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

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Version 3
August 20, 2018

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PLEASE TAKE NOTICE.

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THIS BOOK is made of first-class material and by first-class workmen. In order to insure a good book until used up, observe the following: Do not open in the center, but from either the front or back, running the leaves over until you come to the place you want; and in closing it do just the reverse, running the leaves back to the cover. All new books will be more or less stiff in the back until used a while, and this manner of using will make them limber and still not strain them. When the book is not in use, and at night, keep another book or weight on it so that the covers will not curl, as all new books are liable to do, especially if kept in a very warm room.

Respectfully,

Egbert, Gideon & Chambers.

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Anderson	alley	9	
Anderson	Lucius	137	Had been in City Hospital, a year ago.
Anderson al Knudson	Knud andrew	145	5th here; has also been at St Peter.
Atz	John	61	
Abbey	Jorgus D.	381	

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

Becker	Fred	109	was at "Detention State Hospital"
Bolega or Polega	Tony	121	Has been at Workhouse 2 days
Bates	Abram	169	
Barnum	Augustus. K.	181	
Boyne	Patrick	237	2nd ad: here - was also at Mendota. Wis
Behnke	Charles	321	
Boyle	John	337	
Barry	Edward	377	
Bros	Martin	393	washe at St. Peter ?

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

Casey	William	117	From Stillwater Hospital
Clark	Eugene B.	129	
Cikanck	Mathias	133	
Carmichael	Robert	281	was at Hudson, Wis. Sanitarium.

Dartt	Rollard. M.	65	(mother died here - Insane)
Davis	John. D.	73	(here before Dec 21/95 — June 12/99)
Doe	John #1	153	
al. James Johnson (true name) or James Thompson #2			
Drazin	Joseph	229	
Dablow	John	261	
Dellafield	Louis	273	
Devine	John	349	

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

Eckholdt	Frank. R.	13	
Ewend Ewent	Gustave	233	2nd admission
Evans	Charles #2	249	Iowa State Prison, Shelvada
Ensch	John	305	

Frank	Henry Sr	265	2d admission

Goggin	James H.	177	2nd admission	
Galuska	Reuben B.	389		

Still	David	1	
Hall	Fred	29	(here before Apl 24/99 to May 25/99)
Hausm	Gust	57	
House	Jacob	77	
Holst	Christ	113	
Hatfield	Geo. G.	149	
Haggard	Merlin	157	3rd ad mn here
Holland	Wm	165	3rd ad mn here
Hilson	Henry G.	189	
Halpin	Stephen P.	201	3d admission
Hausm	Halvor	277	
Halfen	Leonard	333	was at Fergus Falls.
Hoyer	J. W.	385	was at St Peter in County Jail

Jaeger	Hugh	213		
Johnson or John Doe #7 or James Thompson	James	153		
Johnson	Jeff Colored	245	was at Poor House	
Johnson	Nils #5	313		
Joslyn	Leroy E.	365	2nd admn	

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Kreilaus	August	101	
Kehsler	Theodore	125	
Krueger	Albert J	253	from Minnesota State-Prison
Knudson at Anderson	Andw. Knud	145	5th ad. here: has been at St Peter

La Fever	John. M.	41	
Lee	Lars B.	193	2nd ad-
Larson	H a.	257	2nd ad: has also been at St Peter
Liddle	Isaac	325	

Merian	Gustave	17		
Muelen	Daniel Jr	37		
Martell	Stephen	97		
Murphy	Patrick	141	(at St Joseph's Hospital, for 2 weeks —	
Maple	James S	205		
Mallay	Thomas	309		
Mayer	Alfred	345		
Müller	Frederick	361		
Morrissey	Patrick W	373		

Mc Callum	John	21	(Tramp ?)
Mc Gee	Everet	341	

Nelson	Ole #2	221	has been at Poor Farm	
Nelson	Gunder J.	397		

O'Donnell	Bartley J	49		
Oien	Ole O	161		
Olson	Charles #3	289		
a Olson	Charles G.			

Phelps	R. D.	69	
Polega or Bolega	Tony	121	Has been in Workhouse 2 Days
Pollock	John	173	2d admn
Poff	Gottlieb	225	
Paulson	Ole A.	297	3d admission

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Remer	Frederick P.	53
Rolfe	Dan M.	89
Rikhus	Ole	317

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Schulte	Joseph F.	5	was "under sentence" in Nebraska Co jail
Seymour	Frank	33	(sister Wilhelmina Schmidt. committed May) 4/1/81.
Sawyer (Sauer?).	Henry	85	was in Hospital at Tyler? Texas 1891-2
Sheldon	Fletcher Bird	93	has brother (adelbert E. Sheldon) here
Stokoe	Philip	209	2nd admission.
Sac Marie	Philip	217	
Scanlan	Michael	269	has been at St Joseph's Hospl.
Schwede	William	293	
Smith	George #3	301	Has been in County Jail.
Schultz	Max	329	
Shosten	Charles. R.	357	
Schüstag	Gotfried	369	

Toma	John	45	} here before from May 11/99 to June 15/99.	
al Tuma	Thomas	" "	} Discly Dec 27/99. Improved.	
Tyler	Chas. W.	197.		
Thompson	James #2	153		
al John Doe #1	al James Johnston			

Weismann or Weisman Ef.	George C.	81		
Wing	Albert	105		
Wagenknecht	Edward	185		
Waggoner	Nicholas	241		
Walsh	William	285	Montana Asylum	
Wager	William K	353		

Zinnen	Mathias	25	

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Personal and Medical History of

Personal and Medical History of

Personal and Medical History of David Hill

Whole No. 5757

Residence, St Paul: Minn.

Became resident of State 1883: of County 1883.

Date Admission, 11th February 1901.

Admitted by Dr Chapple hour, 7.30 PM

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

Sex, Male Age, 43 Years

Civil Condition, married

Children, none Age Youngest Child, —

Occupation, Railroad Engineer

Degree Education, Common school

Profession of Religion, not a church member

Habits, no history of intemperance

Nativity, Scotland: parents also born there.

Physicians Committing, J.W. Dimmett & W. Archibald

Correspondents, Mrs David Hill (wife)
474 Wabasha St
St Paul

No. for Year, 120

Insane Relatives, mother & aunt

Cause Exciting, unknown

Cause Predisposing, heredity & previous attack.

Form, Acute Melancholia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not: but disposed to injure others

Date of this Attack, 3 weeks ago

Duration, — 3 weeks —

No. of Attack, 2nd (Had one, 10 years ago)

No. of Admission, 1st

Age First Attack, about 33.

Time of Leaving, 16th April 1901

Time in Hospital, 2 Mos. & Ds

Result, Recovered: Disch'd Nov 22/1901.

Examination on Admission by Dr. E. J. Wanous *Date of* Feby 12/1901

MENTAL CHARACTERISTICS.

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

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

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

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

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

DELUSIONS, Systematized, of persecution Transitory,
Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, Living

Paternal Relatives, none insane

Mother, Dead: don't know * (note commitment)

Maternal Relatives, none insane

Brothers and Sisters, well
2 3
Children, none.

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
no

HABITS, Drinking and ~~Smoking~~, to Excess

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Locomotive Engineer

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

Sleep, fair Appetite, fair Bowels, regular

Personal and Medical History of David Hill

5757
49/1

M David Hill

Copy of Order for Hearing Petition of Bridget Hill for appointment of as guardian for David Hill insane; served and service admitted 2nd April 1901 —

(Papers filed with commitment papers.)

RACTERISTICS.

USUAL WEIGHT, NUTRITION, fairly

Condition of Skin, sluggish

d

nse to Light, normal Accommodation, normal

normal Grasp, other tests good

Facial Muscles, General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, clear

Size, normal

Apex Beat, normal: regular

Murmurs, none noted

ARTERIES,
normal

LUNGS,
Chest Symmetry: sym
Expansion: good
Breath Sounds: normal
Passed 3/29/01 7.30 am Ld 3/29/01 4.00 pm

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, in 24 hrs scanty Sp. g. 1028 Reaction, acid Color and Appearance, yellow, cloudy

Albumen, no (nitric acid test) Sugar, no (Fehling's Sol.).

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, regular

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

The patient appears depressed & delusionary; has been worrying about his family: Cause of trouble unknown. Will not talk much about his condition. Physically, fairly well nourished, though somewhat anaemic.

Personal and Medical History of David Hill

Whole No. 5757

Residence, St Paul: Minn.

Became resident of State 1883: of County 1883.

Date Admission, 11th February 1901.

Admitted by Dr Chapple hour, 7.30 PM

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

Sex, Male Age, 43 Years

Civil Condition, married

Children, None Age Youngest Child, —

Occupation, Railroad Engineer

Degree Education, Common school

Profession of Religion, not a church member

Habits, no history of intemperance

Nativity, Scotland: parents also born there.

Physicians Committing, J. W. Dimmett (Finnell) & W. Archibald

Correspondents, Mrs David Hill (wife)
474 Wabasha St
St Paul

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No. of Attack, 2nd (had one, 10 years ago)

No. of Admission, 1st

Age First Attack, about 33.

Time of Leaving, 16th April 1901

Time in Hospital, 2 Mos & Ds

Result, Recovered: Disch'd Nov 22/1901.

Examination on Admission by Dr. E. J. Wanous *Date of* Feby 12/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Quite Clear

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct

REASONING POWER, Ordinary Subjects, good

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed

DELUSIONS, Systematized, of persecution Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, Living

Paternal Relatives, none insane

Mother, Dead: don't know * (note commitment)

Maternal Relatives, none insane

Brothers and Sisters, well

Children, none.

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

no

HABITS, Drinking and ~~Smoking~~, to Excess

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Locomotive Engineer

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

Sleep, fair Appetite, fair Bowels, regular

Personal and Medical History of David Hill

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 in PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, fairly

WOUNDS, Abnormalities, Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, prompt: coated

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

SIGHT, good

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

HEARING, good

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

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

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, clear

Size, normal

Apex Beat, normal: regular

Murmurs, none noted

ARTERIES,

normal

LUNGS,

Chest Symmetry: sym

Expansion: good

Breath Sounds: normal

Passed 3/29/01 7.30 am Ex'd 3/29/01. 4.00 pm

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, in 24 hrs Scanty Sp. g. 1028 Reaction, acid Color and Appearance, yellow, cloudy

Albumen, no (nitric acid test) Sugar, no (Fehling's Sol.).

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, regular

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

The patient appears depressed & delusionary; has been worrying about his family: cause of trouble unknown. Will not talk much about his condition. Physically, fairly well nourished, though somewhat anaemic.

Personal and Medical History of David Hill

1901

This patient was brought here by Deputy Emanuel Johnson, attended by John Dufour, in fair physical condition, with following history. There is no consanguinity, but history of insanity, mother & aunt having been insane. This is not 1st attack: one occurred 10 years ago, duration 6 weeks, but he was not sent to hospital. First symptoms of this attack were manifested three weeks ago, by a melancholic attack. Disease seems increasing, but variable & with rational intervals, but these not regular; Derangement now manifested by (delusions of) persecution. Patient is disposed to injure others, but not suicidal; propensity not active. No filthy or destructive habits. As to previous peculiarities, unknown. No history of intemperance, severe disease &c or head injury. Has not been restrained or confined. Cause of the disease unknown: has been under general treatment. On personal Examination is nervous & apprehensive. ——— " ———

Feb 11 On admission, was put on B3. (G.H.N.R'pt. Complexion dark: hair gray: eyes brown: Condition of skin good. Scars on left leg: scar on right leg: is clean: teeth: 3 out, left lower & 4 out right lower; 3 out, right upper; 3 out & 1 broken off, left upper: Behavior good: Examination made by James Sheehan and John Rode). —

" 11 Received on ward: given bath: is well behaved: manifests no peculiarities: says "family had been
" 12 sick, which caused him to worry, and he has been very much depressed". Feby 12. visited by wife &
Mar 9 taken home. Mar 9. Was returned: is quiet; seldom talks; but, when spoken to, will answer questions.
12 (Fourteen day record up): April 2. wt 188# P112. No further special notes to make, at this date.
Apl 16 Was again sent home.

Discharged

Personal and Medical History of

Personal and Medical History of Joseph F. Schulte

Whole No. 5758.

Residence, Mazeppa, Minn.

When he became resident of State, not known: resident of County Oct 1/1900

Date Admission, 11th February 1901.

Admitted by Dr. E. Z. Wanous hour, 7 30 P.M.

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

Sex, Male Age, 31.

Civil Condition, married

Children, two Age Youngest Child, ✓

Occupation, Farm(?) Laborer

Degree Education, Common School

Profession of Religion, Church of Rome

Habits, No history of intemperance —

Nativity, Pittsburgh. Pa: father's Holstein; mother's Hanover German Emp.

Physicians Committing, W. F. Milligan & P. N. Keely

Correspondents, None given in papers

No. for Year, 121.

Insane Relatives, None

Cause Exciting, Family trouble

Cause Predisposing, not stated

Form, Acute Mania

Accompanying Bodily Disorder, Nervousness & Insomnia

Suicidal or not, Not attempted, but propensity active

Date of this Attack, one week ago

Duration, one week

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 31.

Time of Leaving, May 27 - 1902

Time in Hospital, 1 yr 3 mos 16 ds

Result, Recovered: Disch Nov 29 - 1902 by Supt.

Examination on Admission by Dr. E. Z. Wanous *Date of* Feby 12/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Sluggish

MEMORY, Past Events, much impaired

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, regarding his wife Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, Living —

Paternal Relatives, none insane

Mother, Living

Maternal Relatives, none insane

Brothers and Sisters, one sister dead

children 2 well all well

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

No

HABITS, Drinking and Smoking, to excess, at times

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Farming

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

Sleep, fair Appetite, good Bowels, regular

Personal and Medical History of Joseph F. Schulte

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 in PRESENT WEIGHT, not taken USUAL WEIGHT, NUTRITION, fairly

WOUNDS, Abnormalities, No Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, coated

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

SIGHT, Impaired

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

HEARING, Good

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

TREMORS, Hands, No Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, yes Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

full

LUNGS,

Chest symmetry; sym

Expansion; good

Breath sounds; normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, normal

BOWELS, Present Condition, Constipated

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

The patient seems confused & depressed; has various delusions regarding his wife's infidelity & that people are trying to do him harm. Physical condition good.

Personal and Medical History of Joseph F. Schulte

1901

This patient was brought here by Deputy G. G. Dickman, attended by Henry Johnson, in fair physical condition & with following history. There is no history of consanguinity, or heredity, previous peculiarities, intemperance, severe disease &c or head injury, restraint or confinement. This is the first attack; was not in hospital; first symptoms manifested one week ago by speaking of inconstancy of wife. Disease seems increasing; not variable; no rational intervals. Derangement now shown by speaking of his wife and John Steiner and their improper relations. Patient is not disposed to injure others; has not attempted suicide, but propensity active. No filthy or destructive habits. Supposed cause of the disease is family trouble: no treatment has been pursued. On personal Examination, the man is very nervous; has not slept since coming to County Jail. (N.B. If discharge is made within 53 days from date of order (Feby 11/1901) Patient shall be returned to Custody of Sheriff of Wabasha County to complete his sentence). ——— .. ——— . ———

Feby 11 On admission, was put on B3. (Complexion dark: hair brown; eyes gray; condition of skin, good: powder mark on left side of nose; scars on right leg: scar over left eye. Is clean. Teeth. 2 snags on right lower: 1 snag on right upper: 2 snags, left upper: the rest in poor condition. Behavior Good. Examination made by James Sheehan and John Rode.) ——— . ———

" " Received on Ward (B3) = given bath. Patient much confused: restless: destructive during night

12/16 Transferred to I.W. restless, delirious & filthy. Feb 16. Restless all night, very delusional. –

18/24 Shows some mental improvement. Feby 24. Restless & pugnacious: Does not sleep, at night.

25/27 (Fourteen day record up): Feb 27. Patient had severe Epistaxis. Feby 28. Attacked nurse, while

28 temperature being taken. March 1. Up & dressed, on ward: restless during night –

Mar 2/7/14 Transferred to B3. Mar 7. very much confused & excited: restless all night. Mar 14. Is

Apl 3 better: seems quite rational again. Apl 3. Another attack of restlessness & is destructive.

May 1/7 Easily irritated. May 1. Wt 186½ lbs. May 7. Had trouble with Jacob House, knocking

8 him down. Very restless & excited, at times: destructive & untidy: appetite good: May 8. Is

11 destructive to bed – clothing – May 11. Transferred to C1: was very violent and confused.

