sex, Female Age, 40
Civil Condition, Widowed
Children, None Age Youngest Child, —
Occupation, Housewife; father's, none
Degree Education, Common School —
Profession of Religion, Yes: Catholic
Habits, not intemperate
Nativity St Paul, Minn: Parents' Ireland
Physicians Committing, Arthur Sweeney & W. D. Kelly
Correspondents, Mrs Chas Braithwaite (sister)
24 Gilman Terrace
St Paul

No. for Year, 113.
Insane Relatives, — no
Cause Exciting, Unkno
Cause Predisposing, Probably S
Form, General
Accompanying Bodily Disorder, Syphilis, 1 go.
Suicidal or not, Suicidal by strangulation; propensity active.
Date of this Attack, Eight months ago
Duration, " " Probably
No. of Attack, 1st —
No. of Admission, 1st — (at St Lukes Hospl. 1 month
Age First Attack, 39 Past
Time of Leaving, 4th February 1903
Time in Hospital, 22 D
Result, Died: Exhn in General paresis

Examination on Admission by Dr. L. A. Linton *Date of* Jany 19 - 1903.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused — Sluggish
MEMORY, Past Events, Patient is not in a condition to answer questions or converse intelligently —
Recent Events, — Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull: Illusive
REASONING POWER, Ordinary Subjects, —
Special Subjects, —
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
— Depressed —
DELUSIONS, Systematized, Not determined 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 Mary McCarron

St. Paul, Minn., Jan. 28, 1903 190

Dr. Kilbourne,
% State Hospital,
Rochester, Minn.

Dear Sir;-

I have been intending to go down and have a personal talk with you about one of your patients (Mrs. McCarron) but have found it impossible to get away. Mrs. McCarron contracted a disease(syphilis) from her husband, and it was brooding over this that caused her to loose her mind. She has been doctoring for this, but I do not believe that she got it out of her blood for the doctor had to dress her once a month and besides she had very bad sores in her mouth a few months ago.

I write you thinking it only right that you should know this for hers is a most pitible case, and I ask you to keep this disease in check and do all you can to alleviate her suffering.

This is from her brother so you will understand my interest.

Trusting that she is doing well, believe me,

Yours sincerely,

B. B. Maguire,

24 Gilman Terrace.

NUTRITION, Good
Condition of Skin, normal
Sluggish —
Accommodation, Yes
Tests fair —
l, none
ist
Pro
NTS.

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus normal in position but enlarged: some endometritis & leucorrhoea.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps without hypnotics —
BOWELS, Present Condition, Requires occasional Cathartics

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 restless — out of bed, most of the time, during the day: mutters incoherently to herself, most of the time: Is rather sluggish & stupid: unable to answer questions intelligently —

Personal and Medical History of

Whole No. 6277
Residence, St Paul Minn.
Resident of State [illegible]
Date Admission, 13th January 1903
Admitted by E. W. Chaffee
How Sent, E. W. Chaffee [illegible]
Sex, Female
Civil Condition, Widowed
Children, None Age Youngest Child,
Occupation, Housework: father, none
Degree Education, Common School
Profession of Religion, R. Catholic
Habits, Not intemperate
Nativity, St Paul, Minn: Parents Ireland
Physicians Committing, Arthur S. [illegible] & W. D. Kelly
Correspondents, Mrs Chas Braith [illegible] (sister)
24 Gilman Terrace
St Paul

No. for
Insane Relatives,
Cause Exciting,
Cause Predisposing,
Form,
Accompanying Bodily Disorder,
Date of this Attack,
Duration, 1 month
No. of Attack,
No. of Admission,
Age First Attack,
Time of Leaving, 4th February 1903
Time in Hospital, 22 d
Result, Died. [illegible] general paresis

Examination on Admission by Dr. L. A. Linton Date of Jany 19-1903.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused — Sluggish
MEMORY, Past Events, Patient is not in a condition to answer questions & converse intelligently —
Recent Events, — Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull: Illusive
REASONING POWER, Ordinary Subjects, —
Special Subjects, —
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
— Depressed —
DELUSIONS, Systematized, Not determined 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, (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 Mary McCarron

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 in PRESENT WEIGHT, 170 # USUAL WEIGHT, — NUTRITION, Good
WOUNDS, Abnormalities, none — Condition of Skin, Normal
TONGUE, Coatings, Promptness of Movement, tongue coated & seamed: rather sluggish —
PUPILS, Equality, Equal Size, Normal Response to Light, Yes Accommodation, Yes
SIGHT, — apparently good —
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Seem normal —
HEARING, — apparently good —
COORDINATION, Arms, good Legs, good ~~Grasp,~~ Other tests fair —
TREMORS, Hands, fine tremor Tongue, — Do — Facial Muscles, none General, none
PATELLAR REFLEX, exaggerated Other Reflexes, Elbow & wrist
ARTICULATION, Slurred, — Hesitating, hesitating Slow, & slow
FACIAL EXPRESSION, — Sensibility,
HEART, Regularity, regular
Strength, Sounds, Strong
Size, Normal
Apex Beat,
Murmurs, None
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: uterus normal in position but enlarged: some endometritis & leucorrhoea.
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps without hypnotics —
BOWELS, Present Condition, Requires occasional cathartics

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 restless — out of bed, most of the time, during the day: mutters incoherently to herself, most of the time: Is rather sluggish & stupid: unable to answer questions intelligently —

Personal and Medical History of Mary McCarron

1903

This patient was brought here by Emanuel Johnson, attended by Miss Krieger, in apparently fair condition, with following history of case. No history of consanguinity or heredity. This is 1st attack: first symptoms manifested eight months ago: by electrical wires run through her house. Disease seems increasing: variable and with rational intervals; but these, not regular. Derangement now shown in that she hears people in steam-pipes: believes people are throwing electricity on her, and that she is about to be murdered. Not disposed to injure others: but has attempted suicide, by strangulation: propensity active now: of destructive habits: has broken windows. No previous peculiarities noted: no history of intemperance. Had syphilis, 10 years ago: has been confined, at St. Lukes Hospital, for a month.- Cause of disease unknown. Treatment, sedative & nutritive, without result- On personal examination, patient talks freely of her delusions & keeps her head covered to keep off electricity.

Jan 13 On admission, was put on T.W. (G.H.N. Kh1- Complexion dark: hair black (part gray): eyes gray; condition of skin normal: is dirty. Teeth: upper 10. Lower 15: Behavior very resistive: speech incoherent: Examined by Nurse Printhia Prince)- Patient received on ward; bathed and put to bed. Talks incoherently: very much disturbed. Refuses milk. Slept but little. On succeeding nights was generally out of bed a great deal: Noisy and untidy sometimes destructive.

Jan 17th Hands were put in mittens: slept very little. Sometimes refuses medicine. Was put on regular diet. This condition of restlessness and wakefulness at night continued throughout her stay on the Inf. Range of temperature during that time was from 98.8° to 102°. Pulse 76 to 115. Respirations 18 to 29. Put on regular diet.

See files

Personal and Medical History of Clara Cohen

Whole No. 5278	No. for Year, 114.
Residence, – Roumania –	Insane Relatives, not known
Resident of State 6 months: of County 6 months	Cause Exciting, not known
Date Admission, 13th January 1903.	Cause Predisposing, not stated
Admitted by Dr. O. C. Heyerdale hour, 7⁰⁰ pm	Form, Acute Mania hysterical.
How Sent, E. W. Bazille, J of P. Ramsey County	Accompanying Bodily Disorder, wakefulness
Sex, Female Age, 40 years	Suicidal or not, not
Civil Condition, married	Date of this Attack, one month ago
Children, Two Age Youngest Child, 6 years	Duration, " "
Occupation, Housewife; husband's not known	No. of Attack, 1st
Degree Education, Common school	No. of Admission, 1st (2 wks at St Paul City Hospl)
Profession of Religion, not church member: Jewess –	Age First Attack, – 40 –
Habits, – not known –	Time of Leaving,
Nativity, Roumania: Parents also born there.	Time in Hospital,
Physicians Committing, A. W. Dunning and P. B. Cook	Result,
Correspondents, none given in papers	

Examination on Admission by Dr. O. C. Heyerdale *Date of* Jany 15 – 1903

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Confused: Quick	HISTORICAL.
MEMORY, Past Events, Poor	LENGTH INVASION, —
Recent Events, " " Special Subjects, " "	ONSET, Gradual or Sudden, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Illusive	HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). Can get no history
REASONING POWER, Ordinary Subjects, Poor	Father, Paternal Relatives, Mother, Maternal Relatives, Brothers and Sisters,
Special Subjects, " "	
Own Mental State, " "	
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Exalted –	PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations). Dont Know
DELUSIONS, Systematized, — Transitory, —	
Special Subjects, —	HABITS, Drinking and Smoking, Unknown
	HEADACHES, VERTIGO, OR CONVULSIONS, —
HALLUCINATIONS, —	OCCUPATION, Healthy or not, —
ILLUSIONS, —	Detail Date, Duration, and Character of Previous Attack, if any, —
SUMMARY, Mania, with Delusions.	Sleep, — Appetite, — Bowels, —

Personal and Medical History of Clara Cohen

WILL BE DEPORTED.