20/31 Still very delusive, but more quiet. Transferred to B3: May 31. To C1. Very troublesome

June 1/7 Wt 183#. June 7. Continues very abusive & threatening: July 30. Has improved some

July 30 mentally: habits cleanly: works on ward. Behavior quiet. Aug 2. Wt 193#. Nov 30. In good

Nov 30 physical condition: recently, has been rather stupid & abusive. Jany 31/02. Has improved

1902 Jany 31 considerably, during period: quite trust-worthy, at present. Works. Is, at present, on A1. Wt 201# –

Feb 1/02. 198# Well behaved: cheerful: quite rational;

May 27/02 Has continued quite well. Allowed to go to work on the R.R. today

Personal and Medical History of

Personal and Medical History of Alley Anderson

Whole No. 5759.
Residence, Houston, Minn.
Became resident of Minnesota 1854: of Houston Co. 1854
Date Admission, 13th February 1901.
Admitted by Dr. O. C. Heyerdale hour, 4:15 P.M.
How Sent, L. Budahl, Jof P. Houston County
Sex, Male Age, 23
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, None
Degree Education, not educated
Profession of Religion, not a church member
Habits, Not known as to intemperance
Nativity, Norway, Europe: parents probably born in Norway.
Physicians Committing, L. L. Ousgard & O. J. Fisher
Correspondents, none given in papers
John E. Anderson, of County of Houston makes information of insanity

No. for Year, 122.
Insane Relatives, Dont know
Cause Exciting, Born Idiotic —
Cause Predisposing, possibly Heredity?
Form, Imbecile
Accompanying Bodily Disorder,
Suicidal or not, Not, but will injure Others.
Date of this Attack, at age of 5 years: Idiotic
Duration, 18 years.
No. of Attack, 1st (Continuous probably)
No. of Admission, 1st
Age First Attack, 5 Years.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. J. Nanous *Date of* Feb 14/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish
MEMORY, Past Events, Dont Know
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,
apparently indifferent
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father,
Paternal Relatives, Not obtainable
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
none known
HABITS, Drinking and Smoking,
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, No
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, Poor Appetite, Poor Bowels, Poor

Personal and Medical History of Alley Anderson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 10in PRESENT WEIGHT, 131lbs USUAL WEIGHT, NUTRITION,
WOUNDS, Abnormalities, No Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, Normal Response to Light, Normal Accommodation Normal
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, Good
COORDINATION, Arms, not obtainable Legs, — Grasp, —
TREMORS, Hands, Tongue, Facial Muscles, General,
PATELLAR REFLEX, Other Reflexes,
ARTICULATION, Slurred, Does not talk Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, regular
Strength, Sounds, Weak
Size, Normal
Apex Beat, Normal
Murmurs, None noted
ARTERIES,
LUNGS,
Chest compressed
Expansion Poor

CRANIAL MEASUREMENTS.

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

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

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

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

The patient gives a history of being a "dumb" for the past twelve years. He is an adopted child & nothing is known regarding his ancestry. Is subject to "spells" which assimilate Epilepsy.
Physically, frail & very sluggish in general.
Case is one of Idiocy, with Dementia.

Personal and Medical History of Alley Anderson

1901

This patient was brought here, attended by Sheriff F. H. Evans, in fair physical condition, and with following history. Dont know as to consanguinity, or heredity, intemperance, or habitual use of any narcotic. This is first attack, duration 10 to 30 minutes; has not been in hospital. First symptoms of this attack manifested at age of 5 years. Foster-parents notice he was idiotic. Disease appears increasing; variable, but never rational. During the last month, has had attacks every day, being unmanageable. Derangement now shown on no particular subject. Patient is disposed to injure others, but not suicidal. At times, he has disposition to destroy clothing. As near as can be ascertained, he has been idiotic since birth. He has not been subject to any severe disease &c or head injury: has not been restrained or confined. Cause of the Disease — Born Idiotic — has had no treatment. On Personal Examination, he has a vacant expression; face bears marks of injury, which he produced himself, with his finger-nails. NB. See letter of L Budahl J of P, on file with "Commitment papers": in which he says "the proper place for this patient is evidently at Faribault; an attempt has been made by Physician & Judge of Probate to obtain admittance at said institution, but without success. Now he, the patient — has reached such a stage in his mental derangement as to be dangerous to all his surroundings; and, in justice to him, and to the people having had the care of him, all these years, this is, in my opinion, the best we can do." —

Feb 13 On admission, was put on B3. (G. H. N. R'pt. Complexion light; hair brown; eyes gray: Skin in fair condition; small notch on left side of nose; scars on both cheeks; several scars on back; scar on first finger of left hand: scar on back of right hand. Is fairly clean. (Bodily peculiarities 3 Balls). Teeth in good condition. Behavior good; refuses to talk. Exdly Fahey & John Howe.

" Received on B3. Does not talk: is depressed: fearful: does anything asked of him: replies to

26 requests. Feb 26 No change in condition of patient, from day to day. March 2. Wt 127#

Mar 2 Rarely utters a word: seems unable to speak, but very little. Is very quiet & well behaved.

Apl 2/4 Does nothing. Apl 2. Wt 132½ lb — Apl 4. Continues same as above. Transferred to D2.

30 No changes to report. May 1. Wt 119# Has been working on farm. Eats & sleeps well.

Jul 31 no mental change. — July 31. Same as noted above. Aug 1. Wt 128#: Nov 1. Wt 138#

1902 Jan 31 No change in mental or physical condition: does nothing onward. During warm weather, worked done on farm.

Feb. 1 Wt. 126#. Aug. 1 Wt. 122#.

1903 Jan. 31 During summer worked on farm; quiet; never talks to anyone; occasional spells of laughing to himself; cleanly. health fairly good.

Personal and Medical History of

Personal and Medical History of Frank. R. Eckholdt

Whole No. 5761.

Residence, Rochester, Minn –

Born in State of Minnesota; Because resident of Co. 26 yrs ago

Date Admission, 18th February 1901

Admitted by Dr. A. F. Kilbourne hour, 4.30 P.M.

How Sent, J. A. Leonard, J. of P. Olmsted County

Sex, Male Age, 26

Civil Condition, married

Children, – Age Youngest Child, –

Occupation, Attorney

Degree Education, University

Profession of Religion, Not a church member

Habits, not intemperate

Nativity, Rochester, Minn: Father's Norway: Mother's Wisconsin Reason

Physicians Committing, H. H. Witherstine & Chas. T. Granger

Correspondents, (Father's address) H. A. Eckholdt (Attorney) Rochester, Minn

No. for Year, 124

Insane Relatives, None

Cause Exciting, not clear

Cause Predisposing, not stated

Form, Simple Mania

Accompanying Bodily Disorder, Subject to Convulsions

Suicidal or not, not –

Date of this Attack, about 2 months ago

Duration, about 2 months

No. of Attack, 1st –

No. of Admission, 1st

Age First Attack, 26.

Time of Leaving, 24th March 1901.

Time in Hospital, 1 mo. 6 Ds

Result, Recovered. Disg'd Apl 30/1901.

Examination on Admission by Dr. E. Z. Wanous *Date of* Feby 19/1901

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,

Correct

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted

DELUSIONS, Systematized, Transitory,

Special Subjects,

Mania, without delusions

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, Living

Paternal Relatives, None Insane

Mother, Living

Maternal Relatives, none Insane

Brothers and Sisters, all well

children. 1 child (Dead)

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

Nasal Catarrh

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Professional man

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

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of Frank. R. Eckholdt

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, no Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, Clear

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

SIGHT, good

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

HEARING, Good

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

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

normal

LUNGS,

Chest symmetry; Sym

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,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, regular

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

The patient seems excited; very talkative & exalted in his opinions; talks continually about his "Cases". Writes numerous letters & tries to carry on an extensive law business. Physically, is nervous & emaciated.

Condition is one of simple mania

Personal and Medical History of Frank. R. Eckholdt

1901

This patient was brought here by Sheriff Vine, attended by Deputy Posy, in poor physical condition, with the following history of case. There is no history of consanguinity, insanity, disposition to injure others, or to suicide, filthy or destructive habits, previous peculiarities, or intemperance. This is the first attack; the first symptoms manifested about 2 months ago; writing visionary letters. Disease appears to be increasing; not variable; no rational intervals. Derangement now shown by delusions with reference to money matters. Patient is subject to convulsions: he has not been restrained or confined; has had no treatment. Cause of the disease is not clear. On personal Examination, he manifests delusions in regard to legal & money matters. ——— " ——— " ———

Feb 18 On admission, was put on I.W. (G. H. N. R'pt. Complexion dark: hair black: eyes blue; condition of skin good: vaccination (mark) on left arm; scar on back of left thumb: is clean: teeth: one gone on
" " lower left jaw: one gone, lower right jaw. Behavior good). Received on Ward: given bath and
Mar 3 put to bed. Is exalted & talkative. Manifests no delusions: March 3. Seems more quiet. opinion still exalted. Talks a great deal & seems to have a very high opinion of his own abilities. Has parole: habits neat & clean. Pleasant in manner & conversation

15 Patient keeps on improving: receives frequent visits from wife & relatives. Still has parole. He still seems to have a very high opinion of his own abilities. Neat & clean in habits. Pleasant & agreeable in manner.

24 Was allowed to return home, to day. —

Discharged

Personal and Medical History of

Personal and Medical History of Gustave Mieran

Whole No. 5763.

Residence, Wiscoy, Winona County, Minn

Became resident of State of Minn. A.D. 1879: of County A.D. 1895

Date Admission, 19th February 1901.

Admitted by Dr. C. L. Chapple hour, 4:30 PM

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

Sex, Male Age, 49

Civil Condition, Married

Children, Eleven Age Youngest Child, —

Occupation, Farming

Degree Education, Common & High School

Profession of Religion, Evangelical

Habits, no history of intemperance

Nativity, Germany: Parents also born there

Physicians Committing, J.B. McGaughey & E.D. Keyes

Correspondents, none given in papers

No. for Year, 126.

Insane Relatives, None

Cause Exciting, Don't know

Cause Predisposing, "Chronic"

Form, Chr. Paranoid Insanity

Accompanying Bodily Disorder, he says not-

Suicidal or not, Not: has threatened & speaks of revenge on others

Date of this Attack, about 3 years ago

Duration, about 3 years

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, about 46.

Time of Leaving, 16th May 1901.

Time in Hospital, 2 mos 27 ds

Result, ~~Recovered~~: Discharged Mr 30/1901.
Improved

Examination on Admission by Dr. E. D. Vance *Date of* Feb 20/1901.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Good
Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

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

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

DELUSIONS, Systematized, Transitory, Yes
Special Subjects,

HALLUCINATIONS, Yes: of hearing
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION, 3 Years

ONSET, Gradual or Sudden,

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

Father, Dead
Paternal Relatives, none insane
Mother, Dead
Maternal Relatives, none insane
Brothers and Sisters, 3 dead: others well
Children 11 - all well

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

Malaria

HABITS, Drinking and Smoking, no

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, farming

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

Sleep, Irregular Appetite, Irregular Bowels, Irregular

Personal and Medical History of Gustave Mieran

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9½ PRESENT WEIGHT, 167 lbs USUAL WEIGHT, NUTRITION, fairly

WOUNDS, Abnormalities, Index finger of left hand amputated: Scar on right Elbow. Condition of Skin, varicosities

TONGUE, Coatings, Promptness of Movement, Coated

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

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, wears glasses.

HEARING, Good

COORDINATION, Arms, normal Legs, normal Grasp, right tests good

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

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, yes Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES, full

LUNGS,
Chest symmetry: Sym
Expansion: Good
Breath Sounds: normal

CRANIAL MEASUREMENTS.

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

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

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, Irregular

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

The patient is rather superstitious & has delusions regarding his neighbors - Says "they set his barn on fire" - "That they are trying to get rid of him" - Says "he hears people talking about him; hears them at a great distance, sometimes a mile or more"

Case is one of Mild Paranoia, which has manifested itself since he was a young man, but precipitated with his recent losses.

Personal and Medical History of *Gustave Mieran*

1901

This patient was brought here by M. J. Lins, (Sheriff), attended by Joe. Winczewski, in fair physical condition, with following history of case. There is no history of consanguinity or heredity, or intemperance. This is first attack; first symptoms manifested about 3 years ago; talking to himself walking at night, hearing voices at long distance & expressing belief that his neighbors were persecuting him. Disease seems increasing; variable & rational intervals, but no regular intervals. Derangement now shown in that he hears voices; claims supernatural hearing capacity: expresses firm belief that his neighbors oppose him and interfere with his work & prospects: he has threatened & speaks of revenge on others. Has not attempted suicide; propensity not active: no filthy or destructive habits. Previously, religious impressions very pronounced. As to any severe disease &c or head-injury, he says not. Pat. has not been restrained or confined. Dont know cause of disease. Has had no treatment. On personal Examination, tongue is furred, tremulous: breath foul: relates persecutions; claims supernatural power of hearing; answers hesitating. —

Feb 19 On admission, was put on B³ (G. H. N. R'pt. Complexion dark: hair light brown: eyes gray: condition of skin good: first finger of left hand gone: 2 marks on back: large scar on right arm: scar on right thumb: abrasion of skin on nose & left ear: Is clean: teeth: 8 in upper jaw: 1 gone, left lower; 3 gone, right lower. Behavior good. Examined by M. F. Fahey.). —

" Received on B³ Ward: given bath: seems agreeable; converses freely: talks about "trouble with neighbors": "believes that neighbors fired his barn to get rid of him and he was placed here so he could not get revenge". Feb 24. Habits clean: assists with work: Feb 27. Well-behaved.

24/27 Mar 4/7 (Fourteen day record up). Patient seems somewhat brighter; quite talkative & religious: Mar 7. Was

Apl 4/19 transferred to A¹. Apl 4. Wt 164#. P 80. Apl 19. Taken home by wife. —

29 Returned; was put on B³; May 1. Is well-behaved & agreeable: manifests no prominent

May 1/14/16 mental defects: works on ward. May 14. Transferred to A². May 16. Seems in good condition — Went home with friends.

Discharged

Personal and Medical History of

Personal and Medical History of John McCallum

Whole No. 5764.
Residence, Unknown
When he became a resident of State or County, unknown
Date Admission, 19th February 1901.
Admitted by Dr. C. L. Chapple hour, 7.50 PM
How Sent, Edmund W. Bazille, Jof P. Ramsey Co.
Sex, Male Age, 30 years
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Unknown
Degree Education, Common School
Profession of Religion, Catholic Church
Habits, Unknown
Nativity, Ireland: Parents also born there
Physicians Committing, W. D. Kelly & J. S. Gilfillan
Correspondents, none given in papers

No. for Year, 127.
Insane Relatives, Unknown
Cause Exciting, Unknown
Cause Predisposing, Unknown
Form, acute delusional Insan
Accompanying Bodily Disorder, Unknown
Suicidal or not, Unknown
Date of this Attack, unknown
Duration, Unknown
No. of Attack, unknown
No. of Admission, 1st
Age First Attack, unknown
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. J. Warnous *Date of* Feby 20/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused
MEMORY, Past Events, Impaired
Recent Events, Poor Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, Poor
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather depressed
DELUSIONS, Systematized, Transitory,
Special Subjects,
HALLUCINATIONS, Yes; says he is answer-
ILLUSIONS, -ing questions people are asking
SUMMARY, him, when asked why he talks
to himself.

HISTORICAL.
LENGTH INVASION,
ONSET, Gradual or Sudden,
(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Don't know
Paternal Relatives, Don't know
Mother, "
Maternal Relatives, "
Brothers and Sisters, Don't know
(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
Don't Know
HABITS, Drinking and Smoking, Excess
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, fairly Appetite, good Bowels, Irregular

Personal and Medical History of John McCallum

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 11 PRESENT WEIGHT, 164 lbs USUAL WEIGHT, NUTRITION, Fair
WOUNDS, Abnormalities, no Condition of Skin, reddish
TONGUE, Coatings, Promptness of Movement, clear
PUPILS, Equality, Equal Size, normal Response to Light, Slow Accommodation, Slow
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, Rhw tests good
TREMORS, Hands, none Tongue, Facial Muscles, General,
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, Yes Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Irregular
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES,
flabby
LUNGS,
Chest Symmetry; Sym
Expansion; fair
Breath Sounds; Normal
Pulse 78/30" - T. Axa: 98. 3/30" - 4 P.M.

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 Color and Appearance, reddish
Albumen, no. (nitric acid Test) Sugar, Some: (Bismuth Test) Fehling's Sol. ✓
Casts and Crystals, For Tubercular — Diazo — Yes.

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

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

The patient is Confused & Dull; has been worrying because he could not get work. Talks to himself. Says "people are talking & have run away" & he answers their questions.
Condition is one of melancholia due to irregular habits & worry.
Physically, Sluggish. —

Personal and Medical History of John McCallum

1901

This patient was brought here, with scarcely any history of case, by Deputy Emanuel Johnson, in fair physical condition. He was picked up by Police, wandering about the streets. As to consanguinity, heredity, if 1st attack, status of disease, if variable or rational intervals & whether these are regular or not, if disposed to injure others, or suicidally inclined, habits, previous peculiarities, history of intemperance, severe disease &c or head-injury, restraint or confinement, all is unknown. Cause of the disease also unknown; has had no treatment. On personal Examination, he talks to himself, has a depressed appearance. ——— " ———

Feb 19 On admission, was put on B3 (G. H. N. R'pt. Complexion dark; hair dark: eyes blue; condition of skin tanned; has small scar on right thumb; small scar on little finger of right hand: scar on abdomen: vaccination on right arm. Is clean. Teeth: 2 gone, left upper; 2 gone left lower: one gone, right upper jaw. Behavior good: Examined by M. F. Fahey). —

" Received on B3. Given bath: appears confused, stupid: talks incoherently: answers questions

21/22 hesitatingly. Feb 21. Complains of peculiar feeling in head. Feb 22. Is found talking to himself,

26 frequently. Feb 26. Still confused. Mar 4. No special change in patient to report. —

Mar 4 Still appears confused and stupid. (14 Day record up) Wt 161# P 88. Sits around onward:

May 1 Does not associate with others: seems very indifferent. May 1. Seems more disturbed; troublesome

15 toward other patients: talks to self a great deal: does no work. May 15. very noisy all day-

July 31 abusive to other patients. July 31. Is now more quiet: still delusional and confused.

Aug 1 Wt 149#. Jany 31/02. Patient, during most of period, although working some, has

1902 Jany 31 been rather agitated, and afraid of being harmed, in some way: at present, is somewhat quieter, than heretofore. Feb 1/02 Wt. 155# Listless & careless. Talks to himself. Becomes somewhat excited. Jan 1/03 Wt. 149#.

Jan. 31/03 Remained practically the same throughout the whole year. General health seems good.

Personal and Medical History of

Personal and Medical History of Mathias Zinnen

Whole No. 5766.
Residence, Rice County, Minn.

Date Admission, 26th February 1901.
Admitted by Dr. C. L. Chapple hour, 4.15 P.M.
How Sent, James Hunter, J of P. Rice County
Sex, Male Age, 80 years
Civil Condition, single
Children, ✓ Age Youngest Child, ✓
Occupation, Farmer
Degree Education, Could barely read –
Profession of Religion, German Catholic
Habits, very intemperate always
Nativity, Germany: father's, Germany: mother's not stated
Physicians Committing, W. H. Robilliard & J. S. Seeley
Correspondents, Nick Meyer (nephew)
Faribault, Minn (5 miles out)

No. for Year, 129
Insane Relatives, None
Cause Exciting, Senility & intemperance
Cause Predisposing, probably age & " "
Form, Small Dementia
Accompanying Bodily Disorder, great feebleness.
Suicidal or not, Not, but is disposed to injure others
Date of this Attack, 3 years ago
Duration, 3 years. –
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, – 77 –
Time of Leaving, Mch. 18 1901.
Time in Hospital, 20 da.
Result, Died. Chr. Interstitial Nephritis.

Examination on Admission by Dr. E. Z. Wanous *Date of* Febry/1901

MENTAL CHARACTERISTICS.

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

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Not obtainable
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Chronic Bronchitis
Interstitial Nephritis (?)
HABITS, Drinking and Smoking, very intemperate
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Farmer
Detail Date, Duration, and Character of Previous Attack, if any,
none noted
Sleep, Appetite, Bowels,

Personal and Medical History of Mathias Zinnen

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, scar on left side & hand Condition of Skin, Anaemic
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, equal Size, normal Response to Light, slow Accommodation, slow
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good
COORDINATION, Arms, patient very Legs, unsteady, by tests Grasp,
TREMORS, Hands, present Tongue, present Facial Muscles, General,
PATELLAR REFLEX, sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, yes Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, irregular
Strength, Sounds, weak
Size, enlarged
Apex Beat, down & to left
Murmurs, none noted
ARTERIES,
Sclerotic
LUNGS,
Chest symmetry; Emphysematous
Expansion; poor
Breath Sounds: Chr. bronchitis

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

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

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

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

The patient is a case of Senility: Demented & very troublesome. Is suffering from Nephritis, which is perhaps cause of trouble, as case appears to be one of auto-intoxication. Is also suffering from Chronic Bronchitis –

Personal and Medical History of Mathias Zinnen

1901

This patient was brought here by Deputy G.R. Mosher attended by Nicholas Becker, in poor physical condition, with following history of case. As to consanguinity, dont know. This is 1st attack; symptoms manifested 2 years ago; acted foolish, had strange notions, and would go where he would have no object in going. Disease seems increasing; not variable; no rational intervals: formerly, had rational intervals, but does not now, now for 2 months. Derangement now shown in that he recognizes no one, but inquires for relatives &c that are present; always tries to go away &c: delusions. Is disposed to injure others, but not suicidal: is of filthy & destructive habits; no insane relatives: no previous peculiarities. Has been very intemperate always: no severe diseases &c or head-injury, so far as known: mild restraint has been employed: for a little over a year, he has been carefully watched &c. Supposed cause of the disease is senility & intemperance: treatment, none. Nothing further on personal examination.

Feb 26 On admission, was put on T.W. (G.H.N.P.) Complexion light: hair gray & bald: eyes blue; Condition of skin fair: scrotum red & sore: 2 moles on back: several bruises on both hands: bruise on right side: 2 small bruises on left hip: small bruise on right leg: is dirty: teeth all gone except one in front of lower jaw. Behavior good. Is very helpless.

" Received on T.W. Is old and feeble: rather demented: very noisy and destructive through

28 the night: bowels badly constipated. Feb 28. Given Enema. Mar 1. Very restless through the night.

Mar 1/5/ Mar 5. Patient very dirty and filthy. Mar 11. Must be watched, to keep from falling out

12 of bed. Mar 12. (Fourteen day record up) - No change specially noticeable in condition -

13/14/15/ Restless through nights. Mar 16. Patient has been failing rapidly, ever since admis-

16 sion and died to day.

— Died —

Personal and Medical History of

Personal and Medical History of Fred. Hall

Whole No. 5767

Residence, Faribault, Minn

Date Admission, 26th February 1901.

Admitted by D. C. L. Chapple hour, 4th PM

How Sent, James Hunter. Jof P. Rice County

Sex, Male Age, 37.

Civil Condition, married

Children, One Age Youngest Child, —

Occupation, Laborer

Degree Education, Not educated

Profession of Religion, Seventh Day Adventists

Habits, not known (as to intemperance) —

Nativity, Minnesota: Parents born in Detroit Michigan

Physicians Committing, W. H. Tobillard, + J. S. Seeley

Correspondents, Mrs Lizzie Hall (wife)
Faribault Minn

No. for Year, 130.

Insane Relatives, A Cousin was insane in Asylum

Cause Exciting, Epilepsy, and "the" Issue —

Cause Predisposing, previous attacks of Epilepsy —

Form, ~~Epileptic~~ Insanity

Accompanying Bodily Disorder, Epilepsy —

Suicidal or not, Not. —

Date of this Attack, about a week ago

Duration, — a week (or less)

No. of Attack, 3rd

No. of Admission, 2nd (Rec'd from Asylum 9/99 – May 27/99)

Age First Attack, 33 years

Time of Leaving, 25th March 1901.

Time in Hospital, 27 Days

Result, ~~Recovered~~: Discharged Mar. 30/1901.
Improved

Examination on Admission by Dr. E. J. Ramus *Date of* Feby 27/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, not clear
Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

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

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

DELUSIONS, Systematized, Transitory, Yes (?)
Special Subjects,

HALLUCINATIONS, of sight
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION, recurred, 1 week ago

ONSET, Gradual or Sudden, Sudden

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

Father, Dead: phthisis pulmonalis
Paternal Relatives, none insane
Mother, Living — well
Maternal Relatives, none insane
Brothers and Sisters, 2 sisters 2 died of consumption
Children 1 — well
PROMINENT DISEASES, Head Injuries and Surgical Operations). (especially Typhoid Fever, Sunstroke,

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, Epilepsy

OCCUPATION, Healthy or not, Laborer

Detail Date, Duration, and Character of Previous Attack, if any,
about 2 years ago

Sleep, good Appetite, good Bowels, irregular

Personal and Medical History of Fred Hall

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9½ PRESENT WEIGHT, 135 lbs USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, Scar on left side of face. Condition of Skin, reddish, oily.

TONGUE, Coatings, Promptness of Movement, grayish coating

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

SIGHT, good

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

HEARING, Good

COORDINATION, Arms, normal Legs, normal Grasp, Other tests good

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal

Strength, Sounds, weak

Size, normal

Apex Beat, "

Murmurs, None noted

ARTERIES,
normal

LUNGS,
Chest Symmetry; Sym
Expansion; Good
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,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, poor, Quite Less.

BOWELS, Present Condition, Constipated

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

The patient is rather indifferent: says he does not feel as well as usual; that he becomes much confused & excited after "Epileptic Spells." Sometimes becomes Destructive.

Case is one of Dementia in Epilepsy. Physically, is weakened and has a feeling of Sanguishness. Has a scar on left cheek, caused by a burn. —

Personal and Medical History of *Fred Hall*

1901

This patient was brought here by Deputy G. R. Moshier, attended by Wm Conley, in fair physical condition, with following history of case. There is no history of consanguinity: A cousin was insane and in asylum. This is not first attack (apparently the 3rd): was in hospital here (Rochester) for one month. Improved: First symptoms of this attack manifested about a week or less ago, by strange actions &c. Disease seems increasing; is variable, and with rational intervals; he has been well until about a week ago. Derangement now shown on the subject of Seventh Day Adventism. Patient is not disposed to injure others, nor suicidal: has some filthy and destructive habits. Previous peculiarities, none: but he is always awake on "the" subject, and, in the opinion of Dr Seeley, always a little or more "off". Any history of intemperance not known. Has been subject to Epilepsy. Has been confined or restrained since yesterday. Supposed cause of disease, Epilepsy & "the" issues. Patient has been under treatment for Epilepsy. Nothing special brought out, on personal examination.

N.B. Patient was here before, from Apl 24/99 to May 25/99 & discharged Oct 31/99. Recorded = V.43 P37 No. 53-90

Feb 26 On admission, was put on B3 (G.H.N.R'pt. Complexion dark: hair dark, sprinkled with gray: eyes brown: condition of skin good: scars on left cheek: vaccination scar on left arm: Is clean. teeth: 2 gone, left upper; 1, left lower; 1 gone, right lower: Is inclined to be a little ugly. Patient had a convulsion, on the way to the ward).

" Received on B3. Had convulsion, while going onward: is confused & nervous. —

27/28 5 convulsions, through the day (light). Feb 28. Had a convulsion. Still somewhat confused

Mar 1.2.3.4 Had convulsion, on each day. Mar 6 – 11. Convulsion, on each day. (14 Day record up).

19 – 24 Convulsion through night. Through the day, is neat, clean and has no trouble. —

25 Visited by father & taken home.

Discharged

Personal and Medical History of

Personal and Medical History of Frank Seymour

Whole No. 5778.
Residence, Wells, Rice County, Minn.
Date Admission, 14th March 1901.
Admitted by Dr. E. Z. Wanous hour, 4.30 P.M.
How Sent, James Hunter, Jo. P. Rice County
Sex, Male Age, 27
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Common School
Profession of Religion, German Lutheran.
Habits, no history of intemperance.
Nativity, Germany: parents also born in Germany
Physicians Committing, Roscoe N. Jackson & P. A. Smith
Correspondents, Ferdinand Schmidt (in town) Faribault, Minn.

No. for Year, 141.
Insane Relatives, none (sister, Wilhelmina Schmidt) Committed to day
Cause Exciting, nervous prostration
Cause Predisposing, not stated
Form, Acute Melancholia
Accompanying Bodily Disorder, Bronchitis for years. Some weakness —
Suicidal or not, — not —
Date of this Attack, 3 or 4 weeks ago
Duration, 3 or 4 weeks
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, — 27 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* Mar 15/1901

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, poor
Special Subjects, "
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, Transitory, Yes
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Died: Cancer of stomach
Paternal Relatives,
Mother, Living
Maternal Relatives,
Brothers and Sisters, 2 5 1 sister Insane
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
no
HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
no
Sleep, poor Appetite, poor Bowels, Constipated

Personal and Medical History of Frank Seymour

5778
49/33

M Frank Seymour

Copy of Order for Hearing Petition of Ferdinand Schmidt for appointment of him, the said Ferdinand Schmidt as guardian for Frank Seymour insane; served and service admitted March 16/1901

(Papers filed with commitment papers.)

RACTERISTICS.

USUAL WEIGHT, NUTRITION, Emaciated
Condition of Skin, anaemic
ating: sluggish
onse to Light, normal Accommodation, normal
normal Grasp, other tests made, good.
TREMORS, Hands, no Tongue, no Facial Muscles, no General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, yes Slow, yes
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, irregular
Strength, Sounds, Clear
Size, "
Apex Beat, "
Murmurs, no
ARTERIES,
flabby
LUNGS,
Chest symmetry: sym
Expansion: poor: slight dullness in R apex.
Breath Sounds: normal.

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

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

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

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

The patient appears depressed & only answers occasional questions. Mind seems fixed — "Thinks he has been getting "diseases" from other people". Physically is emaciated: heart very irritable
Case is one of acute Melancholia.

Personal and Medical History of Frank Seymour

Whole No. 5778.
Residence, Wells, Rice County, Minn.

Date Admission, 14th March 1901.
Admitted by D. E. J. Wanous hour, 4.30 PM
How Sent, James Hunter. Jo. P. Rice County
Sex, Male Age, 27
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Common School
Profession of Religion, German Lutheran.
Habits, No history of intemperance.
Nativity, Germany: parents also born in Germany
Physicians Committing, Lorcol N. Jackson & P. A. Smith
Correspondents, Ferdinand Schmidt
(in town) Faribault, Minn

N
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S

No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, — 27 —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. J. Wanous *Date of* Mar 15/1901

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, poor
Special Subjects, "
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, Transitory, Yes
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Died: Cancer of stomach
Paternal Relatives,
Mother, Living
Maternal Relatives,
Brothers and Sisters, 2 5 1 sister Insane
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
no
HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
no
Sleep, poor Appetite, poor Bowels, Constipated

Personal and Medical History of Frank Seymour

PHYSICAL CHARACTERISTICS.

HEIGHT, 6ft 1in PRESENT WEIGHT, 152 lb USUAL WEIGHT, NUTRITION, Emaciated
WOUNDS, Abnormalities, only one testicle. Condition of Skin, Anaemic
TONGUE, Coatings, Promptness of Movement, grayish Coating: sluggish
PUPILS, Equality, equal Size, normal Response to Light, normal Accommodation, normal
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, No
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, Muscle tests made, good.
TREMORS, Hands, No Tongue, No Facial Muscles, No General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, Yes Slow, Yes
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Irregular
Strength, Sounds, Clear
Size, "
Apex Beat, "
Murmurs, No
ARTERIES, flabby
LUNGS,
Chest Symmetry: Sym
Expansion: poor: slight dullness at R apex.
Breath Sounds: normal.

CRANIAL MEASUREMENTS.

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

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

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

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

The patient appears depressed & only answers occasional questions. Mind seems fixed - "thinks he has been getting "diseases" from other people". Physically is emaciated: heart very irritable
Case is one of acute Melancholia.

Personal and Medical History of Frank Seymour

1901

This patient was brought here by Deputy J. B. Thompson, attended by Fred Schmidt, in poor physical condition, & with following history of case. There is no history of consanguinity, or sex heredity, intemperance, severe disease &c or head injury. This is first attack; (has not been in hospital); first symptoms manifested by his being nervous: excitable for the past three or four weeks. Disease seems increasing; not variable: no rational intervals: Derangement now shown by his being delirious as to diseases; fear of some one injuring him. Patient is not disposed to injure others, nor suicidal; Is disposed to destructiveness. No previous peculiarities manifested, only as to his physical condition; talking about the girls: delusions. He has not been restrained or confined. Supposed cause of the disease is nervous prostration; nothing, in the way of treatment. On personal examination, he is nervous, excitable & irritable from sickness; has had bronchitis for years. —— " ——

Mar 14 On admission was put on T.W. (G. H. N. R'pt. Complexion light: hair light. Eyes gray: Condition of skin fair: scars on right leg: is dirty: (Bodily peculiarities, 1 Testicle): Teeth, one out of upper jaw: behavior good.

" " Received on Ward: put to bed: Is melancholia: depressed: much emaciated: March 16 Restless

16/18 all night: March 18. Is expectorating a great deal: troubled with constipation. Apl 20 Is up

Apl 20/26 and around — Apl 26 Transferred to B³. Patient seems dull: has to be urged about. —

28 Has Temp. 104°. Transferred to TW: given bath & put to bed: restless all night: put on

May 3 treatment & improved. May 3. Up & dressed: Continues to cough & expectorate. June 14 was

June 14 Transferred to B³. July 2. visited by friends. July 31. Shows considerable failure physically: seems weak: and has tubercular trouble. Aug. Wt 138#. Aug 28. Patient has

July 31 been rather dull & untidy: is, today, noticed as failing more rapidly & becoming weak:

Aug 28 and transferred to TW: considerable expectoration — Oct 1 after being placed on TW

Oct 1 had rise of Temp: once or twice, but has been practically about normal. Oct 12. Patient

12 up & dressed: physical condition fair. Oct 26 To D². Is rather dull and quiet.

26 Wt 165#. Jany 31/02. Patient very indolent: sits about: never speaking: Scarcely

Nov 1 stirring during the day: does no work: quite neat in habits: Physical condition very good.

1902 Jany 31 Feb 1 Wt. 173#; Aug. 1 Wt. 167#. Aug 7. Eloped; was returned same day. Aug 1 Very quiet; apathetic; occasionally doing little work about grounds; Aug 14. Visited by friend. Oct. 15 Eloped; returned same day. Jan. 5 Eloped; brought back from Eyota.

1903 Jan. 31. Continues about same mentally; works some about grounds; habits rather untidy; physical condition good.

Personal and Medical History of

Personal and Medical History of Daniel Mullen Jr.

Whole No. 5779.
Residence, St. Paul, Minn.
Became resident of state, 40 years ago: of County 40 yrs ago
Date Admission, 14th March 1901.
Admitted by Dr. A. J. Kilbourne hour, 7 30 P.M.
How Sent, Edmund W. Bazille, J. of P. Ramsey County
Sex, Male Age, 40 yrs
Civil Condition, Married
Children, None Age Youngest Child, —
Occupation, Merchant
Degree Education, Common School
Profession of Religion, Roman Catholic
Habits, No history of Intemperance
Nativity, St. Paul. Minn: parents born in Ireland
Physicians Committing, Charles J. Meade x W. Dunning
Correspondents, Mrs Daniel Mullen (wife)
9/12/1901 220. ~~208~~ Nelson Ave. St. Paul

No. for Year, 142.
Insane Relatives, None
Cause Exciting, Syphilis
Cause Predisposing, "Chronic" (?)
Form, Organic Brain Disease
Accompanying Bodily Disorder, Syphilis
Suicidal or not, not
Date of this Attack, May 1899
Duration, 1 year & 10 mos.
No. of Attack, 1st —
No. of Admission, 1st (was in City & County H)
Age First Attack, 38
Time of Leaving, November 10th — 1901
Time in Hospital, 7 mos. - 27 Ds
Result, Died: organic brain disease

Examination on Admission by Dr. E. Z. Wanous *Date of* March 15/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear: has "Spells" when he shows a temp. loss of Consciousness, or is confused
MEMORY, Past Events, Fair
Recent Events, fair Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, fair
Special Subjects, "
Own Mental State, appreciates Condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather indifferent
DELUSIONS, Systematized, Transitory, Yes
Special Subjects,
HALLUCINATIONS, of hearing
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living
Paternal Relatives, no history of Insanity
Mother, Dead: heart trouble
Maternal Relatives, no history of Insanity
Brothers and Sisters, well
Children — No.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Syphilis: apoplexy, last fall
HABITS, Drinking and Smoking, Yes
~~HEADACHES~~, ~~VERTIGO, OR~~ CONVULSIONS, Yes
OCCUPATION, Healthy or not, Merchant
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, good Appetite, good Bowels, irregular.