Mrs. Clara Cohen to Be Sent Back to Roumania.

Mrs. Clara Cohen, who has been in this country but six months, was adjudged insane yesterday in the probate court and she will be sent to her old home in Roumania. The woman was committed to Rochester, where she will be cared for until the arrangements for sending her back home can be made.

She is forty years old and is the mother of two children. She came to St. Paul with her husband from Roumania six months ago, and since then they have been living on the West side. About two months ago she became violent and threatened to injure members of her family. She was treated at the city hospital for two weeks.

The immigration laws provide that foreigners becoming insane within a year after their arrival in this country shall be deported at the expense of the steamship company which brought them to America. The county board of control will make arrangements immediately to have the woman sent back to her relatives in Roumania.

PHYSICAL CHARACTERISTICS.

NT WEIGHT, 155 lbs USUAL WEIGHT, — NUTRITION, fair

Condition of Skin, normal

ovement, —

Size, — Response to Light, — Accommodation, —

ood

ilis, or other troubles, normal

ood –

RDINATION. Arms. Good Legs, Good ~~Grasp~~, Turning quickly good

, —

Extract from letter of Dr. Marcus Tessler of St Paul, Minn. February 8th, 1903 (On file)

Mr. Sigmund Cohen, (Brother of Clara Cohen, not her husband) Desired Dr. Tessler to write for him: Says in regard to family history that his mothers brother was slightly unbalanced, not enough to be declared insane.

Clara Cohen had attack of this kind before, restleness excitement, would suspect everybody at that time, was in private hospital in Roumania, seemed to recover, about eight years ago was married, gave birth to a little girl, her husband procured divorce on account of her nervousness, wandering about among neighbors, minding everyones business but her own etc. Four years later had illegitimate child (Now with her parents in Roumania). Brother says even to-day her main disease is "love for the other sex". That if she is sent to Roumania, he will take care of her little girl here.

While crossing Atlantic Ocean, she went by the name of her husband, and registered as Clara Isvoran.

NTS.

arance,

slight rectocele: Uterus large, free, normal in position: [illegible] . Leucorrhoea.

MENSTRUATION,

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 admitted in an acutely maniacal & violent condition. She is exalted and active, & rather hysterical in manner & behavior. Is very noisy & loquacious.

General health is good. She speaks only German & is irrational & incoherent

Personal and Medical History of Clara Cohen

Whole No. 6278
Residence, - Roumania
Resident of state 6 months:
Date Admission, 13th January
Admitted by Dr. O.C. Heyerdale
How Sent, E.W. Bazille, Jo
Sex, Female Age,
Civil Condition, married
Children, Two Age Y
Occupation, Housewife; h
Degree Education, Com
Profession of Religion, not Chur
Habits, - not
Nativity, Roumania
Physicians Committing, A.W
Correspondents, none

No. for Year, 114
Insane Relatives, not k
Cause Exciting, not k
Cause Predisposing, not

Examination on

MENTAL ACTIVI
Confused; Quick
MEMORY, Past Events, Poor
Recent Events, Spe
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, —
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,
Mania, with Delusions.

Paterna
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Dont Know
HABITS, Drinking and Smoking, Unknown
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, —
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, — Appetite, — Bowels, —

---

on contracts, leaving … balance on hand to meet future expenditures, which will be almost wholly for interior finish.

What It Will Cost.

The commission says that no accurate estimate of the cost is possible. It estimates that woodwork will cost $111,703, painting and glazing will be $38,628, interior stonework and marble will be $782,000, and miscellaneous fittings will be $892,450, which mount up to a grand total of $1,824,781. There is only $366,147 available, and the appropriation of $1,500,000 now asked by the commission gives but $41,366 more than the estimates call for.

The item of miscellaneous fittings includes two elevators, two mail-chutes, burglar-proof vault for the state treasurer, thirty-one fire-proof vault doors for other offices, and shelving for library and … Then there are ornamental features …red, such as sculpture … for the interior, … for the

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Personal and Medical History of Clara Cohen

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, 155 lb USUAL WEIGHT, — NUTRITION, fair
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, —
PUPILS, Equality, — Size, — Response to Light, — Accommodation, —
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Normal
HEARING, good -
COORDINATION, Arms, Good Legs, Good ~~Grasp~~, Running quickly good.
TREMORS, Hands, — Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, — Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, Normal
Strength, Sounds, Strong
Size, normal
Apex Beat, "
Murmurs, Normal
ARTERIES,
Normal
LUNGS,
Chest symmetry: normal
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,

GYNECOLOGICAL EXAMINATION, Labia excoriated from discharge: perineum lacerated: slight rectocele: uterus large, free, normal in position: endometritis, cervicitis, herpes vaginalis. Leucorrhoea.
MENSTRUATION,
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 admitted in an acutely maniacal & violent condition. She is exalted and active, & rather hysterical in manner & behavior. Is very noisy & loquacious.
General health is good. She speaks only German & is irrational & incoherent

Personal and Medical History of Clara Cohen

1903

This patient was brought here by Robt. Johnson, attended by Miss M. Ward, in fair physical condition, with following history of case. Not known as to any consanguinity, heredity, if any previous peculiarities manifested, history of intemperance, as to any severe disease &c or head-injury. This is 1st attack: first symptoms manifested one month ago: restless, disorderly, wakeful. Disease seems increasing: not variable no rational intervals. Derangement now shown by her being talkative, excitable, violent: obscene language. Is not disposed to injure others, nor suicidal: not disposed to filthy or destructive habits. Has not been restrained or confined: under observation for two weeks, at the St Paul City Hospital. Cause of disease not known: Treatment none: Facts learned on Personal examination, none.

Jan 13 On admission, was put on T.W. (G. H. U. Rpt: Complexion dark: hair black: eyes brown: Condition of skin normal: small scars on left hip, right arm and chest.- Vermin in hair: Is very dirty. Teeth: lower jaw 12 and 2 roots: upper jaw 13 and 2 roots. Very resistive & somewhat violent: Speech incoherent: Examined by Nurse Cynthia Tinney).

Patient is a foreigner: is not a naturalized citizen. Does not converse in English. Is acutely maniacal and very resistive. Hysterical; very stubborn: Restless at night.

Jan 23rd Disturbed: put in restraint.

" 31st No change.

See files.