Personal and Medical History of Daniel Mullen Jr.

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10 in PRESENT WEIGHT, 159 # USUAL WEIGHT, NUTRITION, fairly
WOUNDS, Abnormalities, Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, Large, coated Sluggish.
PUPILS, Equality, L. larger Size, Large Response to Light, Slight Accommodation, fair
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, arcus senilis noted in left eye.
HEARING, good
COORDINATION, Arms, normal Legs, normal ~~Grasp~~, other tests, steady
TREMORS, Hands, Slight Tongue, Slight Facial Muscles, General,
PATELLAR REFLEX, exaggerated Other Reflexes,
ARTICULATION, Slurred, Yes Hesitating, Yes Slow,
FACIAL EXPRESSION, Sensibility, lessened.
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES,
normal
LUNGS,
Chest Symmetry: Sym
Expansion: good
Breath Sounds: normal
Passed 4/1. 1 30 P.M. Ex. 4/1. 4 30 P.M.

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. 1025 Reaction, neutral Color and Appearance, Reddish sediment
Albumen, No (Nitric acid Test) Sugar, No (Fehling's Sol:) No. (Bismuth
Casts and Crystals,

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

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

The patient has "Spells" when he loses consciousness, lasting a few seconds, at a time, or he becomes confused: then suddenly awakens and asks some question. Is controlled by hallucinations, also transitory delusions. "Thinks his voice is too loud": "hears noises in his head": "Can hear people talking for blocks away". Gives history of specific infection, 12 years ago; also of a hemiplegia, last year, from which he recovered. —

Personal and Medical History of Daniel Mullen Jr.

1901

This patient was brought here by Deputy E. Johnson, attended by Mrs Daniel Mullen, in fair physical condition, and with following history. There is no history of consanguinity, heredity any previous peculiarities, intemperance, severe disease, or head injury. (See Syphilis.) — This is first attack: was in City and County Hospital; temporary improvement. The first symptoms of this attack were manifested in May 1899. by mild mania, characterized by delusions. Disease seems increasing: Is variable & with rational intervals, but these are not regular. Derangement now shown by hallucinations of hearing, incoherence, and thickness of speech. Patient is not disposed to injure others, nor suicidal; no filthy or destructive habits. Has not been restrained or confined. Supposed cause of the disease is Syphilis; has been treated by Iodides & mercury. On personal Examination, nothing noted.

Mar 14 On admission, was put on B.B. (G.H.N. R'pt. Complexion dark: hair dark brown; eyes brown: Condition of skin good: mole on right shoulder: vaccination mark on left arm: scar on left thumb. Is clean: Teeth: 1 gone in upper jaw: 2 gone, in lower jaw: Behavior good. Ex.) —

N.B. See letter of Dr. Chas. J. Meade, St Paul. Minn (March 26/1901) at request of Mrs Daniel Mullen Jr.

"In May '99, he had an attack resembling closely acute Gastritis, lasting about 1 month: no marked symptoms of mental disturbance, at this time: was constantly smiling or laughing, when spoken to, & slight hesitancy in speech; at times, one pupil larger than the other & did not react to light and accommodation, as quickly or promptly as its fellow (forget which one it was). From this time forward, he was never quite normal, tho' no definite condition could be made out. About August 5th, he had a series of convulsions, followed by complete hemiplegia, with incontinence of faeces & urine. This cleared up gradually, within 2 months. Since September 1900, I have treated him for 2 attacks of Aphasia, coming on suddenly & lasting for 3 or 4 days; the last one followed by "delusions of sight & hearing" — He has been seen, at different times, by Drs Riggs, Sweeney, Smith O'Brien."

Mar 14 Received Onward: given bath: patient seems to lose consciousness, lasting but a few moments, when he clears up again: shows some signs of cortical irritation — occasionally, answers questions rationally. His "Spells" come on at irregular intervals, through the day. He is on Iodide treatment, showing an improvement at the end

" 28 of 14 Days. (14 Day-record up). Apl 1. Patient is confused: seems very absent-minded.

Apl 1/6 Shows symptoms of brain-softening — Apl 6. Shows some improvement: "Spells" of

29 absent-mindedness not so marked: has been on anti-specific treatment. Apl 29. Was

May 1 visited by wife. May 1. 156# P120. Is troubled with constipation: June 26. Medicine dis-

July 20 -continued. July 20. Is much confused: has some Temp: & rapid pulse. Trees to close-

Aug 7/24 Very much excited: confused. Transferred to T.W. Put to bed & on treatment. Aug 24. Has to be

28 fed mechanically. Aug 28. Was visited by wife. Is failing both mentally & physically.

31 Condition continues as above described. Sep 1. Wt 129#. Temp: runs a little above

Sep 1/13 normal: is restless & inclined to be violent. Sep 13. Was visited by his wife.

17 and Father Riordan: condition continues the same. Sep 17. Has been visited by wife,

Oct 1 daily, since last note. Patient is easily excited & half-maniacal. Oct 1. Patient has been in protection sheet, as he injured himself recklessly, while free to do so —

Personal and Medical History of Daniel Mullen Jr.

1901 cont'd

Oct 1/3 Is dirty in habits: does not improve any: Oct 3. Visited by friend: (Temp: runs from normal

21 to 100 5/10) — Oct 21. Temp: has been more nearly normal, and, at times, distinctly sub-normal, during past week. (94°): at another, 95°, & several times, 97° to 98°.

28 Temp: has been running from 95° to up to normal. Has, several times, inflicted slight injuries upon himself. Yesterday, knee was considerably swollen: he will not assist, in anyway, but tears off bandages & makes his injuries worse —

31 Seems to be failing. Is still kept in muff, to help control him — Nov 3 — Pa-

Nov 3 -tient is noted as failing rapidly: maintains same behavior: will not eat

5 well: has to be fed with tube — Nov 5. Fell out of bed: bruised himself more —

10 fed with tube: visited by wife. Temp: more subnormal yet. Nov 10. Patient failed rapidly & died at 1 45 Pm — Had several "sinking spells" during day.

Died

Personal and Medical History of John. M. La Fever

Whole No. 5780.
Residence, St Paul, Minnesota.
Resident of State, always: of County, always
Date Admission, 16th March 1901.
Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.
How Sent, Edmund W. Bazille, J of P. Ramsey Co.
Sex, Male Age, 22
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Laborer
Degree Education, Grammar School
Profession of Religion, Catholic
Habits, not intemperate
Nativity, St Paul Minn: (father's, Germany; mother's, Ireland)
Physicians Committing, O. Martel & Arthur Sweeney
Correspondents, Aug. La Fever
1094 E 7th St, St Paul

No. for Year, 143.
Insane Relatives, none
Cause Exciting, Overwork & study
Cause Predisposing, not stated
Form, ~~Pubescent Stolen~~
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not
Date of this Attack, About Christmas time
Duration, about 3 months
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 21+
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* March 18/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused & sluggish
MEMORY, Past Events, somewhat impaired
Recent Events, " " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, poor
Special Subjects, " "
Own Mental State, appreciates condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
somewhat depressed
DELUSIONS, Systematized, Transitory, Yes
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living
Paternal Relatives, no history of Insanity
Mother, Living
Maternal Relatives, no history of Insanity
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Masturbation: La Grippe (?)
HABITS, Drinking and Smoking, No
HEADACHES, VERTIGO, OR CONVULSIONS, Vertigo
OCCUPATION, Healthy or not, Factory work
Detail Date, Duration, and Character of Previous Attack, if any,
No
Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of John. M. La Fever

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9½ PRESENT WEIGHT, 134# USUAL WEIGHT, NUTRITION, Fair
WOUNDS, Abnormalities, No: vaccination Mark Condition of Skin, sluggish anaemic
TONGUE, Coatings, Promptness of Movement, Grayish Coating: sluggish
PUPILS, Equality, Equal Size, normal Response to Light, normal Accommodation, normal
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, No
HEARING, good
COORDINATION, Arms, normal Legs, normal Grasp, (Coordination good)
TREMORS, Hands, Fibrillary Tongue, Fibrillary Facial Muscles, " General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow, yes
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, irritable
Strength, Sounds, weak
Size, normal
Apex Beat, "
Murmurs, none noted
ARTERIES,
Flabby
LUNGS,
Chest Symmetry: Sym
Expansion: fair
Breath Sounds: normal
Passed 3/30/01. 3.00 P.M. Exp. 3/30/01 4.00 P.M.

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. 1027 Reaction, neutral Color and Appearance, Yellow
Albumen, No (Nitric acid Test) Sugar, No. (Fehling's Sol.) No (Bismuth) -
Casts and Crystals, For Tubercular. Diazo - no.

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, poor.
BOWELS, Present Condition, irregular

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

The patient has been much depressed & worrying about himself, because he has been abusing himself; has various delusion about the result of it. Thought, by becoming a priest, he would avoid it all. Has been religious & talks about it. Is pale, anaemic & emaciated. —

Condition one of mild delusional & acute melancholia.

Personal and Medical History of John M. La Fever

1901

This patient was bought here by Deputy Sheriff Johnson, attended by Chas. La Fever, in poor physical condition, with following history of case. There is no history of consanguinity, heredity, previous peculiarities, intemperance, severe disease &c, or head-injury. This is 1st attack; first symptoms manifested about Christmas time; he began to be melancholy; disease seems increasing; not variable; no rational intervals. Derangement now shown in that he believes he was called to the Priesthood and to answer for sins & has other religious delusions. Patient is not disposed to injure others, nor suicidal; no filthy or destructive habits; he has not been restrained or confined. Supposed cause of the disease is Overwork and study. Treatment, none. On personal examination, it is found he is sleepless, melancholy, walks the floor, talks of religious delusions, & cries a great deal.

Mar 16 On admission, was put on B3 (G.A.N.R. Pt. Complexion light: hair light brown; eyes brown; condition of skin good: vaccination scar on left arm: is clean: teeth all good: behavior good: Exd by M. F. Fahy)

" Received on Ward. Given bath. Patient appears depressed & worries a great deal. "Thinks he has been called to the Priesthood". Has been working hard, studying & earning a living.

23/29 Still depressed. Mar 29. No change in patient is noticed, at this date. —

31 (14 Day record up) — Mar 31. Is very quiet & well-behaved: somewhat despondent: melancholy: "Thinks he has been called to the Priesthood, but has abused himself & could not become one" —

May 1 Wt 145# Pg 6. Seems some brighter: does not talk so much about delusions: July 1. 149#

July 31 No further change to report in mental condition. Aug 1. Wt 153# — Jany 31/02. Condition

1902 Jany 31 has changed little. Is dull: answers questions hesitatingly, but fairly well. — at times, very stubborn —

Feb. 1 Wt. 153#. Feb. 11 Trans. to B2. July 29 Visited by mother & sister. Has improved slightly mentally; still listless & inactive; works little; habits neat; does not talk unless addressed. Aug 1 Wt. 137#.

Jan. 1 Visited by physician from St. Paul.

1903 Jan 31 Has continued to improve slightly; still sluggish & indifferent; quite rational; takes little interest in anything; stays by himself.

Personal and Medical History of

Personal and Medical History of John Toma
al. Thomas Tuma

Whole No. 5782.
Residence, St Paul, Minnesota
Resident of State, 32 years; of County 32 years
Date Admission, 19th March 1901.
Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.
How Sent, E. W. Bazille, J. of P. Ramsey Co.
Sex, Male Age, 64
Civil Condition, married
Children, four Age Youngest Child, —
Occupation, Laborer
Degree Education, Common School
Profession of Religion, Catholic
Habits, not intemperate —
Nativity, Bohemia; parents also born there
Physicians Committing, J. S. Gilfillan & D. C. Jones
Correspondents, none given in papers

No. for Year, 145
Insane Relatives, none
Cause Exciting, Dont Know
Cause Predisposing, previous attack
Form, Chr. mania
Accompanying Bodily Disorder, none mentioned
Suicidal or not, — not —
Date of this Attack, a month ago
Duration, — a month —
No. of Attack, 2nd (one, 3 years ago)
No. of Admission, 2nd
Age First Attack, — 58 years —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* March 20/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Rather Confused
MEMORY, Past Events, good
Recent Events, " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct
REASONING POWER, Ordinary Subjects, fair
Special Subjects,
Own Mental State, dont know his condition.
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Rather Exalted

DELUSIONS, Systematized, Transitory, yes
Special Subjects, Religion & Lodges

HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dont Know
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters, nothing known regarding them
Children 4
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, to excess.
HEADACHES, VERTIGO, OR CONVULSIONS, No.
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
yes: May 11/99
Sleep, poor Appetite, poor Bowels, poor

Personal and Medical History of John Toma
al. Thomas Tuma

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 PRESENT WEIGHT, 180# USUAL WEIGHT, NUTRITION, fairly nourished
WOUNDS, Abnormalities, Lipoma on left dorsal side of shoulder Condition of Skin, sluggish
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, normal Response to Light, slow Accommodation, slow
SIGHT,
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Impaired
HEARING, good
COORDINATION, Arms, normal Legs, normal Grasp, other tests good
TREMORS, Hands, fine Tongue, fine Facial Muscles, General,
PATELLAR REFLEX, Other Reflexes,
ARTICULATION, Slurred, Hesitating, some Slow,
FACIAL EXPRESSION, Sensibility, normal
HEART, Regularity, regular
Strength, Sounds, weak: chest-wall thick
Size, normal
Apex Beat, normal
Murmurs, none noted
ARTERIES,
Sclerotic
LUNGS,
Chest symmetry; sym
Expansion; good
Breath sounds; normal
Passed 3/29 - 7.30 am. Exp. 3/29 4.30 P.M.

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, Reddish - sediment
Albumen, No (nitric acid Test) Sugar, yes, decidedly - (Bismuth) -
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Fair.
BOWELS, Present Condition, constipated

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

The patient is Exalted: very talkative & expresses various delusions, regarding Religion, Lodges: also thinks his neighbors are trying to get him in trouble. Condition worse, when he is drinking. Continually talks about people not doing as the Bible teaches. Physically, fairly well nourished.

Personal and Medical History of John Toma
alt Thomas Tuma

1901

This patient was brought here by Deputy Sheriff Johnson, in fair physical condition, and with following history of case. There is no history of insanity or consanguinity, previous peculiarities, intemperances severe disease &c, or head-injury. This is not 1st attack: one occurred 3 years ago; duration 18 months; was at Rochester Hospital & improved. First symptoms of this attack manifested a month ago; sings & talks at random. Disease seems stationary; is variable & with rational intervals, but these, irregular. Derangement now shown on the subject of religion; "occasionally holds conversations with Saints and Christ". Patient is not disposed to injure others nor suicidal; no filthy or destructive habits; as stated, he was confined at this (Rochester) Asylum. Dont know cause of the disease. Has only been treated in Asylum. On personal Examination, is apathetic.
N.B. Patient was at this Hospital as "Thomas Tuma", from May 11/99 to June 18/99 and discharged Dec 27/99, Improved: (See Vol 43 Page 69. No 5307).

Mar 19 On admission, was put on B3 (G. H. N. R'pt. Complexion dark; hair dark, sprinkled with gray; eyes brown; condition of skin good: Scars: 2 on breast: 1 on right side; vaccination, on left arm; scar on left ankle & enlarged enlargement on posterior of left upper arm: Is dirty. — Teeth: one gone, right upper; 2, right lower; 1 left lower. Behavior good: Exd by M. F. Fahey).

"/26 Received on Ward. Seems excited and talkative and confused. Mar 26. Patient talks to
27 imaginary persons about him. Mar 27. Seems somewhat quieter, and less confused.
Apl 1 Patient shows some improvement. May 1. Wt 171½ lbs — Scarcely speaks any English.
May 1 Goes about, talking very loud, in his own language: manner elated & silly: Indolent.
3/31 Does nothing. May 3. Transferred to B2. — May 31. No change noted, in anyway: June 30. About same.
July 31 Continues very noisy, at times: harangues in his own language, by the hour: laughs in
Aug 1 a silly manner: does nothing: general health good. Aug 1. Wt 167# Nov 1. Wt 169#.
1902 Jan 31 No change in mental or physical condition. Does nothing: is quite noisy and incoherent, but good natured.

Feb. 1 Wt. 168#. Mar. 26 Transferred to IWE; slight indisposition. Apr. 1 Transferred to B2.
July 1 Visited by son. Aug. 1 Wt. 155#. Patient works some on ward & in kitchen; noisily talkative; laughs sillily; cannot be understood; is peaceably inclined & tidy. Nov. 1 Visited by daughters.
1903 Jan 31. Patient continues about the same; appears some demented; very noisily talkative.

Personal and Medical History of

Personal and Medical History of Bartley J. O'Donnell

Whole No. 5783.

Residence, Highland Wabasha Co. Minn.
Became resident of Minnesota 1873. of Wabasha Co. 1873

Date Admission, 22nd March 1901.

Admitted by Dr. E. J. Wanous hour, 8th P.M.

How Sent, Malcolm Kennedy, Jof P. Wabasha Co.

Sex, Male — Age, 35

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession of Religion, Roman Church

Habits, probably bad: (Drank Whiskey; self abuse)

Nativity, County Galway, Ireland: parents also born there

Physicians Committing, P.N. Keely & W.F. Milligan

Correspondents, W. D. Collier (makes proof of residence)

No. for Year, 146.

Insane Relatives, None

Cause Exciting, masturbation

Cause Predisposing, probably bad habits

Form, ~~Hypochondriacal Delusion~~

Accompanying Bodily Disorder, Quite weak.

Suicidal or not, Yes & propensity active.

Date of this Attack, Yesterday

Duration, — one day —

No. of Attack, 1st.

No. of Admission, 1st

Age First Attack, — 35 —

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. J. Wanous *Date of* Mar 23/901.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

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

DELUSIONS, Systematized, of Persecution Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, 8 years ago

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

Father, Died — "Some fever"

Paternal Relatives, none known

Mother, Dead — "Some fever"

Maternal Relatives, None insane

Brothers and Sisters, 4 2 Brothers dead: 1 Sister died of Consumption.

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

Chr. Cystitis: masturbator

HABITS, Drinking and Smoking, Excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Farming

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

No

Sleep, poor Appetite, poor Bowels, Constipated.

Personal and Medical History of Bartley J. O'Donnell

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, No Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, badly coated.

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

SIGHT, Good

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

HEARING, Good

COORDINATION, Arms, Normal Legs, Normal ~~Grasp.~~ Lycopodium test, very unstable

TREMORS, Hands, Coarse Tongue, Facial Muscles, General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Hesitating, Yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, weak

Size, Normal

Apex Beat, normal

Murmurs, None

ARTERIES,
Flabby

LUNGS,
Chest symmetry; Sym
Expansion; Poor
Breath Sounds, Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, 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).

The patient had been without work for some time & had been worrying about himself. Thinks trouble began 8 years ago, when he began masturbating. Became despondent on his trouble & thought several times of Committing Suicide. Mouth very sore, from bad teeth & Sordes.

Personal and Medical History of Bartley J. O'Donnell

1901

This patient was brought here by Deputy William D. Collier, in poor physical condition, with following history of case. There is no history of consanguinity, or heredity: this is 1st attack:— first symptoms manifested when he tried to commit suicide with a razor yesterday— Disease seems increasing; not variable: no rational intervals. Derangement is now shown in that he thinks he is imposed upon. Is disposed to injure others; has attempted suicide, with a razor & propensity now active. Has filthy habits: drank whiskey: practices self-abuse: No history of intemperance in parents: has not been subject to any severe disease &c or head-injury: has not been restrained or confined. Supposed cause of the disease is masturbation. No treatment.

On personal Examination, he talks incoherently; habits are filthy: does not eat. ——

Mar 22 On admission, was put on T.W. (G.H.N. R'pt. Complexion dark: hair dark brown; eyes gray: Condition of skin fair: vaccination mark on left arm: 2 small scars on left side: 1 on small of back; 1 on right knee: has double hernia: is dirty: teeth in fair condition. Behavior good: Ex'd by W. F. Knutson)

" " Received on Ward: given bath: seems exalted: talkative & rather simple in manner. —

Apl 1/10 Is up & around. Frequently says "he thinks some one wants to kill him" — Apl 10. Transferred

May 1 to B3. May 1. Wt 107#. P 108 — June 10. Threatened to kill nurse with billiard cue — had

June 10 to be held on floor — July 14. Had case-knife (taken off the table) — hid under mattress —

July 31 No change specially to report. — Aug 1 Wt 114# — Jany 31/02. Has been nervous: rather

1902 Jany 31 weak, at times: talk is somewhat confused: slightly irritable. Patient is rather feeble-minded: no special sickness. Feb. 1/02 Wt. 115#. Patient is very childish. It is getting very hard for him to walk at all — gradually losing power in legs. Mar. 17/02 Becoming more paretic — was today dirty — July 31/02 Becoming very unsteady. Is wheeled in chair. Sept. 23/02 Received from A4 on Inf. Had become too weak to be up & about. Oct. 1/02 Remaining quietly in bed — Is becoming more dull & listless mentally. Nov. 1/02 97# Is growing very helpless. Has to be lifted in & out of bed. Dec. 1/02 Gradually failing

Jan 31/03. Patient is still failing. Lies in bed — quite completely helpless.

Personal and Medical History of

Personal and Medical History of Frederick P. Remer

Whole No. 3784.
Residence, St Paul, Minnesota
Resident of State at birth: Of County, Same
Date Admission, 23rd March 1901.
Admitted by D. E. J. Ivanous. hour, 7.30 P.M.
How Sent, Edmund W. Bazille, Jof P. Ramsey County
Sex, Male Age, 31
Civil Condition, Married
Children, — Age Youngest Child, —
Occupation, Manufacturing Jeweler.
Degree Education, Grammar School
Profession of Religion, Catholic
Habits, not stated: father intemperate
Nativity, St Paul, Minn: (parents born in Germany)
Physicians Committing, Talbot Sheve & Arthur Sweeney
Correspondents, Alfred Ahlborg
180 Sibley Street, St Paul

No. for Year, 147.
Insane Relatives, None
Cause Exciting, Sexual perversion
Cause Predisposing, Bad habits + chronic
Form, Pulsescent —
Accompanying Bodily Disorder, None mentioned
Suicidal or not, Not —
Date of this Attack, Since 12th Year
Duration, Some 19 years
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, 12 years.
Time of Leaving, May 25th 1901
Time in Hospital, 2 mos 2 Ds
Result, Recovered: Discharged Mar 25/01.

Examination on Admission by Dr. E. J. Ivanous *Date of* Mar 25/1901

MENTAL CHARACTERISTICS.

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

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,
ILLUSIONS,
SUMMARY, Normal

HISTORICAL.

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

Father, Living: well
Paternal Relatives, no insanity
Mother, Living well
Maternal Relatives, no insanity
Brothers and Sisters, 5 2 one brother dead
Children, well all well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
2 years ago: Chancre

HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Jeweler
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, fair Appetite, fair Bowels, Regular

Personal and Medical History of Frederick P. Remer

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 10in PRESENT WEIGHT, 161lbs USUAL WEIGHT, NUTRITION, Fairly
WOUNDS, Abnormalities, No. Condition of Skin, Reddish
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, Normal Response to Light, Normal Accommodation, Normal
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, Good
COORDINATION, Arms, Normal Legs, Normal Fingertouch, eyes Shut, inc certain Standing on one foot, Romberg negative
TREMORS, Hands, Slight Tongue, Slight Facial Muscles, Slight General,
PATELLAR REFLEX, Normal Other Reflexes,
ARTICULATION, Slurred, Normal Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES, Full
LUNGS,
Chest Symmetry: Sym
Percussion: good
Breath Sounds: normal
Passed 3/26/01. 8:00 A. Ex. 3/28/01. 3:00 P.

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 Color and Appearance, Reddish: clear
Albumen, None (Nitric acid test). Sugar, None (Fehling's Sol + Bismuth Tests)
Casts and Crystals,

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

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

The patient has been a masturbator + always very passionate. Thinks he is abnormal in that respect. Of late, has, on sexual occasions, exposed himself. Physically, well nourished: Good condition.

Personal and Medical History of Frederick P. Remer

1901

This patient was brought here by Deputy Sheriff Hanson, in poor physical condition, with following history of case. As to consanguinity, unknown: no insane relatives; this is 1st attack; first symptoms manifested since 12th year, by masturbation and sexual obsession. Disease seems increasing: not variable; no rational intervals: derangement now shown by an irresistible impulse to expose person to females. Patient is not disposed to injure others, nor suicidal; no destructive habits. Has been of quick temper: father intemperate: no history of severe disease or head-injury. He has not been restrained or confined. Supposed cause of the disease is sexual perversion; treatment, none. On personal Examination, it is ascertained that he has masturbated and indulged in coitus to excess at the same time for years: Explains exposure of person by overpowering impulse, without thought of consequences. Has exposed his person for years.

Mar 23 On admission, was put on B3 (G. H. N. Rpt. Complexion dark: hair dark brown; eyes brown; condition of skin good: scars on front part of head, about one inch long: scar on 1st finger of right hand: vaccination on left arm: slight scar on left knee. Is clean. Teeth: one gone, right lower; 1 left lower jaw. Behavior good: Examined by M. F. Fahey.).

/25 Received on Ward. Seems well-behaved: Converses freely and intelligently - Mar 25. Says "he has practiced masturbation: of late, he has frequently been possessed with a desire
30 to expose himself in presence of females": "Could not control himself". Mar 30. Patient
Apl 5 seems well. Is much improved physically. Apl 5 - 14 Day - record is up. -
30 Condition about as last noted. Is on medicine. Apl 30. Visited by wife.
May 1/14/25 May 1. Wt 163# P84. May 14. Transferred to A1. - May 25. Seems entirely recovered. - Sent home.

Discharged

Personal and Medical History of

Personal and Medical History of Gust Hanson

Whole No. 5785.

Residence, St Paul Minnesota
Became resident of State in 1890. Of County? 1890.

Date Admission, 23rd March 1901.

Admitted by Dr E. J. Wanous hour, 7:30 Pm

How Sent, Edmund W. Bazille, Jail. Ramsey Co.

Sex, Male Age, 29 years

Civil Condition, married

Children, Yes; one Age Youngest Child, —

Occupation, Janitor

Degree Education, Common School

Profession of Religion, Lutheran

Habits, Not good: but no history of intemperance

Nativity, Sweden: Parents also born there

Physicians Committing, C. H. Grimwold & C. Eugene Riggs

Correspondents, Wm H. Hanson
147 Kent St. St Paul

No. for Year, 148.

Insane Relatives, Yes: Aunt & Cousin insane

Cause Exciting, Hereditary

Cause Predisposing, Heredity

Form, Subacute Melancholia

Accompanying Bodily Disorder, None mentioned.

Suicidal or not, Yes & propensity active.

Date of this Attack, One year ago

Duration, one year

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, 26 Years.

Time of Leaving, June 25th 1901.

Time in Hospital, 3 mos 4 Days

Result, Recovered: Discharged Improved.

Examination on Admission by Dr. E. J. Wanous *Date of* Mar 25/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Good
Recent Events, at times, forgetful Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

REASONING POWER, Ordinary Subjects, Good
Special Subjects, "
Own Mental State,

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

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,
Cannot Control will Power.

HISTORICAL.

LENGTH INVASION, One Years

ONSET, Gradual or Sudden, Gradual

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

Father, Living

Paternal Relatives, Sister Committed Suicide

Mother, Living

Maternal Relatives, Sisters Son insane

Brothers and Sisters, Living — well

Children - 1 - 15 mos. old

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Last summer, overcome by heat in boiler-room; sick for a week also 3 years ago, in boiler room.

HABITS, Drinking and Smoking, Excess

HEADACHES, VERTIGO, OR CONVULSIONS, Periodic headache & vertigo —

OCCUPATION, Healthy or not, Janitor —

Detail Date, Duration, and Character of Previous Attack, if any,
No

Sleep, poor Appetite, good Bowels, Constipated.

Personal and Medical History of Gust. Hanson

COMMITTED TO ASYLUM.

Gust Hanson Serving a Term at the Workhouse.

Gust Hanson was brought from the workhouse today on information of insanity, and examined in the probate court by Dr. Riggs and Dr. Griswold. Hanson was committed to the workhouse on a plea of guilty of indecency. He had before that borne an excellent character. The judge committed him to the asylum at Rochester.

DO YOU BELIEVE ITS [illegible]

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 179# USUAL WEIGHT, NUTRITION, Fairly
No Condition of Skin, Normal

Tongue, Coated grayish coating

Equal Size, Normal Response to Light, Normal Accommodation, Normal

SMELL, Good

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

HEARING, good

COORDINATION, Arms, Normal Legs, Normal Grasp, Other tests steady & good

TREMORS, Hands, No Tongue, No Facial Muscles, General,

PATELLAR REFLEX, Lost Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None

ARTERIES,
Normal

LUNGS,
Chest Symmetry: Sym
Expansion: good
Breath Sounds: Normal
Passed 3/25/01. 11th Ave Ex. 3/25/01 3:00 Pm

CRANIAL MEASUREMENTS.

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

EXAMINATION URINE, Quantity, — Sp. g. 1020 Reaction, Neutral Color and Appearance, Yellow: clear

Albumen, None: (nitric acid test) — Sugar, None: (Fehling's & Bismuth Tests) —

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good —

BOWELS, Present Condition, Constipated —

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

The patient appears rational in all subjects, & converses readily about his trouble. Has been a masturbator & lately has had a desire to expose himself. Would come at him, when he would meet strange women. Cannot account for it only that it is due to excessive passion. Physically, well nourished & in a good general condition.

Is somewhat depressed because of his trouble. Emotion is one of "Sexual perversion".

Personal and Medical History of Gust Hanson

Whole No. 5785.

Residence, St Paul, Minnesota

Became resident of State in 1890. Of County? 1890.

Date Admission, 23rd March 1901.

Admitted by Dr. E. Z. Wanous hour, 7.30 pm

How Sent, Edmund W. Bazille, Jo P. Ramsey Co.

Sex, Male Age, 27 years

Civil Condition, married

Children, Yes; one Age Youngest Child, —

Occupation, Janitor

Degree Education, Common School

Profession of Religion, Lutheran

Habits, not good: but no history of intemperance

Nativity, Sweden: parents also born there

Physicians Committing, C. H. Griswold & C. Eugene Riggs

Correspondents, Mrs H. Hanson
147 Kent St. St Paul

No. for Year, 148.

Insane Relatives, Yes: aunt & cousin insane

Cause Exciting, Hereditary

Cause Predisposing, Heredity

Form, Subacute Melancholia

Accompanying Bodily Disorder, none mentioned.

Suicidal or not, Yes & propensity active.

Date of this Attack, one year ago

Duration, one year

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, 26 years.

Time of Leaving, June 24th 1901.

Time in Hospital, 3 mos 4 Days

Result, Recovered: Discharged Nov 24/01.

Examination on Admission by Dr. E. Z. Wanous *Date of* Mar 25/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Good

Recent Events, at times, forgetful Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

REASONING POWER, Ordinary Subjects, Good

Special Subjects, " "

Own Mental State,

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

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,
Cannot Control will power.

HISTORICAL.

LENGTH INVASION, One Year

ONSET, Gradual or Sudden, Gradual

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

Father, Living

Paternal Relatives, Sister Committed suicide

Mother, Living

Maternal Relatives, Sister's son insane

Brothers and Sisters, living — well

Children — 1 — 15 mo. old

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Last summer, overcome by heat in boiler-room; sick for a week also 3 years ago, in boiler room.

HABITS, Drinking and Smoking, to excess

HEADACHES, VERTIGO, OR CONVULSIONS, periodic headache & vertigo —

OCCUPATION, Healthy or not, Janitor —

Detail Date, Duration, and Character of Previous Attack, if any,
No

Sleep, poor Appetite, good Bowels, Constipated.

Personal and Medical History of Gust. Hanson

PHYSICAL CHARACTERISTICS.

WEIGHT, 5 ft 8 in PRESENT WEIGHT, 179# USUAL WEIGHT, NUTRITION, fairly

WOUNDS, Abnormalities, No Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, grayish coating

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

SIGHT, Good

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

HEARING, good

COORDINATION, Arms, normal Legs, normal Grasp, other tests steady & good

TREMORS, Hands, no Tongue, no Facial Muscles, General,

PATELLAR REFLEX, Lost Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none

ARTERIES,
normal

LUNGS,
Chest Symmetry: Sym
Expansion: good
Breath Sounds: normal
Passed 3/28/01. 11.00 am. Exd 3/28/01 3.00 pm

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, — Sp. g. 1020 Reaction, neutral Color and Appearance, yellow: clear

Albumen, none: (nitric acid test) — Sugar, none: (Fehling's Sol & Bismuth Tests) —

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good —

BOWELS, Present Condition, Constipated —

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

The patient appears rational on all subjects, & converses readily about his trouble. Has been a masturbator & lately has had a desire to expose himself. Would come on him, when he would meet strange women. Cannot account for it only that it is due to excessive passion. Physically, well nourished & in a good general condition.

Is somewhat depressed because of his trouble. Condition is one of "Sexual perversion".

Personal and Medical History of Gust. Hanson

1901

This patient was brought here by Deputy St Tweed, in poor physical condition, with following history of case. Dont know as to consanguinity, but there is history of heredity; aunt and cousin insane. This is first attack; first symptoms manifested one year ago; tendency to melancholia. Disease is increasing; not variable; no rational intervals. Derangement now shown in that he is a sexual pervert. Patient is not disposed to injure others, but has attempted suicide, by hanging and propensity now active. No destructive or filthy habits. No previous peculiarities shown. No history of intemperance; nor of any severe disease &c or head-injury. He has not been restrained or confined. Supposed cause of the disease is hereditary. No treatment. On personal Examination, it is ascertained he has been arrested for indecent exposure.

N.B. March 25/1901. Advice from J. of P. St Paul that Patient is under indictment & advise accordingly.

Mar 23 On admission, was put on B³. (G.H.N. R'pt. Complexion light; hair brown; eyes blue; condition of skin good. Slight scar over right eye; scar on left leg; vaccination scar on left arm. Is clean. Teeth: one gone, left lower; one gone, left upper; right lower. Behavior good: Ex'd by M. F. Fahey)—

" Received on Ward. Patient seems sociable & agreeable; is well-behaved; has been a masturbator; caught exposing himself on the street; was sent to workhouse, and, from there,

28/31 Committed to this hospital. Mar 28. Is neat & clean; assists on ward. Mar 31. appears sad:

Apl 5 worries over his circumstances. Apl 5. (14 Day record up): Patient is brighter, and

20 is getting along very well. Apl 20. Seems in good mental and physical condition—

23/26 Transferred to TW & circumcised— Apl 26. Patient is doing very well: given

30 Clothes & got up. Apl 30. Seems much better. Transferred to B³. May 31. Patient

May 31 Continues to make improvement. Is much brighter. Seems sociable & agreeable—

June 27 Seems normal. Sent home.