Personal and Medical History of Minnie Redel

Whole No. 6280.
Residence, - Olmsted County -
Resident of Minnesota 19 yrs: of County 19 yrs.
Date Admission, 14th January 1903.
Admitted by Dr. R.M. Phelps - hour, 6.00 P.M.
How Sent, Henry O. Christensen, Jeff. Olmsted County
Sex, Female Age, 43.
Civil Condition, married -
Children, - 2. Age Youngest Child, 23 years
Occupation, Wife - husband's, grain dealer
Degree Education, Common school
Profession of Religion, Yes: Universalist.
Habits, - probably good -
Nativity, Wisconsin: father's Penn(?): Mother's don't know
Physicians Committing, A.W. Stinchfield & A.S. Adams
Correspondents, none given in papers -
Husband (Robt Redell - Rochester Minn)

No. for Year, 116.
Insane Relatives, - none - (father alcoholic)
Cause Exciting, neurotic predisposition
Cause Predisposing, " " "
Form, Acute Melancholia - delusional -
Accompanying Bodily Disorder, heart action irregular: Insomnia -
Suicidal or not, not, but has threatened injury to others:
Date of this Attack, 4 months ago
Duration, " " -
No. of Attack, 1st -
No. of Admission, 1st -
Age First Attack, - 42 past -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale - *Date of* Jany 19/03

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,
Good
REASONING POWER, Ordinary Subjects, Good
Special Subjects, " "
Own Mental State, appreciates her condition.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Normal
DELUSIONS, Systematized, — Transitory, —
Special Subjects, Expresses no delusions, at present time -
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY, —

HISTORICAL.

LENGTH INVASION, Three months
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father drank to excess.
Father, Living - well
Paternal Relatives, —
Mother, Living - well
Maternal Relatives,
Brothers and Sisters, 3 sisters: 9 brothers -
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
—
HABITS, Drinking and Smoking, habits good
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Housework -
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, fair Appetite, fair Bowels, regular

Personal and Medical History of Minnie Redel

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, 126 lbs USUAL WEIGHT, — NUTRITION, fair
WOUNDS, Abnormalities, None Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt —
PUPILS, Equality, yes Size, normal Response to Light, good Accommodation, good
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, good Legs, Good ~~Grasp,~~ other tests, good
TREMORS, Hands, fine Tongue, fine Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION,
Sensibility, —
HEART, Regularity, regular
Strength, Sounds, strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: yes
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,

GYNECOLOGICAL EXAMINATION, not made —

MENSTRUATION,
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 admitted in good physical condition: Converses freely & intelligently: admits that she has had delusions regarding bed-bugs & filth &c: but says that the shock of being sent to this hospital has been sufficient to bring on a realization of the absurdity of those ideas. She now seems well mentally & is very composed. -

Personal and Medical History of Minnie Redel

1903

This patient was brought here by Sheriff Vine, attended by Mr. Redell, in fair physical condition, with following history of case. No history of consanguinity or heredity. This is 1st attack: first symptoms manifested 4 months ago, but in what way, is not stated: Disease seems increasing: variable & with rational intervals: but delusion is constant & increasing: Derangement now shown by fear of being infested by bugs or insects. Has threatened to injure others, but not suicidal: Not disposed to filthy or destructive habits. Previously, was of very nervous habit. Her father was addicted to alcoholic excess. Has not been subject to any severe disease &c, or head-injury. Has not been restrained or confined, but confines herself at home: wears very little clothing. Supposed cause of disease, neurotic predisposition. Treatment pursued, digestive & nerve tonics. On personal examination, the following noted: heart action irregular: insomnia: extremely fearful of contact with others: mental lapses: delusional.

Jany 14 On admission, was put on T.W. (G.H.N. Rpt. Complexion dark: hair black: eyes brown: condition of skin normal: several small scars on body: Is clean: left ankle somewhat swollen: Teeth: upper 11: lower 10: Quiet: very nervous: expresses delusions. Examined by nurse Printhia Finney).

Personal and Medical History of

Personal and Medical History of Minnie Ziebell

Whole No. 6281.
Residence, (Stockton), Warren.
Became resident of Minnesota 1868: of County 1868:
Date Admission, 16th January 1903.
Admitted by Dr. O.C. Heyrgale hour, 4¹⁵ P.M.
How Sent, D.E. Vance, Jof.P. Winona County.
Sex, Female Age, 62.
Civil Condition, married. —
Children, - 3 - Age Youngest Child, 24 years
Occupation, Housewife: husband's farmer
Degree Education, Commyschool -
Profession of Religion, Yes, Lutheran
Habits, not Intemperate, so far as known.
Nativity, Germany: parents also born there.
Physicians Committing, D.A. Stewart and N.V. Lindsay
Correspondents, Fred Ziebell, Stockton, Minn
Lives 1½ miles S.E. of town

No. for Year, 117
Insane Relatives, } mother, before death, about same as patient: brother & sister partially so. -
Cause Exciting, Isolation & environments.
Cause Predisposing, probably heredity & age -
Form, acute melancholia
Accompanying Bodily Disorder, has had uterine disease.
Suicidal or not, - not -
Date of this Attack, March 1902
Duration, - 10 months -
No. of Attack, 1st —
No. of Admission, 1st (at Winona Genl. Hospl 1 wk)
Age First Attack, 61 past -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L.A. Luitow *Date of* Jany - 1903.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Patient too reticent to determine
MEMORY, Past Events, —
Recent Events, — Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert: in part Correct
REASONING POWER, Ordinary Subjects, } would not
Special Subjects, } Converse enough
Own Mental State, } to determine
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
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).
No history obtainable.
Father, Patient says father is dead —
Paternal Relatives, —
Mother, Ditto: mother
Maternal Relatives, —
Brothers and Sisters, two brothers & one sister living: one brother, 4 sisters dead
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Nothing
HABITS, Drinking and Smoking, — no no
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleeps poorly Appetite, good Bowels, Constipated.

Personal and Medical History of Minnie Ziebell

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1 in PRESENT WEIGHT, 175 lbs USUAL WEIGHT, — NUTRITION, good
WOUNDS, Abnormalities, none Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated: prompt
PUPILS, Equality, equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, good
COORDINATION, Arms, refused to be Legs, put through test Grasp, —
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, good Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat,
Murmurs, None
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,

GYNECOLOGICAL EXAMINATION, External genitals & groin very much excoriated. — Perinaeum lacerated: small rectocele: Cervix atrophied: had been lacerated. —
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps without hypnotics.
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 quiet, indifferent & very reticent: generally refuses to answer questions, though she is mentally alert & knows when she is addressed. She is very contrary & resists all efforts to care for her.

Personal and Medical History of Minnie Ziebell

1903

This patient was brought here by August Zielaff, attended by Mrs Wm Donley, in fair physical condition, with following history of case. As to any consanguinity not known: as to heredity, mother, before death, about the same as patient; brother and sister, partially so. This is 1st attack: first symptoms manifested March 1902: Incoherent & melancholia. Disease seems increasing: variable with rational intervals but these, not regular: rational when spoken to: restless & uncontrolable. Derange-ment now shown by a continued desire to escape from home: sleeplessness: avoids all association: refuses food, much of the time. Is not disposed to injure others: has not attempted suicide: escaped in the night, Jany 1st 1903, and would have frozen if she had not been found: no suicidal intent. - propensity not active. Not disposed to filthy or destructive habits. No previous peculiarities noted: not intemperate (nor were parents) as far as known. Has had uterine disease. Constant watchfulness & restraint has been employed. Supposed cause of the disease, Isolation & environments. Has been treated in Winona General Hospital, one week: quiet & restraint: & tonics & narcotics. On personal examination, the following noted: Stolid appearance, reticent: mind wandering from present surroundings.

Jan 16 On admission, was put on T.W. (G. A. N. R'pt: Complexion dark: hair brown: eyes gray: Condition of skin normal: Is clean: has no teeth: Behavior, very quiet. Expressed no delusions.)

Patient received on ward, bathed and put to bed. Is very quiet and rather depressed. Doesn't converse much. Slept well. Neat and clean in habits.

Jan 21st Was dressed and up on the ward. Rather listless and indolent. Takes very little interest in surroundings: does no work. At times quite depressed. Range of temperature during stay on Inf. was from 98.8° to 100.6° Pulse 73 to 115. Respirations 18 to 24. Was put on regular diet. Bowels move regularly and urine regular.

Jan 22nd Patient visited by husband and brother-in-law.

Feb. 9th Visited by son.