Discharged

Personal and Medical History of

Personal and Medical History of John Atz

Whole No. 5787

Residence, St Paul, Minnesota

Resident of State 30 years: of County? 8 yrs

Date Admission, 26th March 1901.

Admitted by Dr. E. Z. Wanous. hour, 7.30 P.M.

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

Sex, Male Age, 70.

Civil Condition, Widower

Children, Seven Age Youngest Child, x

Occupation, Hardware Merchant

Degree Education, Common

Profession of Religion, Reformed Lutheran

Habits, No history of intemperance

Nativity, Switzerland; parents also born there

Physicians Committing, Alex. Donald & Parks Ritchie

Correspondents, Edward Atz
437 W 7th St. St Paul

No. for Year, 150.

Insane Relatives, None

Cause Exciting, Senility & Loss of property

Cause Predisposing, - Probably age -

Form, Dementia Senile

Accompanying Bodily Disorder, Some weakness

Suicidal or not, Not —

Date of this Attack, One year ago

Duration, — one year —

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, — 69 —

Time of Leaving, May 13 — 1902

Time in Hospital, 1 yr 1 mo 17 Ds

Result, Died: Broncho-pneumonia

Examination on Admission by Dr. E. Z. Wanous *Date of* March 27/1901.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Marked failure

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,
rather depressed

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, Dead: dont know

Paternal Relatives, Dont know

Mother, Dead: dont know

Maternal Relatives, " "

Brothers and Sisters, well
Children 5 — all well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
No

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Merchant

Detail Date, Duration, and Character of Previous Attack, if any,
No

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of John Atz

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, Double inguinal hernia Condition of Skin, anaemic

TONGUE, Coatings, Promptness of Movement, Coated; sluggish

PUPILS, Equality, equal Size, normal Response to Light, fair Accommodation, Slow

SIGHT, Impaired

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

HEARING, Good

COORDINATION, Arms, normal Legs, normal Grasp, other tests unsteady (is in bed)

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

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, Hesitating, yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Regular

Strength, Sounds, Weak

Size, Normal

Apex Beat, "

Murmurs, None noted

ARTERIES, pulse very weak

LUNGS,

Chest Symmetry: Sym

Expansion, fair

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, 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).

The patient is very forgetful, and, at times, badly confused - Expresses no definite delusions - Condition due to senility -
Has marked sclerosis of arteries.

Personal and Medical History of John Atz

1901

This Patient was brought here by Deputy E. Johnson, in poor physical condition, with following history of case. There is no history of consanguinity or heredity, previous peculiarities, intemperance severe disease &c or head-injury. This is 1st attack; first symptoms manifested one year ago, loss of memory: general dementia. Disease appears increasing, but is variable & with rational intervals, but these are irregular. Derangement now shown by general incoherence. He is not disposed to injure others, nor suicidal: no filthy or destructive habits. Has not been restrained or confined. Supposed cause of the disease is senility and loss of property. Of Treatment, none. On personal Examination. Senile dementia is noted. — "

Mar 26 On admission. was put on T.W. (G.H.N. R'pt. Complexion light: hair gray: eyes gray: condition of skin fair: feet and ankles swollen: several scars & discolored spots, from old sores, below the knees: large hernia: is dirty. Teeth very poor: nearly all gone in upper, and several missing in lower jaw: the rest badly decayed. Behavior good. Ex'd by W. F. Knutson

" " Received on Ward: given bath & put to bed. Is old & feeble: (condition, senility): forgetful.

Apl 12 By spells, confused. Apl 12. given clothes. Occasionally, gets idea "he owns this Institution".

June 26 Had scrotal congestion — July 31. No special change in patient's condition to report,

July 31 at this date. Still quite feeble — Aug 1. Wt 132# — Jany 31/02. Has changed almost

1902 Jany 31 none, during period — Is irritable: rather contrary: very unsteady in walking: at times, restless. Is quite thoroughly demented. Feb. 1/02 Wt. 128#. Excitable inclined to be violent — health fairly good. Apr. 9, 02 Patient has trouble with hand. (Seems to be infected some.) Apr. 25. Hand seems better. Apr. 30/02 Complains of pain in head & lungs — Temp. 103° — Was placed on I.W. May 2/02. Temperature 100.8° — Has trouble in swallowing. May 6, 02 Visited by daughter-in-law. Seemed to be somewhat improved. May 8/02 Visited by son. Is noted to-day as failing much. May 13/02 Patient died at 9.45 P.M. He has had very slight rise of temperature, during last few days but is noted as gradually failing in strength.

Personal and Medical History of

Personal and Medical History of Rolland M. Dartt

Whole No. 5788.

Residence, Watonna, Minn.

Date Admission, 29th March 1901.

Admitted by Dr. E. J. Wanous. hour, 4oo P.m.

How Sent, W. A. Eggleston, Jeff. Steele County.

Sex, Male Age, 23

Civil Condition, single

Children, — Age Youngest Child, —

Occupation, Student

Degree Education, Common School.

Profession of Religion, not a church member.

Habits, No history of Intemperance given

Nativity, Minnesota: Father, New York: Mother's, England

Physicians Committing, J. H. Adair & W. C. Custis

Correspondents,

(Bro) H. S. Dartt Watonna, Minn 222 Pine St.

No. for Year, 151.

Insane Relatives, Mother Died here (Insane) –

Cause Exciting, Hereditary Taint

Cause Predisposing, heredity & first attack

Form, Adolescent Insanity

Accompanying Bodily Disorder, None mentioned.

Suicidal or not, Suicidal & propensity active.

Date of this Attack, about Feby 1/1901.

Duration, about 2 months –

No. of Attack, 2nd (one, in April 1900).

No. of Admission, 1st –

Age First Attack, — 22 years.

Time of Leaving, January 9-1902

Time in Hospital, 9 mos - 11 ds

Result, Unimproved: Dischd. Nov 22-1902 By Bofo

Examination on Admission by Dr. E. J. Wanous *Date of* March 30/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, Impaired

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State, Hardly appreciates Condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Rather Exalted

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, Living – well

Paternal Relatives, No history of insanity

Mother, Died in R. S. Hospital

Maternal Relatives, Father insane

Brothers and Sisters, 2 well 1

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

HABITS, Drinking and Smoking, Excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, nurseryman

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

No

Sleep: quite well Appetite, good Bowels, Irregular

Personal and Medical History of Rolland M. Dartt

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 11in PRESENT WEIGHT, 163 lbs USUAL WEIGHT, NUTRITION, Fairly nourished

WOUNDS, Abnormalities, Umbilical hernia. Condition of Skin, Reddish: Normal

TONGUE, Coatings, Promptness of Movement, Coated – large

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

SIGHT, Good

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

HEARING, Good

COORDINATION, Arms, Normal Legs, Normal Grasp, Other tests good.

TREMORS, Hands, No Tongue, Facial Muscles, General,

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irritable

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, None

ARTERIES, Full

LUNGS,

Chest Symmetry: Yes

Expansion: Good

Breath Sounds: Normal

Pupils Eq. Rm. Sp. Hf. Lt 3o Spm

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 Color and Appearance, Reddish: Cloudy

Albumen, No (Nitric acid Test) Sugar, No (Fehling's Sol.) Some sugar (Bismuth)

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good.

BOWELS, Present Condition, Constipated

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

The patient seems rather confused & generally sluggish. Believes that the Lord has worked against him". Expresses no definite delusions. Ideas are of a "grandiose" type. Case is one of adolescent Insanity, following a bad heredity – Physical condition good: Heart is very irritable.

Personal and Medical History of Rolland M. Dartt

1901

This patient was brought here by Deputy Chas. Brazier, attended by H. T. Dartt, in fair physical condition, with following history of case. There is no history of consanguinity, but patient's mother was confined in asylum (here) before death. This is not 1st attack: occurred in april 1900; the duration, one week: has never been in hospital. First symptoms of this attack manifested about Feb/1, became disturbed + despondent on religious matters, and lost sleep, for some time. Disease appears decreasing; variable with rational intervals, but these are not regular. Derangement now shown in that he has delusions of grandeur, with reference to a variety of subjects. He is not disposed to injure others, but has attempted suicide; cut his throat; propensity is now active. No filthy or destructive habits. Previous peculiarities, only as stated. No history of intemperance; no history of any severe disease &c or head-injury. Has not been restrained or confined, except that he has been kept at home and watched by an attendant. Supposed cause of the disease is hereditary taint. By way of treatment, nothing, except moderate use of hypnotics. On personal examination, nothing mentioned as having been brought out. ———

Mar 29 On admission, was put on B3 (G.H.N. Rpt. Complexion light: hair, light brown; eyes gray; condition of skin good. Scars on throat: vaccination on left arm; is clean: Teeth good. Behavior " " good: Examined by M. F. Fahey). Received on B3: given bath: "Thinks that this will be his
31 last night": seems somewhat disturbed: Mar 31 Seems more melancholy. Is restless, by spells
Apl 1 to 7 visited by brother. Apl 7 very much confused + pugnacious: has to be restrained. Apl 9/10. Was
9/10/11 pugnacious. Apl 11. Vomited. Transferred to IW: put to bed. Seems very much disturbed.
19/20 Put on sedative treatment. Apl 19 Is up + dressed: Seems much improved. Apl 20 Transferred to B3. Again became excited + very much disturbed. Apl 29. Again to IW.
May 3/7 Seems much better Wt 145# — May 7. Pugnacious by night: trouble with nurse-
23 Attacked night nurse. June 4. To B3. July 10. Visited by relatives. Still somewhat
July 30/31 melancholy + depressed. July 31 Seems more quiet and is better behaved. Still depressed
Aug 1 Wt 148#. Sept 1 Wt 143#. Patient has not eaten well, during past month: Is
Sept 1/2 rather stubborn. Sept 25. Fed with tube. Has been rather more stubborn than
25 usual in refusing nourishment. Sept 25 Visited by brother. Oct 1. Wt 142#.
Nov 2 Visited by brother. Is very stubborn, inactive + dirty: has to be pushed to his
29 meals. Nov 29. To B1: (has been quite filthy): has also been fed by tube,
Dec 31 several times. Dec 31. Has been, most of time, quite stupid: has brightened
1902 up a trifle, of late. Jany 9/02. Taken home by brother + friend, to day.
Jany 9 (was put down as sleeping none, the night before + as rather restless + irritable)

Personal and Medical History of

Personal and Medical History of R. D. Phelps.

Whole No. 5790.

Residence, Zumbrota, Minn

Became resident of Minnesota 1861: of County Goodhue 1864.

Date Admission, 2nd April 1901.

Admitted by D. C. L. Chapple hour, 1:45 P.M.

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

Sex, Male Age, 72.

Civil Condition, married

Children, Seven Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession of Religion, Not a church member.

Habits, No history of intemperance, as far as known

Nativity, New York State; father's, Connecticut: mother's, Ontario

Physicians Committing, J. E. Crowe & O. P. Hall

Correspondents, Mrs R. D. Phelps (wife)

— (in city) — Zumbrota, Minn

No. for Year, 153.

Insane Relatives, None

Cause Exciting, Apoplexy

Cause Predisposing, Probably age

Form, Post Apoplastic Dementia

Accompanying Bodily Disorder, (Rupture & Emaciated)

Suicidal or not, Not; but will injure others.

Date of this Attack, about March 10/1900.

Duration, 1 year, 3 weeks.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 71 years.

Time of Leaving, May 31 – 1901

Time in Hospital, 1 mo 9 ds

Result, Recovered: Discharged Nov 22/01

Examination on Admission by Dr. E. J. Warnes *Date of* April 3/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events, much impaired

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects, " "

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather indifferent

DELUSIONS, Systematized, of Persecution Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Had a hemiplegia, following injury –

Father, Dead: don't know

Paternal Relatives, No Insanity

Mother, Dead: don't know

Maternal Relatives, No Insanity

Brothers and Sisters, 3 two: dead of paralysis.

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

Injured head, by falling: "La Grippe" two years ago: apoplexy.

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Farmer

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

No previous

Sleep, good Appetite, good Bowels, Constp.

Personal and Medical History of R. D. Phelps

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, right inguinal hernia: right-sided hemiplegia Condition of Skin, Quite sluggish

TONGUE, Coatings, Promptness of Movement, Coated: hesitatingly.

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

SIGHT, Impaired

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

HEARING, Good

COORDINATION, Arms, Impaired Legs, Impaired { Ill has paralytic trouble: unable to move ~~Grasp~~, about alone; unstable.

TREMORS, Hands, Coarse Tongue, Do Facial Muscles, General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Yes Hesitating, Yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irregular

Strength, Sounds, Distinct

Size, Normal

Apex Beat, "

Murmurs, None noted

ARTERIES, Sclerosis

LUNGS, Chest symmetry: Gym

Expansion: Fair

Breath Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character,

BOWELS, Present Condition,

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

Patient fell out of sleigh, striking on head: complained of headache: a week later, had an apoplectic attack: couldn't speak, for a few hours: then paralysis set in, lasting about 2 weeks, following which, he became much confused and forgetful. Case is one of Post Apoplectic Dementia.

Personal and Medical History of R. D. Phelps

1901

This patient was brought here by Deputy John L. McWaters, attended by J. M. Hoffman, in poor physical condition, and with following history of case. There is no history of consanguinity or heredity, previous peculiarities, nor of intemperance, as far as known. This is 1st attack; first symptoms manifested about March 10/1900, by delusions. Disease seems increasing, but there are rational intervals, though these are not regular. Derangement now shown by "delusions of persecution". Patient is disposed to injure others, but is not suicidal. Is of filthy and destructive habits. One week before attack, he struck head by fall. He has been restrained and confined: has been held and tied, about 10 days. Supposed cause of the disease is apoplexy. Has been treated by sedatives, hypnotics, confinement &c. On personal examination, he is tremulous, incoherent, intractable.

Apl 2 On admission, was put on T.W. (G. H. N. R'pt. Complexion fair: hair gray: eyes light brown; condition of skin good: abrasion on left hand: large "tattoo" mark on left fore-arm ("R. D. P. 1829") - bruises & abrasions on left skin: rupture on right side: Is clean. Teeth in poor condition: 2 old stubs in upper jaw; 4 old stubs, lower jaw. Behavior very restless: & he is emaciated. Exd by W. F. Knutson)

" " Received on Ward: Given bath & put to bed: has abrasion on back of left hand: slight abrasion on right leg.

16 Seems confused, restless & emaciated: Apl 16. Mental condition seems improved. Seems

21/22 Quite rational (14-Day record up). Apl 21. Visited by wife. Apl 22. Remained up, all day.

29 Transferred to A. — May 1. Given parole. May 10. Has improved much. Rational.

May 11 Taken home by wife. —

Discharged

Personal and Medical History of

Personal and Medical History of John T. Davis

Whole No. 5791.

Residence, St Paul, Minn.

Became Resident of State 40 years: of County 15 years

Date Admission, 2nd April 1901.

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

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

Sex, Male Age, 63

Civil Condition, widower

Children, 3 Age Youngest Child, — all dead

Occupation, clerk

Degree Education, Common school

Profession of Religion, Episcopal

Habits, no history of intemperance

Nativity, Ireland: Parents also born in Ireland.

Physicians Committing, C. Eugene Riggs & Arthur B. Ancker

Correspondents, Wm Burake, 145 - E. 3rd St.

(niece) Wm J. D. Hoyt 240 E. Fillmore ave St Paul

(These 2 addresses on papers from C & C Hospital)

No. for Year, 1574.

Insane Relatives, none

Cause Exciting, Senility

Cause Predisposing, previous attack

Form, ~~Chronic~~ Melancholia

Accompanying Bodily Disorder, Flat-foot (for 1st Commit)

Suicidal or not, Suicidal propensity active

Date of this Attack, 5 months ago

Duration, — 5 months —

No. of Attack, 2nd (one, Dec 20/95)

No. of Admission, 2nd

Age First Attack, — 2 —

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. J. Manous *Date of* April 3/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear

MEMORY, Past Events, Fair

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, Fair

Special Subjects, " "

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather Depressed

DELUSIONS, Systematized, Transitory. None present now —

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

— Rheumatism —

Father, Dead: accident

Paternal Relatives, no history of Insanity

Mother, Dead: old age

Maternal Relatives, no history of Insanity

Brothers and Sisters, Sister dead - paralysis

Children — 3 Dead — (especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, anything obtainable

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

20 Dec 1895 to June 12 - 1899.

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of John T. Davis

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, No Condition of Skin, Quite Clear

TONGUE, Coatings, Promptness of Movement, Clear

PUPILS, Equality, Equal Size, Small Response to Light, Slow Accommodation, Slow

SIGHT, Impaired

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

HEARING, Impaired

COORDINATION, Arms, Normal Legs, Normal Grasp, Rather unsteady by other tests

TREMORS, Hands, Slight Tongue, No. Facial Muscles, General,

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Slightly Sclerotic

LUNGS,

Chest Symmetry: Good

Expansion, Good

Breath Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Poor

BOWELS, Present Condition, Constipated

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

When in City Hospital, in St Paul, treating for rheumatism, became very much discouraged and despondent. Told them if he had a chance, he would commit suicide; because he could not see anyway to get along in the future.

Case is one of melancholia.

Physically well nourished & in good condition. Chronic constipation.

Personal and Medical History of John T. Davis

1901

This patient was brought here by Deputy Emanuel Johnson, in poor physical condition, with the following history of case. There is no history of consanguinity or heredity. This is not 1st attack: is the 2nd one occurred in 20th Dec 1895; Duration until June 12th 1899, when he was at this (Rochester) Hospital and was improved, at time of discharge. First symptoms of this attack manifested 5 months ago, by general depression. Disease appears increasing, not variable: no rational intervals. Derangement now manifested by recurrent senile melancholia. Patient is not disposed to injure others: has not attempted suicide, but propensity is now active: no filthy or destructive habits. As to any previous peculiarities, unknown. No history of intemperance, nor of any severe, disease &c or head injury. He has been confined at the City & County Hospital, since Nov. 7th 1900. Supposed cause of the disease is senility. Has been treated by way of rest, nourishment & constructives – On personal examination nothing further was brought out (N.B. Social history sheet accompanied patient from C & C Hospital. This is filed with Commitment Papers). N.B. Patient was here before from Dec 21/95 to June 12/99: was discharged June 12/99, under "Peterson Law", improved. See Vol 31 p 365 No 4276) –

Apl 2 On admission, was put on I.W. (G.H.N. R'pt. Complexion dark: hair gray: eyes blue; condition of skin good. vaccination on left arm. Is fairly clean. Teeth. upper set false; lower jaw poor condition, only a few front, and they are decayed.) – Behavior is good. Was examined by W. F. Kentson. –

" 7/4/15 Received on Ward: put to bed, and on treatment. Apl 4. Is up & dressed. – Apl 15. Mental and physical condition seem quite good: (Is somewhat of a malingerer): 14 Day recordings –

29 Transferred to A1: Constantly complains about appetite: says "he cannot live long" –

May 14 Eats well: May 14. To A2: has parole. June 13. Had trouble with patient James N. Hay.

July 1 Wt 150# P 62. July 31. Patient still given to complaining, in various ways. Still on medicine.

Aug 1 Wt 150#. Jany 31/02. Patient maintains a steadily hypochondriacal condition: has

1902 Jany 31 numerous complaints, always very vague in character & with no physical failure to correspond with complaint. (Wt 147#) – Talks slightly of suicide –

Feb. 1/02 Wt. 144#. Patient is very hypochondriacal. Complains of his feet; of losing strength & of various pains &c.

Jan. 31/03 Patient has talked the same during the whole year. Wt. 145#.

Personal and Medical History of

Personal and Medical History of Jacob House

Whole No. 5792.
Residence, Caledonia, Minn.

No. for Year, 155.
Insane Relatives, Dont know
Cause Exciting, Dont know
Cause Predisposing, "chronic"
Form, Epileptic Delusional (?)
Accompanying Bodily Disorder, Convulsions (epileptiform)-
Suicidal or not, - Not - but will injure others
Date of this Attack, 7 or 8 years ago.
Duration, - 7 or 8 years -
No. of Attack, 2nd (Have probably 1st Continuous)
No. of Admission, 1st
Age First Attack, about 30
Time of Leaving,
Time in Hospital,
Result,

Date Admission, 4th April 1901.
Admitted by Dr. E. E. Wanous hour, 4:15 P.M.
How Sent, L. Bredahl, Jof P. Houston County
Sex, Male Age, 38
Civil Condition, married
Children, - 5 - Age Youngest Child, —
Occupation, Laborer
Degree Education, Limited; reads & writes -
Profession of Religion, Catholic
Habits, Patient never drank to excess -
Nativity, Germany: Parents also born in Germany
Physicians Committing, Dr. C. Rhines & W. E. Browning
Correspondents, (Information of Leonard Hill, Caledonia, Minn)
Mrs. Jacob House, Caledonia, Minn (wife) (in town) — Telephone in town.

Examination on Admission by Dr. E. E. Wanous *Date of* 5th April 1901.

MENTAL CHARACTERISTICS.

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

REASONING POWER, Ordinary Subjects, Poor
Special Subjects, " "
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed

DELUSIONS, Systematized, of wealth Transitory, persecution
Special Subjects,

HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

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

Father, Living in Germany
Paternal Relatives, Dont Know
Mother, Living in Germany
Maternal Relatives, Dont Know
Brothers and Sisters, Dont know
Children 5 - Dont know (especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
Sunstroke

HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, Convulsions
OCCUPATION, Healthy or not, Farmer
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Poor Appetite, Poor Bowels, irregular and constipated

Personal and Medical History of Jacob House

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9in PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, Poor
WOUNDS, Abnormalities, Needs circumcision Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, Coated: large
PUPILS, Equality, Equal Size, Normal Response to Light, Normal Accommodation, Normal
SIGHT, Fair
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, Arms, Normal Legs, Normal Grasp, Rhythm, Steady
TREMORS, Hands, Tongue, Facial Muscles, General,
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, Yes Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES,
Normal
LUNGS,
Chest Symmetry: Sym
Expansion: Good
Breath Sounds: Normal

CRANIAL MEASUREMENTS.

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

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

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

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

The patient seems very much confused, & has "Spells" when he strikes and kicks at anything he comes in contact with. He subject to "Epileptoid Spells", which is cause of present demented Condition. Physical Condition Poor.

Personal and Medical History of Jacob House

1901

This patient was brought here by Deputy F. H. Evans, attended by C. K. Blexrud, in poor physical condition & with following history of case. As to any history of consanguinity or heredity, dont know. This is not 1st attack; one occurred 4 years ago; duration constant: worse, at times. First symptoms of this attack manifested 7 or 8 years ago; was wild & exciting especially over money. Disease seems increasing: not rational: derangement now shown over money - thinks his people in Germany are wealthy. Is disposed to injure others, but not suicidal. No filthy or destructive habits. No previous peculiarities that we can learn of. Patient never drank to excess. There is history of sunstroke, followed by convulsions of Epileptic form. Has been restrained or confined: was arrested when in state of excitement. Dont know cause of the disease. No treatment: On personal examination, was muttering to himself; drowsy-looking: slow cerebration. Commitment of said Jacob House recommended under Section 17. Nos. 2 & 5. —

Apl 4 On admission, was put on B3. (G. H. N. R'pt. Complexion dark: hair dark-brown: Eyes blue: condition of skin good: birth-mark on back, and birth-mark slightly to side of right arm: scars on right upper arm 1½ in. long: scar on right knee & scar on left foot: is rather dirty - Teeth in fair condition, except one, on right upper, decayed. Behavior stubborn - Examined by M. F. Fahey) —

" 6 Received on B3 - Given bath. Is quarrelsome & very much confused. Apl 6. Still confused.

15/17/19 Transferred to T. W. - Apl 15. Attacked night-nurse - Apl 17. Convulsion at 1.20 am. Apl 19. (14 day record up). Apl 20. Up & dressed; is more quiet: behaves better. Transferred to B3 Apl 30 - Is

20/30 talkative and troublesome: has "spells", when he becomes very much excited & runs about ward.

May 10/17 Has had one or two convulsions for several days - May 17. Attempted to strike nurse, with

June 6 chair - June 6. Attempted to elope: July 31. Has had almost daily convulsions: still

July 31 subject to spells of excitement and confusion, at times. Aug 1. Wt 176#. Sept 1. Patient

Sep 1 rather restless: has had 6 convulsions noted during the month. Is quite

1902 Jany 31 irritable - Jany 31/02. Has a convulsion, every few days, and is still rather irritable and, at times, badly confused.

Feb. 1 Wt. 176#. Feb. 20 Visited by friend.

Mar. 30. Transferred to B. Has been quite confused; maniacal; at times destructive and violent; continually looking for chance to escape.

Apr. 13 Escaped from crowd; but was caught a short distance away. Aug. 1 Wt. 164#. No improvement, except slightly more quiet: works little on ward; still tries to elope; has convulsions nearly every day.

1903 Jan. 31 Continues to have frequent fits, both day and night; restless & confused; very incoherent; more demented; does nothing.

Personal and Medical History of

Personal and Medical History of George C. Weismann or E. Weisman

Whole No. 5797

Residence, Cannon Falls, Minn.

Became resident of State of Minn: 1882: Resident of County Goodhue 1882

Date Admission, 16th April 1901.

Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.

How Sent, Axel Haller, Jo P. Goodhue County

Sex, Male Age, 42.

Civil Condition, married

Children, - 5 - Age Youngest Child,

Occupation, Restaurant-Keeper

Degree Education, Common School

Profession of Religion, not a church member

Habits, Is addicted to intemperance

Nativity, Schleiswick-Holstein (Germany): Mother's Germany, Father's Denmark

Physicians Committing, J. V. Anderson and Geo. C. Wellner

Correspondents, Mrs George C. Weismann (wife) in town. — Cannon Falls Minn

No. for Year, 160

Insane Relatives, none, so far as known

Cause Exciting, Alcohol & Epilepsy

Cause Predisposing, " " probably

Form, Acute mania

Accompanying Bodily Disorder, Epilepsy.

Suicidal or not, not

Date of this Attack, March 28th 1901.

Duration, about 3 weeks

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, - about 42 -

Time of Leaving, 22nd July 1901.

Time in Hospital, 3 mos. 6 ds

Result, Recovered: Discharged Nov 24/01

Examination on Admission by Dr. E. Z. Wanous *Date of* Apl 17/1901.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State, Not appreciated

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, of persecution Transitory,

Special Subjects,

HALLUCINATIONS, of hearing

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, Dead: Phthisis pul.

Paternal Relatives, no insanity -

Mother, Living: well

Maternal Relatives, no insanity

Brothers and Sisters, 1 6 well

Children 5 - well

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

Epilepsy, 4 years ago: Sun stroke 10 years ago

HABITS, Drinking and Smoking, To excess

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Saloon keeper

Detail Date, Duration, and Character of Previous Attack, if any, no

Sleep, poor Appetite, poor Bowels, poor

Personal and Medical History of George C. Weismann or E. Weisman

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5 in PRESENT WEIGHT, 146# USUAL WEIGHT, NUTRITION, poor

WOUNDS, Abnormalities, none Condition of Skin, sluggish: oily

TONGUE, Coatings, Promptness of Movement, Coated: sluggish

PUPILS, Equality, R. slightly enlarged Size, Response to Light, sluggish Accommodation, slow

SIGHT, Impaired.

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

HEARING, good

COORDINATION, Arms, Finger to nose, eyes shut, very uncertain Legs, standing on one foot, considerable uncertainty Grasp, standing, eyes shut, very unsteady almost falls over

TREMORS, Hands, Coarse Tongue, some Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, yes Hesitating, yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irritable

Strength, Sounds, normal

Size, enlarged

Apex Beat, Down & to left

Murmurs, none noted

ARTERIES, flabby

LUNGS,

Chest symmetry: sym

Expansion: fair

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, 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).

The patient seems confused; incoherent; and shows marked loss of memory. Is troubled with Epilepsy, which is probable cause of condition.

Personal and Medical History of George C. Weismann or E. Weisman

1901

This patient was brought here by P. J. Lundquist, attended by Andrew Tjerstad in poor physical condition, with following history of case. There is no history of Consanguinity, nor any of heredity, as far as known. This is first attack; first symptoms manifested March 28th 1901; morbid fears, hallucinations; locked himself in a room. Disease seems stationary; not variable; no rational intervals. Derangement now shown in that he is afraid of people. Patient is not disposed to injure others, nor suicidal; no filthy or destructive habits. No previous peculiarities Except that he was somewhat quick-tempered. Is addicted to intemperance; subject to Epilepsy: Normal restraint by friends, more or less, for last three weeks. Supposed cause of the disease is Alcohol and Epilepsy: has been treated by family physician. On personal examination there are noticed tremor, confusion of ideas, loss of memory, rapid, weak pulse. Believes he

Apl 16 is persecuted. On admission, was put on B3 (G.H.N. Dpt. Complexion dark: hair, dark-brown: eyes blue; condition of skin good: small scar on 3rd finger of right hand; small scar on back of neck; 2 small scars on left knee: is clean. Teeth. 2 out, right upper; 5 out, left upper jaw. –

" " Is inclined to be ugly: Examined by M. F. Fahey). — Received on Ward B3: given bath:

" 18/19 has delusions regarding his wife and family: Apl 18. Destroyed clothing. Apl 19. Attacked

21 nurse, while having temperature taken. Apl 21. More quiet and mentally improved –

24/29 Works on ward – Apl 29. (14-Day record up). – May 1. Wt 146# Pgr. Worries about his

May 14 family. May 14. Transferred to A1. July 22. Much improved, physically: mentally

July 22 seems recovered. Sent Home, today

Discharged

Personal and Medical History of

Personal and Medical History of Henry Sawyer
Sauer?

Whole No. 5798
Residence, Has none

Date Admission, 18th April 1901.
Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.
How Sent, Thos. P. Moran, Jof P. Dakota County
Sex, Male Age, 39 years
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Claims to be a Jeweler
Degree Education, Common School
Profession of Religion, Not a church member
Habits, Dont know as to intemperance
Nativity, Bavaria: Parents born in Prussia
Physicians Committing, J.C. Fitch & Asst. Asst
Correspondents, address of both } George Sauer, % Dietz & Sauer, El Paso, Texas

No. for Year, 161
Insane Relatives, Do not Know
Cause Exciting, Do not know
Cause Predisposing, previous attack possibly-
Form, Chronic Mania
Accompanying Bodily Disorder, None known of.
Suicidal or not, Not; but has attacked others-
Date of this Attack, - not known -
Duration, - not known -
No. of Attack, 2nd (Probably)
No. of Admission, 1st here (Was at Tyler Texas) 1891-1892
Age First Attack, about 39 -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* Apl 19/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Rather Confused
MEMORY, Past Events, Fair
Recent Events, Good Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, Poor
Special Subjects, " "
Own Mental State, Does not appreciate Condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed

DELUSIONS, Systematized, Yes Transitory,
Special Subjects, Thinks people boycott him

HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY,

HISTORICAL.

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

Father, Dead; Cause not known
Paternal Relatives, No Insanity
Mother, Living (?)
Maternal Relatives, No Insanity
Brothers and Sisters, /

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

HABITS, Drinking and Smoking, To excess
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Jeweler
Detail Date, Duration, and Character of Previous Attack, if any,
7 years in Insane Asylum in Texas - 1890
Sleep, Poor Appetite, Good Bowels, —

Personal and Medical History of Henry Sawyer

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION,
WOUNDS, Abnormalities, Right leg amputated: hurt by train - Condition of Skin, reddish: clear
TONGUE, Coatings, Promptness of Movement, Clear: moist.
PUPILS, Equality, Equal Size, Normal Response to Light, Normal Accommodation, Normal
SIGHT,
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, 0
HEARING, Good
COORDINATION, Arms, Normal Legs, Normal Grasp,
TREMORS, Hands, No Tongue, Facial Muscles, General,
PATELLAR REFLEX, Normal Other Reflexes,
ARTICULATION, Slurred, Normal Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES, 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,

LUNGS,
Chest Symmetry: Sym
Excursion: Fair
Breath Sounds: Normal

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

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

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

The patient has been trying to get to Montana & has worked his way, by repairing Jewelry & watches. Says "people have conspired to stop his business: that he is boycotted in every town." Lost his limb in a railroad accident; brought suit to recover damages & lost case. This always has annoyed him, also, causing him to worry. —

Personal and Medical History of Henry Sawyer

1901

Patient was brought here by N. J. Steffen, attended by Peter Smith, in poor physical condition, and with following history of case. As to place of residence, has none: there is no history of consanguinity: as to any heredity, do not know: this is not 1st attack: seemingly the second: as he states he was in Hospital in 1891 and 1892; duration 2 years; at Tyler's Texas.— Result of treatment unknown to us. Do not know when 1st symptoms of this attack were manifested: he came here about a month since; attempted to start in business; claims he was "boycotted", and prevented from doing business. Disease seems increasing; variable; no regular intervals. Derangement now shown on business questions, principally: claims three persons prevented him from doing business; "wont let him get work": "Saying he is not an American Citizen &c"— Is disposed to injure others: he attacked a man in the County Jail, at Hastings: not suicidal: as to filthy or destructive habits, dont know. Do not know as to any previous peculiarities, intemperance &c, severe disease &c or head-injury. For the last two weeks, has been in Jail, for care: he gave himself up: "said he was unable to pay his board". Do not know cause of the disease: no treatment. On Personal Examination, we find none—

Apl 18 On admission, was put on T.W. (G. H. N. R'pt. Complexion dark: hair black: eyes blue: condition of skin good: right leg off, above the knee: scars on right elbow: is dirty: Teeth: 3 gone, lower right; 1 gone, lower left; 1, upper right: 1, lower left Jaw. Behavior good: Ex'd by E. E. Moore & Waskey)—

" " Received on Ward: has only one leg: mental condition fair: has "persecutory ideas".—

May 1 Shows no special change— Wt 154#: appears in good health: quiet & well-behaved:

11 Complains of constipation: talks sensibly: "thinks that he has been boycotted". May 11. To B2.

June 1 Wt 160#— Eats & sleeps well & is in excellent physical health, apparently: inclined to grumble

July 1 and be abusive.— July 1. Had trouble with Wm Swartwood and received blow on nose.—

31 No apparent change. Manner surly & complaining. "Wants to be sent to Germany". Says "The Government has no right to keep him here as he is not a subject of the U.S."—

Augt 1 1902 Wt 161#: Nov 1. Wt 161#— Jany 31/02. No change: health has been very good: sits

Jany 31 about on ward, doing nothing. "Constantly talking about being held here illegally"— "Wishes to go to Germany". Says "he is being boycotted everywhere"—

Feb. 1 Wt. 162#. Aug. 1 Wt. 159#. Aug. 18. Had difficulty with James Coughlin; was struck on head with his own crutch, causing scalp wound, which was stitched. Oct. 21. Trans. to C'; has been pugnacious and destructive to furniture.