Personal and Medical History of Mary Harper

Whole No. 6284.
Residence, Shieldsville.
Date Admission, 20th January 1903 –
Admitted by Dr. G. M. Phelps hour, 9 35 P.M.
How Sent, James Hunter Joff. Rice County
Sex, Female Age, (60 about) –
Civil Condition, Widowed
Children, None Age Youngest Child, –
Occupation, None: (husband, laborer, dead)
Degree Education, not educated.
Profession of Religion, Yes: Catholic
Habits, Not intemperate.
Nativity, Ireland: parents also born there.
Physicians Committing, W. H. Robilliard and A. A. Dodge
Correspondents, cor Judge of Probate (no relatives known)

No. for Year, 120.
Insane Relatives, None
Cause Exciting, Solitude & senility
Cause Predisposing, probably age –
Form, Senile dementia
Accompanying Bodily Disorder, None specially mentioned
Suicidal or not, Yes: Cut her throat: propensity active
Date of this Attack, Jany 14 – 1903
Duration, about a week
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, – about 60 –
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Jany – 1903.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Somewhat Confused & Sluggish
MEMORY, Past Events, Impaired
Recent Events, — Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull – Impart Correct
REASONING POWER, Ordinary Subjects, Impaired
Special Subjects, —
Own Mental State, Does not appreciate.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Normal
DELUSIONS, Systematized, Transitory,
Special Subjects,
None determined
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
No history –
Father, Dead –
Paternal Relatives, —
Mother, Dead –
Maternal Relatives, —
Brothers and Sisters, one sister dead (Childbirth) four brothers dead –
No children –
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Nothing
HABITS, Drinking and Smoking, Smokes & likes liquors but has not been able to indulge
HEADACHES no, VERTIGO no, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, — has not slept well of late – Appetite, fair Bowels, Constipated.

Personal and Medical History of Mary Harper

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, fair
WOUNDS, Abnormalities, – none Condition of Skin, brown patches on areas on body shrivelled & reddish
TONGUE, Coatings, Promptness of Movement, Coated: prompt.
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, poor: wears glasses –
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Wears glasses
HEARING, – poor –
COORDINATION, Arms, fair Legs, good ~~Grasp,~~ Other tests fair –
TREMORS, Hands, fine tremor Tongue, fine Facial Muscles, none General, None
PATELLAR REFLEX, Exaggerated Other Reflexes, Elbow: wrist.
ARTICULATION, Slurred, — Hesitating, — Slow, Slow
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, Regular
Strength, Sounds, fairly strong
Size, enlarged to right
Apex Beat, heard over large area & tending to right of sternum
Murmurs, Mitral & aortic Stenosis
ARTERIES,
Atheromatous
LUNGS, Barrel shaped
Chest Symmetry, Emphysematous
Expansion: —
Breath Sounds: sibilant rales bronchial breathing: whole chest hyperresonant – Cough & expectorates.
EXAMINATION URINE, Quantity, Sp. g. Reaction, Color and Appearance,
Albumen, Sugar,
Casts and Crystals,

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,

GYNECOLOGICAL EXAMINATION, Labia majora enlarged: perineorrhaphy had been performed at some time: cervix atrophied: fundus hard and adherent in cul de
~~MENSTRUATION~~, sac: leucorrhoea.
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, – Sleeps well –
BOWELS, Present Condition, Has taken Cathartics

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 quiet: sleeps without hypnotics: is somewhat deaf, so that conversation with her is difficult. Some questions she answers apparently correctly. A typical case of Senile Dementia.

Personal and Medical History of Mary Harper

1903

This patient was brought here by J.B. Thompson, attended by Mrs J.B. Thompson, in fair physical condition, with following history of case. No history of consanguinity, or heredity. This is 1st attack: has not been sent to hospital before: first symptoms of this attack manifested January 14-1903; burning clothing + attempt to cut her throat. Disease seems increasing: variable + with rational intervals. but these, not regular: better after sleep. Derangement now shown by burning clothing + attempting her own life: formerly devout catholic + now turned against religion. Is not disposed to injure others. Has attempted suicide, cut her throat: propensity active now: is of filthy and destructive habits.— No previous peculiarities manifested: no history of intemperance, nor of any severe disease &c, or head injury. Has not been restrained or confined. Supposed cause of the disease is solitude and senility. Do not know what treatment has been pursued. On personal Examination, there is noted a slight abrasion of skin, where patient attempted to cut her throat with a razor.—

Jan 20 On admission, was put on IW. (G.H.N. Rpt: Complexion dark: hair gray: eyes blue. Condition of skin normal: slight scratches on neck, thighs + abdomen. Is clean. Feet + legs swollen: varicose veins in feet. Teeth: one upper and three lower: Behavior quiet: Expressed no delusions: Examined by Mary Shea + Bertha Petty)—

Jan 20 Patient received on ward, bathed and put to bed. Slept well.
Is quiet and seems very feeble. Appetite rather poor. Put on regular diet. Sleeps well: bowels move regularly and urine regular. Coughs and expectorates. Is hard of hearing. Is at times restless and complains of pain in her breast.

Jan 29. Up and dressed on the ward. Converses but little. Neat and clean in habits and appearance.
Range of Temperature was from 98.6° to 100.2°. Pulse 70 to 100.
Respirations 18 to 28.

Personal and Medical History of

Personal and Medical History of Anna Wangestad

Whole No. 6285.
Residence, Town of Cherry-Grove, Goodhue Co.
Became resident of Minnesota about 1870: of Co. about 1870
Date Admission, 20th January 1903 —
Admitted by Dr. L. A. Lenton hour, 10:30 P.M.
How Sent, Axel Haller, Jaf'r. Goodhue County
Sex, Female Age, 64. —
Civil Condition, Widowed.
Children, 2 Age Youngest Child, 23 years
Occupation, Housewife: (husband's farmer)
Degree Education, Common School
Profession of Religion, Lutheran
Habits, not intemperate
Nativity, Sogn, Norway: (Parents also born there)
Physicians Committing, Geo. C. Wellner and H. L. McKenistry
Correspondents, Ole T. Berg (neighbor) Cherry Grove Tw'p (Send to Zumbrota) —
Has attended, Dr. R. Leland, Kenyon Goodhue Co —
Information of insanity & proof of residence made by Ole T. Berg

No. for Year, 121.
Insane Relatives, Yes: First Cousin
Cause Exciting, Worry & general Debility
Cause Predisposing, Probably heredity —
Form, Acute Melancholia with Illusions
Accompanying Bodily Disorder, General Debility —
Suicidal or not, — Not — will injure others —
Date of this Attack, August 1902 —
Duration, 5 months —
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, — 63 past —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Feby 4 - 1903

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,
Alert —
REASONING POWER, Ordinary Subjects, poor
Special Subjects, " "
Own Mental State, Says "She is not Insane" —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed: Melancholy.
DELUSIONS, Systematized, — Transitory, —
Special Subjects, Has fears for herself and property: also delusions of a Religious Character.
HALLUCINATIONS,
ILLUSIONS, —
SUMMARY,
Born Sept 14 - 1839. Sep 14 — 64 years

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, 1 Brother —
Children — 2 girls —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
— no —
HABITS, Drinking and Smoking, —
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, poor Appetite, poor Bowels, Constipated.

Personal and Medical History of Anna Wangestad

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, Fair
WOUNDS, Abnormalities, — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Prompt: Coated:
PUPILS, Equality, Yes Size, normal Response to Light, Accommodation,
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, good
COORDINATION, Arms, good Legs, good Grasp, other tests good —
TREMORS, Hands, none Tongue, fine Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, normal
Size, normal
Apex Beat, normal
Murmurs, normal
ARTERIES,
Slight Sclerosis
LUNGS,
Resp. symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, Perineum lacerated; External haemorrhoids: Cervix atrophied: leucorrhoeal discharge. —
MENSTRUATION,
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 admitted in good physical Condition & quite well nourished. — She is extremely melancholy & Depressed and weeps a great deal: Expresses fears of poverty. Condition is one of "Acute Melancholia" with Delusions" —

Personal and Medical History of Anna Wangestad

1903

This patient was brought here by P. J. Lundquist, attended by Anna Lundquist, in fair physical condition, with following history of case. No consanguinity. first cousin insane. This is 1st attack: not sent to hospital before: first symptoms manifested August 1902: financial & religious worry: disease seems increasing: variable: rational intervals not regular. Derangement now shown by imaginary fears for person & property: Is disposed to injure others: not suicidal: nor of filthy or destructive habits. Previously, manifested stubbornness & undue worry. No history of intemperance, nor of any severe disease &c, or head-injury: has not been restrained or confined, but had to be constantly watched. Supposed cause of the disease is worry and general debility. Has attended Dr. R. Leland, Kenyon, Goodhue Co. On Personal Examination, the following noted; is hysterical: disposed to weep: excited: is in pretty constant motion & talks irrationally. ——— . ———

Jan 20 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair brown, part gray: Eyes hazel: Condition of skin normal: bruises on left leg & right shoulder. Is clean. Teeth: upper 14 and one root: lower, 12. Quiet: expressed no delusions: Ex by Lillian Hicks). Patient is very melancholy and disturbed: moans and cries more or less. During the first two weeks temperature pulse and respiration normal. Bowels regular.

Feb 12th No change. Cries and moans a great deal.

Personal and Medical History of

Personal and Medical History of Stella. A. Pringle

Whole No. 6286
Residence, St Paul. Minn
Became resident of State 14 yrs ago: of County, Feby 1902.
Date Admission, 21st January 1903.
Admitted by Dr. R.M. Phelps — hour, 10⁵⁰ P.M.
How Sent, E.W. Bazille, Jo.P. Ramsey County
Sex, Female Age, 38 years
Civil Condition, married
Children, one Age Youngest Child, 18 yrs.
Occupation, Housewife: husband's Real Estate.
Degree Education, Common School
Profession of Religion, not a church member.
Habits, not intemperate — New Brunswick N.J.
Nativity, Brooklyn N.Y.: Father's, Germany: Mother's
Physicians Committing, Parks Ritchie and C. Eugene Riggs.
Correspondents, A. Fullgraff (Father) 8?? Lincoln Ave St Paul
Dale 784 J. 1 = Telephone N.W.

No. for Year, 122.
Insane Relatives, None
Cause Exciting, Domestic unhappiness —
Cause Predisposing, unknown
Form, ~~Simple Melancholia~~ — Hypochondriacal
Accompanying Bodily Disorder, none mentioned.
Suicidal or not, attempted with hat pin: propensity not active now
Date of this Attack, November 1901. —
Duration, 14 months ?
No. of Attack, 1st
No. of Admission, 1st here (6 mos in C&C Hospl)
Age First Attack, about 37 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale *Date of* January 23/03

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 except on subject of her hypochondriacal Delusions
REASONING POWER, Ordinary Subjects, good, except on
Special Subjects, subject of her hypochondria
Own Mental State, says "She is not insane" —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed —
DELUSIONS, Systematized, Transitory, along the
~~Special Subjects,~~ line of sickness —
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,
Melancholia: hypochondriacal

HISTORICAL.

LENGTH INVASION, one year —
ONSET, Gradual or Sudden, Gradual —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
no —
Father, Living — well
Paternal Relatives, —
Mother, Living — well
Maternal Relatives, —
Brothers and Sisters, 2 sisters: 1 brother 1 boy — well —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Surgical operation — 4 years ago — for laceration of Cervix — says: "she had a fall on back of the head 3 years ago" —
HABITS, Drinking and Smoking, —
has had severe headaches
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Lived in Luxury.
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, poor Appetite, good Bowels, regular —

Personal and Medical History of Stella. A. Pringle

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, — NUTRITION, fairly nourished
WOUNDS, Abnormalities, Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, prompt: Coated —
PUPILS, Equality, equal Size, normal Response to Light, Accommodation,
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good —
COORDINATION, Arms, good Legs, good ~~Grasp,~~ other tests good
TREMORS, Hands, none Tongue, none Facial Muscles, — General, —
PATELLAR REFLEX, present — Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, regular
Strength, Sounds, strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest Symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, External genitals normal: Cervix had been repaired. Anterior lip hypertrophied: uterus free + normal in position. —
MENSTRUATION,
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 admitted in fairly good physical condition: appetite is rather poor and she takes but little nourishment. She is depressed + melancholy + constantly complains of an aching in her stomach + a pain + pressure in her head. She converses freely + intelligently, on all subjects, except those of her delusions. —

Personal and Medical History of Stella. A. Pringle

1903

This patient was brought here by Emanuel Johnson, attended by Mrs Dadman, in fair physical condition, with following history of case. No history of Consanguinity or heredity. This is 1st attack: first symptoms manifested in November 1901. Disease seems decreasing: has decidedly improved. Derangement now shown in that she is depressed & hypochondriacal. Is not disposed to injure others: has attempted suicide, with hat-pin: propensity not active now: not disposed to filthy or destructive habits. No history of any previous peculiarities &c, intemperance, severe disease &c, or head injury. Has been confined 6 months in City and County Hospital. Supposed cause of disease is Domestic unhappiness. Treatment has been Tonics, constructives, rest & alimentation. On personal examination, hypochondriacal, Melancholia.

Jan 21 On admission, was put on W.W. (G. H. N. R'pt: Complexion fair: hair brown: eyes blue: Condition of skin normal: Is Clean: Teeth in good Condition; one upper and one lower, missing: Quiet: talks quite intellectually: Expresses no delusions: Ex.d by Bertha Petty) – Patient converses readily although she is rather despondent.
Complains of pain in left side, also in head and complains very much of her stomach

Jan. 22nd Visited by sisters

Feb. 11th. Patient is nauseated more or less: vomits frequently.

See Files

Personal and Medical History of

Personal and Medical History of Winifred Dwyer

Whole No. 6288.
Residence, Washington County, Minn
Date Admission, 22nd January 1903.
Admitted by Dr O.C. Heyerdale – hour, 10 20 P.M.
How Sent, Frank T. Wilson, Sh'ff Washington Co.
Sex, Female Age, about 75.
Civil Condition, widowed –
Children, Five Age Youngest Child, about 23 or 24.
Occupation, Housewife: husband's was that of a farmer.
Degree Education, not educated.
Profession of Religion, Yes: Catholic.
Habits, unknown (as to intemperance)
Nativity, Ireland: Parents also born there
Physicians Committing, T. C. Clark and J. H. Haines.
Correspondents, None given in papers
Guardian H.C. Robertson – Stillwater, Minn –
Daughter Mrs Sarah Doran – 607 S. Second St –
Clarksville, Tenn.

No. for Year, 124.
Insane Relatives, unknown
Cause Exciting, {Natural mental deterioration {Due to a solitary life –
Cause Predisposing, previous attacks
Form, Senile Dementia
Accompanying Bodily Disorder, None mentioned
Suicidal or not, not: but will injure others.
Date of this Attack, not given
Duration, – a long time –
No. of Attack, not 1st –
No. of Admission, 2nd
Age First Attack, unknown
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O.C. Heyerdale – *Date of* Feby 4-1903.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quick: Quite clear
MEMORY, Past Events, rather poor
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Quite alert –
REASONING POWER, Ordinary Subjects, –
Special Subjects, –
Own Mental State, Says "She is not insane"
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
–
DELUSIONS, Systematized, – Transitory, –
Special Subjects, –
HALLUCINATIONS, –
ILLUSIONS, –
SUMMARY,

HISTORICAL.

LENGTH INVASION, –
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
–
Father, Dead
Paternal Relatives, –
Mother, Dead –
Maternal Relatives, 4 brothers – 2 sisters
Brothers and Sisters, 7 children: 4 Dead – 3 living
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
– No
HABITS, Drinking and Smoking, Good
HEADACHES, VERTIGO, OR CONVULSIONS, –
OCCUPATION, Healthy or not, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
here before in 1886: (Jany – June): then "Chronic Mania". Cause: Domestic affliction" – Discharged improved – (had Eloped) –
Sleep, good Appetite, Good Bowels, Constipated.

Personal and Medical History of Winifred Dwyer

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4 in PRESENT WEIGHT, 147 lb USUAL WEIGHT, – NUTRITION, fairly good
WOUNDS, Abnormalities, right hand deformed at wrist. due to old fracture Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Coated: prompt –
PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, good
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, right eyelid slightly deformed, due to a burn (when a child
HEARING, good
COORDINATION, Arms, good Legs, good Grasp, other tests good –
TREMORS, Hands, Coarse Tongue, – Facial Muscles, – General, –
PATELLAR REFLEX, present Other Reflexes, –
ARTICULATION, Slurred, – Hesitating, – Slow, –
FACIAL EXPRESSION, – Sensibility, –
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, normal
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest Symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, Labia & external genitals swollen & excoriated: perinaeum lacerated: vagina inflamed by an old pessary, that she had worn for years:
~~MENSTRUATION~~, pessary partly broken away: cervix atrophied: leucorrhoea.
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 admitted in fairly good physical condition & quite well nourished: She converses freely & intelligently: her memory is slightly defective: Is quite active and alert. Is quiet & orderly: causes no trouble whatever: Condition one of Senile Dementia, of rather mild degree. –

Personal and Medical History of Winifred Dwyer

1903

This patient was brought here by Oscar Ostrom, attended by Mrs W. K. Riordan in fair physical condition, with following history of case. Unknown as to consanguinity or heredity. This is not 1st attack: was sent to Rochester Hospital. after a few months, she ran away and then was discharged. When first symptoms of this attack were manifested is not stated: for a long time she has been deranged. Disease seems increasing. Derangement now shown in that the patient lives in a condition of unnecessary filth and privation: her manner of living is a menace to her own life, and to those in the house with her. Is disposed to injure others, but not suicidal: lives under extreme filthy conditions. Her peculiarities are of long standing. As to any history of intemperance, unknown: has not been subject to any severe disease &c, or head-injury: has not been restrained or confined. Supposed cause of the disease is natural mental deterioration due to a solitary life. Treatment, none. On Personal Examination, is dirty & obstinate. Will make no concession as to any other mode of life (Found a proper person for care & treatment under 1st and 3d sections of law). —

+ Note: 2nd admission: here before from January 1 - 1886 to June 25 - 1886 and discharged Nov 4 - 1886, as improved. Form then "Chronic mania": cause given as "Domestic affliction" - (Patient eloped while attending a circus. See Vol 6 p 169 No 1069) —

Jan 22 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair gray: eyes blue: Condition of skin normal: small scar on left breast: small scratch on right hip. Is very dirty: has no teeth: Quiet: has not expressed delusions: Rpt by Bertha Petty - Night-nurse)

Patient is old and somewhat demented: is quiet and agreeable.

During the first two weeks temperature, pulse and respiration about normal. Seems in quite good physical health.

Fairly quiet and contented although says she wants to go home

See files

Personal and Medical History of

Personal and Medical History of Mary Pederson #1

Whole No. 6291.
Residence, Rushford, Minn
Date Admission, 29th January 1903.
Admitted by Dr. R.M. Phelps hour, 7⁴⁰ am.
How Sent, E. V. Farrington, Dep'y Fillmore Co.
Sex, Female Age, 50.
Civil Condition, Single -
Children, none Age Youngest Child, —
Occupation, Housework: father a farmer
Degree Education, Not educated -
Profession of Religion, Yes: Lutheran
Habits, not Intemperate: father drank hard.
Nativity, Norway. parents also born there.
Physicians Committing, J. H. Phillips and W. B. Grinnell
Correspondents, None given in papers
Sister Mrs G. Anderson
Rushford Minn -

No. for Year, 127.
Insane Relatives, None (An aunt previous Commit.)
Cause Exciting, Don't know.
Cause Predisposing, previous attacks possibly heredity peculiar since childhood }
Form, Chronic Melancholia Recurrent
Accompanying Bodily Disorder, None mentioned
Suicidal or not, not; propensity not active
Date of this Attack, became worse, last November
Duration, about 2 months.
No. of Attack, Not 1st: (one in Sept 1888).
No. of Admission, 2nd —
Age First Attack, — 25 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Feby 4/1903.

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, Fears harm
Special Subjects, —
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,
Chronic Melancholia

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
An aunt Insane (previous Commitment)
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, Housework.
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, — Appetite, — Bowels, —

Personal and Medical History of Mary Pederson #1

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9 in PRESENT WEIGHT, 140 lbs USUAL WEIGHT, — NUTRITION, fair
WOUNDS, Abnormalities, — no — Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, coated -
PUPILS, Equality, Yes Size, Normal Response to Light, good Accommodation, good
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, normal
HEARING, Good
COORDINATION, Arms, Good Legs, good ~~Grasp~~, Other tests good
TREMORS, Hands, — Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, present Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, Normal
Apex Beat, normal
Murmurs, None —
ARTERIES,
Normal
LUNGS,
Chest symmetry: Normal
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,

GYNECOLOGICAL EXAMINATION, (Examination refused) -

MENSTRUATION,
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 admitted in fair physical health. is melancholy & Depressed. Converses but little, with those about her: assists some with ward work: Is quiet & well behaved & is neat & clean.

Personal and Medical History of Mary Pederson #1

1903

This patient was brought here by Mr. Christ Jacobson, attended by Mr. E. Bradburn, in fair physical condition, with following history of case. No consanguinity: no heredity: This is not 1st attack: one occurred September 1888: duration 14 years: was sent to ×Rochester Hospital: was there about 14 years: some better but not sane: Symptoms of this attack became worse last November. Disease seems increasing: not variable: no rational intervals: Derangement now shown in that she talks all the time, incoherently: is afraid something is going to hurt her. Is not disposed to injure others; has not attempted suicide: propensity not active: no filthy or destructive habits. Has been peculiar ever since childhood. Father drank hard. No history of any severe disease &c or head-injury. Has been confined in Rochester about 14 years. Dont know cause of disease. As to treatment, nothing mentioned. On personal examination, patient sits quiet, most of the time: is afraid something is going to happen: has sudden fits of passion. Commitment recommended because her condition is such as to make it dangerous to herself & others to have her at large: her disease is of such a nature, & in such a stage, as to require regular aid and assistance,

×Note while under legal restraint. ×Note. 2nd admission: here before from Sept 25-1888 to May 27-1902 & discharged Nov 8-1902, as Improved: (cared for by relative) Form then given as "Paroxys Chr. Melancholia": was suicidal: for 20 years, had had "Spells": predisposing cause was heredity. An aunt insane. (Vol 11. p70. No 1570)

Jan 29 On admission, was put on A3W: (G.H. N. Rpt: Complexion dark: hair brown, part gray: eyes blue: Condition of skin normal: is clean. Teeth: upper 7 and 5 roots: lower 16. Behavior, very quiet: talks but very little: Examined by Nurse Ruthia Finney).
Patient is very melancholy: cries a good deal. Converses some.
In 1st week T. P. & Res. about normal. Appetite fairly good.
Bowels regular. Slept well during the night.
Assists some with the ward work.

See files

Personal and Medical History of Cecilia Anderson

Whole No. 6292.
Residence, Burnside Township, Said County
Became resident of Minnesota about 1857. and also
Date Admission, 30th January 1903. Of Co. 1857.
Admitted by Dr O. C. Heyerdale hour, 9⁰⁰ am
How Sent, Axel Haller, J of P. Goodhue County
Sex, Female Age, 45.
Civil Condition, Married
Children, None Age Youngest Child, —
Occupation, Housekeeping: Husband's farming
Degree Education, Common School.
Profession of Religion, Not a Church member
Habits, Not intemperate as far as can be ascertained
Nativity, Vasa Goodhue Co. Minn: Parents' Sweden
Physicians Committing, F. W. Dimmett and Geo. C. Wellner
Correspondents, Husband, August Anderson
(5 miles West) Redwing, Minn
Information &c. made by August Anderson — R. F. D No 3.

No. for Year, 128.
Insane Relatives, None
Cause Exciting, Constipation: prolapsus uteri: Typhoid fever
Cause Predisposing, probably " " " "
Form, Acute melancholia.
Accompanying Bodily Disorder, Prolapsus uteri: pulse weak.
Suicidal or not, Not
Date of this Attack, January 1st 1903
Duration, about 1 month.
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, about 45.
Time of Leaving, February 8 — 1903
Time in Hospital, 9 D.
Result, Died: Acute nephritis

Examination on Admission by Dr. O. C. Heyerdale — *Date of* Feby 1st 1903

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish.
MEMORY, Past Events, Will not converse
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, —
ILLUSIONS, —
SUMMARY,

HISTORICAL.
LENGTH INVASION, —
ONSET, Gradual or Sudden, gradual
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). (Question concerning Insanity, Consanguinity, Epilepsy,
Father, Will not converse
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, Housework
Detail Date, Duration, and Character of Previous Attack, if any,
—
Sleep, — Appetite, — Bowels, —

Personal and Medical History of Cecilia Anderson

Cecilia
Examination of urine of Mrs Anderson.
Passed Feb 7. 1903 *Examined* Feb 7. 1903
Character Sp. Gr. 1030 *Color* yellow
Quantity in 24 hours *Reaction* neutral
Clear, cloudy, or a sediment sediment.

TESTS FOR ALBUMEN.

1. *Heat* X 2. *Nitric acid* X
3. *Tanrets* X

TESTS FOR SUGAR.

1. *Fehlings Sol.* 2. *Haines*
3. *Bismuth*

MICROSCOPICAL.

Urates	*Phosphates*
Mucus	*Pus*
Blood	*Epithelium*
Casts	*Oxalate linn*

Amount urea

ISTICS.
IGHT, — NUTRITION, fair
Condition of Skin, normal
poor Accommodation, good
Grasp, —
scles, — General, —
flexes, —
— Slow, —
Sensibility, —

Murmurs, None
ARTERIES,
Normal
LUNGS,
Chest Symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, Examination not made

MENSTRUATION,
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 admitted in fair physical health. Is depressed and melancholy. Will not converse. Will occasionally answer in a monosyllable. Lies quietly in bed. Takes but little nourishment & refuses to take medicine.

Personal and Medical History of Ceci

Whole No. 6292.

Residence, Burnside Township, Said County
Became resident of Minnesota about 1857: and also

Date Admission, 30th January 1903. Of Co. 1857.

Admitted by Dr. O. C. Heyerdale hour, 9⁰⁰ am

How Sent, Axel Haller, J of P. Goodhue County

Sex, Female Age, 45-

Civil Condition, Married

Children, None Age Youngest Child, —

Occupation, Housekeeping: Husband's, farming

Degree Education, Common School-

Profession of Religion, Not a Church member

Habits, Not intemperate, as far as can be ascertained

Nativity, Vasa Goodhue Co. Minn: Parents, Sweden

Physicians Committing, F. W. Dimmett and Geo. C. Wellner

Correspondents, Husband, August Anderson
(5 miles West) Redwing, Minn
Information &c. Made by August Anderson — R.F.D No 3.

No. for

Insane

Cause Ex

Cause Pre

Form, C

Accompany psus uteri: pulse weak.

Suicidal or not, Not

Date of this Attack, January 1st 1903

Duration, about 1 month-

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, about 45-

Time of Leaving, February 8-1903

Time in Hospital, 9 d.

Result, Died: Acute Nephritis

Examination on Admission by Dr. O. C. Heyerdale — *Date of* Feby 1st 1903

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Will not Converse

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, —

ILLUSIONS, —

SUMMARY,

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, gradual

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

Father, Will not Converse

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, Housework

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

Sleep, — Appetite, — Bowels,

Personal and Medical History of Cecilia Anderson

PHYSICAL CHARACTERISTICS.

HEIGHT, 4 ft 10 in PRESENT WEIGHT, 107 lbs USUAL WEIGHT, — NUTRITION, fair

WOUNDS, Abnormalities, — Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, Coated

PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, good

SIGHT, Good

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

HEARING, Good

COORDINATION, Arms, Good Legs, Good Grasp, —

TREMORS, Hands, — Tongue, — Facial Muscles, — General, —

PATELLAR REFLEX, — Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, regular

Strength, Sounds, fairly Strong

Size, normal

Apex Beat, normal

Murmurs, None

ARTERIES,
Normal

LUNGS,
Chest Symmetry: Yes
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,

GYNECOLOGICAL EXAMINATION, Examination not made

MENSTRUATION,

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 admitted in fair physical health. Is depressed and melancholy. Will not Converse: will occasionally answer in a monosyllable. Lies quietly in bed. Takes but little nourishment & refuses to take medicine.

Personal and Medical History of Cecilia Anderson

1903

This patient was brought here by Sheriff P. J. Lundquist, attended by Mrs Kate Risberg, in fair physical condition, with following history of case. No history of consanguinity or heredity. This is 1st attack: first symptoms manifested January 1st 1903; refused to leave bed and to take food: & talked irrelevantly: Disease seems increasing: not variable: no rational intervals. Derangement now shown in that she is profoundly stupid. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. Manifested hysterical signs, for some years, prior to this attack, due, it was thought, to prolapsus uteri. No history of intemperance, so far as can be ascertained: had typhoid fever, in school days. Has not been restrained or confined. Supposed cause of the disease is constipation, prolapsus uteri; Typhoid fever. Refused to take treatment. On personal Examination, refuses to talk: is listless and quite stupid: takes no notice of surroundings: pulse weak.

Jan 30 On admission, was put on T.W. (G.H.N. Rpt: Complexion fair: hair red: eyes brown: Condition of skin normal: is clean: feet and ankles somewhat swollen: Teeth: 7 lower & 2 roots: upper plate: Quiet: does not talk any: Examd by Lillian Hicks) - Temperature, pulse and respiration about normal. Appetite rather poor. Bowels regular. Very resistive: doesn't converse at all. Expectorates quite freely. Seems quite run down physically. Quite melancholy. Patient is failing rapidly.

Feb. 8th Died at 5 o'clock A.M. Cause of death Acute Nephritis. Patient had swelling on neck (left side); feet and limbs swollen. Large amount of albumen in urine.

Personal and Medical History of

Personal and Medical History of Anna Bergdahl

Whole No. 6293.

Residence, Red Wing, Minn.

Became resident of Minn: abt 1854: of County abt 1855.

Date Admission, 31st January 1903.

Admitted by Dr O. C. Heyerdale hour, 2 00 pm

How Sent, Axel Haller, Dep. Goodhue County

Sex, Female Age, 83.

Civil Condition, Single

Children, Age Youngest Child, —

Occupation, Housekeeper. —

Degree Education, Can read but not write.

Profession of Religion, not a churchmember –

Habits, not intemperate, but father a drunkard.

Nativity, Sweden, Europe: Parents, Sweden.

Physicians Committing, J. V. Anderson and M. W. Smith

Correspondents, Sheriff P. J. Lundquist Red Wing. Minn

Information & proof of residence made by Ellen C. P. Peterson

No. for Year, 129.

Insane Relatives, one sister said to be insane

Cause Exciting, advanced age & privation

Cause Predisposing, probably age & heredity

Form, Senile Dementia

Accompanying Bodily Disorder, Very deaf –

Suicidal or not, Not

Date of this Attack, about 2 months ago

Duration, " " —

No. of Attack, 1st —

No. of Admission, 1st

Age First Attack, – 83 –

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. O. C. Heyerdale *Date of* Feby 4 - 1903.

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,

At times Exalted

DELUSIONS, Systematized, — Transitory, Of persecution

Special Subjects, —

HALLUCINATIONS, —

ILLUSIONS, —

SUMMARY, —

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, Gradual

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

Father, Dead

Paternal Relatives, —

Mother, Dead

Maternal Relatives, —

Brothers and Sisters, —

Children – None

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

not known

HABITS, Drinking and Smoking, —

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Housework

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

—

Sleep, Poor Appetite, — Bowels, —

Personal and Medical History of Anna Bergdahl

PHYSICAL CHARACTERISTICS.

HEIGHT, 4 ft 6½ in PRESENT WEIGHT, 90 lbs USUAL WEIGHT, NUTRITION, Poor.

WOUNDS, Abnormalities, has an abrasion on 3d finger of left hand, due to scratching Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, prompt: Coated.

PUPILS, Equality, Yes Size, normal Response to Light, good Accommodation, good

SIGHT, good

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

HEARING, good

COORDINATION, Arms, poor Legs, poor Grasp, —

TREMORS, Hands, — Tongue, — Facial Muscles, — General, —

PATELLAR REFLEX, — Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, Normal

Strength, Sounds, Strong

Size, Normal

Apex Beat, Normal

Murmurs, None

ARTERIES,

Sclerotic

LUNGS,

Chest symmetry: Yes

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,

GYNECOLOGICAL EXAMINATION, Too resistive, to make examination.

MENSTRUATION,

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 admitted in an emaciated, run-down condition. She is old, feeble & very demented. Very deaf & speaks English very brokenly.

Personal and Medical History of Anna Bergdahl.

1903

This patient was brought here by Sheriff P. J. Lundquist, attended by Mrs Eva Lundquist, in poor physical condition, with following history of case. As to consanguinity, unknown. This is 1st attack: first symptoms manifested about 2 months ago: wanders from home, in the night. Disease seems increasing: not variable: no rational intervals. Derangement now shown in that she does not know where she is & wanders from home, not properly clad; Is not disposed to injure others, nor suicidal: habits are uncleanly. One sister said to be insane: has always had peculiar temper: easily excited.— active denunciation of religion: refuses to meet her relatives. Father was a drunkard. No history of any severe disease &c, or head-injury: has not been restrained or confined. Supposed cause of the disease is advanced age & privation. Treatment none.

On personal Examination, Is very deaf: delusion of persecution: that friend is trying to get hold of her property.

Jany 31 On admission, was put on T.W. (G.H.N. Rpt. Complexion fair: hair gray: eyes blue: Condition of skin normal: sore on 3d finger of left hand: Is very dirty: Curvature of spine: Teeth: upper 4 and 3$^{?}$ roots: has no lower teeth: very resistive & somewhat noisy.
Patient is inclined to be violent. Very resistive. Has a very sore finger which was dressed. Patient much disturbed.
During the first two weeks T., P. and Rs. about normal.
Appetite fairly good: bowels regular: Given hypnotics for sleep.

Personal and Medical History of

Personal and Medical History of Emma Schmelzer
previously Committed as ×Emma Siegel -

Whole No. 6294.
Residence, Waltham, Mower Co. Minn.
Date Admission, 31st January 1903.
Admitted by Dr. O. C. Heyerdale - hour, 8^{30} P.M.
How Sent, J. M. Greenman, Dep't. Mower County.
Sex, Female Age, 36.
Civil Condition, Widowed -
Children, 3 Age Youngest Child, 1½ yrs
Occupation, Housewife: husband was farmer.
Degree Education, Common School.
Profession of Religion, Yes: Catholic
Habits, Not Intemperate.
Nativity, Glendale, Mass: Parents', Germany.
Physicians Committing, E. H. Washburn - Rogers & A. W. Allen
Correspondents, none given in papers -

No. for Year, 130.
Insane Relatives, Great grandfather was insane.
Cause Exciting, not known absolutely -
Cause Predisposing, Heredity & previous attack.
Form, Melancholia
Accompanying Bodily Disorder, Insomnia
Suicidal or not, Very suicidal & propensity active.
Date of this Attack, November 28 - 1902.
Duration, 2 months.
No. of Attack, 2nd (one in 1894)
No. of Admission, × 2nd -
Age First Attack, - 28 years -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. L. A. Linton *Date of* Feby 4 - 1903

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear: Sluggish
MEMORY, Past Events, Impaired
Recent Events, " " Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
rather dull, but apparently correct
REASONING POWER, Ordinary Subjects, Somewhat
Special Subjects, Impaired
Own Mental State, Appreciates that she is not well.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed & indifferent
DELUSIONS, Systematized, Nothing obtainable 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 obtainable
Father, Dead —
Paternal Relatives, —
Mother, Living -
Maternal Relatives, one sister dead: 2 sisters 1 bro. living
Brothers and Sisters, 3 children living: 1 dead
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
nothing
HABITS, Drinking and Smoking, Drinks beer occasionally
HEADACHES, VERTIGO, OR CONVULSIONS, + yes + no + no
OCCUPATION, Healthy or not, —
Detail Date, Duration, and Character of Previous Attack, if any,
Housework
Sleep, poorly Appetite, good Bowels, Constipated

Personal and Medical History of Emma Schmelzer

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4¾ in PRESENT WEIGHT, 158½ lb USUAL WEIGHT, — NUTRITION, Good
WOUNDS, Abnormalities, none Condition of Skin, Normal, except for numerous large bruises -
TONGUE, Coatings, Promptness of Movement, Coated: prompt -
PUPILS, Equality, equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Normal
HEARING, good
COORDINATION, Arms, good Legs, Good } finger to nose, eyes shut, responds too -
~~Grasp,~~ Other tests, Fair
TREMORS, Hands, — Tongue, fine tremor Facial Muscles, none General, none
PATELLAR REFLEX, exaggerated Other Reflexes, elbow - wrist
ARTICULATION, Slurred, — Hesitating, hesitating Slow, slow
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, fairly strong
Size, Normal
Apex Beat,
Murmurs, none
ARTERIES,
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,

GYNECOLOGICAL EXAMINATION, Patient so resistive, Could not make satisfactory examination —
MENSTRUATION,
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Sleeps, as a rule, without use of hypnotics.
BOWELS, Present Condition, requires occasional Cathartics.

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 quiet in deportment. Does not voluntarily converse: but will answer questions fairly intelligently. She is very resistive: refuses all medicines, requiring administration by tube. She is apathetic and indifferent to surroundings. —

Personal and Medical History of Emma Schmelzer.

1903.

This patient was brought here by John C. Johnson Jr, attended by George Siegel and Theresa Siegel, in fair physical condition, with following history of case. No consanguinity: great grandfather was insane. This is not 1st attack: one occurred in 1894 (was then sent to this*, Rochester State Hospital): and discharged improved. First symptoms of this attack manifested November 28th 1902: Insomnia chiefly later developed suicidal tendency. Disease seems increasing: variable & with rational intervals; but these, not regular: at times, for a few minutes, she may appear sane. Derangement now shown in that she has the delusion that some one is intending to do harm to an absent sister, very nervous: very nervous: melancholy: Is not disposed to injure others: has attempted suicide; by taking Carb. a: propensity active now: She is asking that she be given poison. Disposed to filthy and destructive habits. No peculiarities noted previously: No history of intemperance, nor of any severe disease &c, or head-injury: has been confined, about 1 month, at hospital, at Rochester. Cause of disease not known absolutely: but has been depressed & very melancholy for some time. Treatment, none other than above, excepting medicine for insomnia. On personal examination she seems in good health, but acts insane, when her friends are being sworn: thinks they may be injured. Commitment recommended, because it is unsafe for her to be at large, on account of her suicidal tendencies.

*Note. Previously committed as Emma Siegel: Here, then, from Sept 4-1894 to Oct 1-94: and discharged Feb 26-1895, as improved: (was here only 26 days): Form then, "Melancholia acute": cause, religious excitement: had menstruation difficulty. (For further particulars see Vol 26 page 265 No 3828).

Jan 31. On admission: was put on T.W. (G.H.N. R'pt: Complexion dark: hair black: eyes hazel: Condition of skin normal: large bruise on right limb: S clean: Teeth: upper 14: lower 12: Behavior quiet: somewhat resistive: expressed no delusions).

Jan 31 Received on ward: bathed and put to bed. Patient very restless and sleepless. Requires hypnotics: resistive and disturbed; converses but little. Has melancholia. Does not seem interested in much of anything; apathetic and indolent. Answers questions at times sensibly and intelligently. During latter part of stay on Inf. slept much better.

Feb 11th Began to menstruate. At times refuses medicine.
Range of temperature from 98.6° to 99°. Pulse 70 to 100.
Respirations 18 to 22. Was put on regular diet and sedatives for treatment.

Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, Condition of Skin,

TONGUE, Coatings, Promptness of Movement,

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,

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,

GYNECOLOGICAL EXAMINATION,

MENSTRUATION,

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).

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Personal and Medical History of

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, Condition of Skin,

TONGUE, Coatings, Promptness of Movement,

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,

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,

GYNECOLOGICAL EXAMINATION,

MENSTRUATION,

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).