1903 Jan. 31. No important change; delusions of persecutions; very irrational; sits about in ugly moods; abusive to every body: physical health very good.

Personal and Medical History of

Personal and Medical History of Dan. M. Rolfe.

Whole No. 5801.
Residence, Owatonna, Minn:—

Date Admission, 26th April 1901.
Admitted by D. E. J. Wanous — hour, 8.00 PM
How Sent, W. A. Eggleston, Jof P. Steele County
Sex, Male Age, 52.
Civil Condition, Married
Children, six Age Youngest Child, —
Occupation, Moulder
Degree Education, Common School
Profession of Religion, Methodist
Habits, not intemperate
Nativity, Michigan: Father's, Ohio: Mother's, Vermont
Physicians Committing, W. E. Eustis and A. B. Stewart
Correspondents, J. J. Ames, Milaca, Minn
(bro) P. J. Rolf, Owatonna, Minn

No. for Year, 164.
Insane Relatives, None
Cause Exciting, worry over financial matters.
Cause Predisposing, not Stated
Form, Acute Melancholia
Accompanying Bodily Disorder, None mentioned
Suicidal or not, Has threatened: propensity now active
Date of this Attack, Two months ago
Duration, Two months.
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, 52.
Time of Leaving, July 8 - 1901
Time in Hospital, 2 mos 12 ds —
Result, Improved
Discharged by Board of Control
July 5 - 1902

Examination on Admission by Dr. E. J. Wanous *Date of* April 27/901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Sluggish
MEMORY, Past Events, good
Recent Events, " " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull
REASONING POWER, Ordinary Subjects, Good
Special Subjects, " "
Own Mental State, appreciates Condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Depressed

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

HISTORICAL.

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

Father, Dead: Cause not Known
Paternal Relatives, No history of Insanity
Mother, Dead: Paralysis
Maternal Relatives, No history of Insanity
Brothers and Sisters, Condition not Known
Children 6 — Well —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

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

Sleep, Appetite, Bowels,

Personal and Medical History of Dan. M. Rolfe.

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION,
WOUNDS, Abnormalities, Tubercular Knee-Joint, treated by Drs Mayo. Condition of Skin, waxy & sluggish
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, normal Response to Light, slow Accommodation, slow
SIGHT,
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING,
COORDINATION, Arms, Normal Legs, normal Grasp, by other tests, normal.
TREMORS, Hands, Yes Tongue, Facial Muscles, General,
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow, Yes
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES,
Normal
LUNGS,
Chest Symmetry: Sym
Expansion: Fair
Breath Sounds: Normal

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

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

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

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

The patient seems depressed & worried: is afraid he cannot pay his bills; and has become so worked up over it, he attempted suicide; propensity still active. No active delusions manifested. Physically, is emaciated & anaemic: and generally sluggish.

Personal and Medical History of Dan. M. Rolfe.

1901

This patient was brought here by S. J. Ames, in fair physical condition and with following history of case. There is no history of consanguinity, nor heredity. Previous peculiarities, intemperance, severe disease or head-injury. This is 1st attack: first symptoms manifested in that he has been depressed for two months, with suicidal tendencies the last few days. Disease appears to be increasing, but there are rational intervals. Derangement now shown in that he has been unnecessarily depressed over financial matters for two months: has threatened suicide. Is not dangerous to give others, but has threatened suicide: has purchased laudanum: and propensity is now active. No filthy or destructive habits. He has not been restrained or confined. Supposed cause of the disease is worry over financial matters. No treatment. On personal examination, nothing further was mentioned.

Apl 26 On admission, was put on T.W. (G.F.N. Rlf. Complexion fair: hair gray: eyes gray: Condition of skin good: right knee deformed: Scar on right leg and scar on left leg: and scar under right knee. Is clear. Teeth: 3 missing in upper jaw: 4 missing in lower jaw.-
" " Examined by W. F. Knutson) Recieved Onward: given bath & put to bed. Is suicidal: very
May 5 melancholy & restless: T & P. normal. May 5. Very restless through the night. May 6. Complains
9 of pain in left side of abdomen: (due to constipation). May 9. (14-day record up)-Shows some
14 mental improvement: neat & clean in habits. May 14. Transferred to B3. Given to visitors
July 8 by friends. July 8. Visited by wife & taken home.

Discharged

Personal and Medical History of

Personal and Medical History of Fletcher Bird Sheldon

Whole No. 5802.

Residence, Mazeppa. Wabasha Co.

Became resident of State of Minn: 30 years ago: of Co. 30 yrs ago.

Date Admission, 27th April 1901.

Admitted by Dr. Arthur P. Kilbourne hour, 11.30 am

How Sent, Malcolm Kennedy, Jof P. Wabasha Co

Sex, Male Age, 30.

Civil Condition, single

Children, — Age Youngest Child, —

Occupation, School-Teacher

Degree Education, Common School

Profession of Religion, not a church member.

Habits, not intemperate —

Nativity, Wabasha Co. Minnesota: father's NY State: mother's Ills

Physicians Committing, Town of Mazeppa: M. H. Cremer & L. E. Claydon

Correspondents, Fletcher. A. Sheldon (Father) Mazeppa.

use only {(Brother), Arlie. G. Sheldon, Mazeppa, Minn

No. for Year, 165.

Insane Relatives, 1st Cousin on father's side Insane and adelbert Sheldon here

Cause Exciting, (Heredity) Dont know

Cause Predisposing, Heredity.

Form, Acute Mania

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not —

Date of this Attack, Yesterday (possibly longer)

Duration, Short probably.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 30

Time of Leaving, July 17 – 1901

Time in Hospital, 2 mos 20 DS

Result, Improved: —

Discharged by Bof C. – Feby 5/1902

Examination on Admission by Dr. E. Z. Wanous *Date of* 29th Apl 1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events, much impaired

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert

REASONING POWER, Ordinary Subjects, Will not reason

Special Subjects,

Own Mental State, Does not appreciate Condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Rather Exalted

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS, "of hearing"

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, Gradual

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

neurasthenia in the family –

Father, Living – well

Paternal Relatives, 1st Cousin Insane

Mother, Living – well

Maternal Relatives, No history of Insanity

Brothers and Sisters, 3 3 1 sister nervous

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

HABITS, Drinking and Smoking, Not

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Schoolteacher & farming

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

Sleep, poor Appetite, — Bowels, —

Personal and Medical History of Fletcher Bird Sheldon

June 22/1901

M Fletcher Bird Sheldon

Copy of Order for Hearing Petition of Fletcher A. Sheldon of The town of Mazeppa, Co. of Wabasha, Minn for appointment of Fletcher A. Sheldon as guardian for Fletcher Bird Sheldon insane; served ~~and~~ by mail (as below) June 28/1901. – Petition to be heard at office of Jof P. Wabasha Minn 16 July 1901. 10 am

~~service admitted~~

(Papers filed with commitment papers.)

No copy – original signed by D.K. & mailed to Malcolm Kennedy Jof P Wabasha Minn

RACTERISTICS.

USUAL WEIGHT, NUTRITION, well nourished

Condition of Skin, Sluggish

nse to Light, Slow Accommodation, Slow

normal ~~Grasp~~, by other tests, very unsteady.

TREMORS, Hands, Coarse Tongue, do Facial Muscles, do General,

PATELLAR REFLEX, — Other Reflexes,

ARTICULATION, Slurred, — Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, irritable

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES, flabby

LUNGS,

Chest Symmetry: Sym

Expansion: Good

Breath Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, regular

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

The patient seems confused; rather exalted & attention fixed: frequently goes to window & listens, as though attracted by sounds. Will not answer questions; generally evades answer, by asking another question. Brother says he has been peculiar for some time; – when playing cards or doing other things would be found mind fixed and forget to play, until asked. Has also worried about some woman who refused his attentions. At this time, about a year ago, he was "queer".

Personal and Medical History of F

Whole No. 5802.

Residence, Mazeppa. Wabasha Co.

Became resident of State of Minn: 30 years ago: of Co. 3

Date Admission, 27th April 1901.

Admitted by Dr. Arthur P. Kilbourne hour, 11.30 am

How Sent, Malcolm Kennedy, Jof P. Wabasha Co

Sex, Male Age, 30.

Civil Condition, single

Children, — Age Youngest Child, —

Occupation, School-Teacher

Degree Education, Common School

Profession of Religion, not a church member.

Habits, not intemperate —

Nativity, Wabasha Co. Minnesota: father's N.Y. State: mother's Ills

Physicians Committing, Town of Mazeppa: M. H. Cremer & L. E. Claydon

Correspondents, Fletcher. A. Sheldon (Father) Mazeppa.

use only {(Brother), Arlie. G. Sheldon, Mazeppa, Minn

For...

Accompanying Bo...

Suicidal or not, no

Date of this Attack, Yesterday (poss...

Duration, Short probably.

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 30

Time of Leaving, July 17 – 1901

Time in Hospital, 2 mos 20 Ds

Result, Improved: —

Discharged by Bof C. – Feby 5/1902

Examination on Admission by Dr. E. Z. Wanous *Date of* 29th Apl 1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events, much impaired

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert

REASONING POWER, Ordinary Subjects, Will not reason

Special Subjects,

Own Mental State, Does not appreciate Condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Rather Exalted

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS, "of hearing"

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, Gradual

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

Neurasthenia in the family –

Father, Living – well

Paternal Relatives, 1st Cousin Insane

Mother, Living – well

Maternal Relatives, No history of Insanity

Brothers and Sisters, 3 3 1 sister nervous

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

HABITS, Drinking and Smoking, Not

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Schoolteacher & farming

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

Sleep, poor Appetite, — Bowels, —

Personal and Medical History of Fletcher Bird Sheldon

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, Well nourished

WOUNDS, Abnormalities, No Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, Clear

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

SIGHT,

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

HEARING,

COORDINATION, Arms, normal Legs, normal Grasp, by other tests, very unsteady.

TREMORS, Hands, Coarse Tongue, do Facial Muscles, do General,

PATELLAR REFLEX, — Other Reflexes,

ARTICULATION, Slurred, — Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, Irritable

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES, flabby

LUNGS,

Chest Symmetry: Sym

Expansion: Good

Breath Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, regular

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

The patient seems confused; rather exalted & attention fixed: frequently goes to window & listens, as though attracted by sounds. Will not answer questions; generally evades answer, by asking another question. Brother says he has been peculiar for some time; – when playing cards or doing other things would be found mind fixed and forget to play, until asked. Has also worried about some woman who refused his attentions. At this time, about a year ago, he was "queer".

Personal and Medical History of Fletcher Bird Sheldon

1901

This patient was brought here by Hugh Dorsey, attended by Arlie. G. Sheldon: seems in good physecal condition: the following history accompanied him. There is no history of consanguinity: 1st Cousin on father's side insane (and Adelbert Sheldon here). This is 1st attack: first symptoms manifested yesterday: had hallucinations, but other peculiarities existed previously. Disease seems increasing: is variable & there are rational intervals. Derangement now shown by hallucination religion. Thinks he is inspired". Is not disposed to injure others, nor suicidal: propensity not active: no filthy & destructive habits: previous peculiarities not noticeable. There is no history of intemperance, nor of any severe disease &c or head injury. He has not been restrained or confined: don't know cause of the disease. Treatment alone. On personal examination they are noticed religious hallucinations, aberration of mind. ———

Apl 27 On admission, was put on T.W. (G.A.R. Complexion dark: hair black: eyes brown: condition of skin good: mole on left arm: scar on left fore-arm. Is clean. Teeth 2 gone, right upper; and one, left upper: 1 right lower: 2 left lower. Is a little excited in behavior). —

" " 28 Received on Ward; put to bed: badly confused + maniacal — April 28. Must be restrained.

29/30 Visited by relatives. Apl 30. Had to be restrained. May 10. Given clothes & got up: at times,

May 14 seems very rational. May 14. Visited by friends — May 15. Extremely restless, through the night.

June 4/05 Transferred to B.3. June 15. Attempted to elope, while out with crowd — July 17. Taken

July 17 home, by father, (under Bond). —

Discharged

Personal and Medical History of

Personal and Medical History of Stephen Martell

Whole No. 5804

Residence, Winona, Minn

Became resident of State of Minn Spring of 1871. — of County "

Date Admission, 29th April 1901.

Admitted by Dr. O. C. Heyerdale hour, 4 P.M.

How Sent, D. E. Vance, Jo P. Winona County

Sex, Male Age, 60 years

Civil Condition, widowed

Children, Three Age Youngest Child, —

Occupation, River Pilot and Carpenter

Degree Education, Common School

Profession of Religion, Roman Catholic

Habits, No history of intemperance, so far as known

Nativity, Montreal, Canada: parents also born there.

Physicians Committing, G. J. Tweedy and Edwin S. Minn

Correspondents, none given in papers

No. for Year, 167.

Insane Relatives, none, as far as known.

Cause Exciting, senile degeneration

Cause Predisposing, probably age

Form, ~~Organic Dementia~~ cystitis — Deafness.

Accompanying Bodily Disorder, weak & unsteady

Suicidal or not, not

Date of this Attack, April 23d 1901.

Duration, about a week

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, — 60 —

Time of Leaving, May 31st 1901

Time in Hospital, 1 Mo 2 Ds

Result, Recovered: Discharged Nov 22/01.

Examination on Admission by Dr. E. J. Wanous *Date of* Apl 30/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused & Sluggish

MEMORY, Past Events, fair

Recent Events, Impaired Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State, Does not appreciate Condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS, "of Sight"

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, Sudden

ONSET, Gradual or Sudden,

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

Father, Dead: Drowned

Paternal Relatives, No Insanity

Mother, Dead: Yellow fever

Maternal Relatives, No Insanity

Brothers and Sisters, well

Children — 2 — well

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

Last fall, fell down stairs, striking head on bottom step.

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Pilot

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

Sleep, Good Appetite, Good Bowels, Good

Personal and Medical History of Stephen Martell

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, — Condition of Skin, reddish, Dry

TONGUE, Coatings, Promptness of Movement, Dry — coated

PUPILS, Equality, Size, Response to Light, Sluggish Accommodation, Slow

SIGHT, much impaired

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

HEARING, Deaf

COORDINATION, Arms, Incoordination of Legs, & arms Grasp, Standing, eyes shut, unsteady

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

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Yes Hesitating, Yes Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irregular

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, None

ARTERIES,

Sclerotic

LUNGS,

✓

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good

BOWELS, Present Condition, regular

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

The patient seems confused & memory impaired, especially for recent events: Condition came on suddenly: perhaps an apoplexy, which has resulted in brain-changes. Marked incoordination of extremities present. Imagines people about him, can see them, though does not hear them. Expresses various delusions.

Personal and Medical History of Stephen Martell

1901

This patient was brought here by Sheriff Lins (M. J.) attended by Edward Fakler, in fair physical condition & with following history of case. There is no history of consanguinity, nor of heredity, as far as known. This is 1st attack; first symptoms manifested April 23d 1901. fell unconscious, on the street; afterwards became violent. Disease appears increasing; is somewhat variable, but these intervals not regular. Derangement now shown on all subjects: delusions, incoherence & violence: imagines he is being kidnapped. Is disposed to injure others, but not suicidal: is of filthy & destructive habits. Patient has been sedentary in his habits, and morose in his disposition. No history of intemperance, as far as known. As to his having been subject to any severe disease &c or head-injury, unknown: has been restrained or confined continuously, since April 23/1901. Supposed cause of the disease is senile degeneration. Treatment has been Bromide & Chloral, in full doses. On personal examination physical condition normal, except cystitis: he has a dazed & bewildered appearance, and is

Apl 29 also slightly deaf. On admission, was put on T.W. (G.H.N. Rpt. Complexion dark, hair brown, eyes brown. Condition of skin fair: varicose veins on left leg: scars above left knee: is dirty. Teeth rather poor: 6 gone, upper jaw. Behavior good: is very unsteady on his feet. Examined by W. F. Knutson.)

" " Received on Ward: put to bed. Is very unsteady and seems weak, physically. May 14. Given

May 14/15 clothes & got up: seems much improved. May 15. Transferred to A. appears normal,

31 mentally, & is gaining physically. May 31. Visited by sister & taken home. Was quite recovered.

Discharged

Personal and Medical History of

Personal and Medical History of August Kreilaus

Whole No. 2808.

Residence, Winona, Minn

Became resident of State of Minn: 1879. Of County 1880.

Date Admission, 30th April 1901.

Admitted by Dr. E. J. Wagonus hour, 4.00 pm

How Sent, D.E. Vance Jof P. Winona County

Sex, Male Age, 44

Civil Condition, Married

Children, Nine Age Youngest Child, —

Occupation, Carpet-Weaver

Degree Education, Common

Profession of Religion, German Catholic

Habits, No history of intemperance.

Nativity, Germany: Parents also born there.

Physicians Committing, W.F.C. Heise & C.P. Robbins

Correspondents, None given on papers

No. for Year, 171

Insane Relatives, mother subject to periodic attacks

Cause Exciting, Religious excitement

Cause Predisposing, not stated

Form, Acute mania

Accompanying Bodily Disorder, nervousness.

Suicidal or not, Not

Date of this Attack, April 29th 1901.

Duration, 3 Days

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, 44

Time of Leaving, Augt 22d 1901

Time in Hospital, 3 Mo. 23 Ds

Result, Recovered: Discharged Augr 22/01

Examination on Admission by Dr. C. L. Chapple *Date of* May 1/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Excited

MEMORY, Past Events, Impaired

Recent Events, poor Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert: Illusive

REASONING POWER, Ordinary Subjects,

Special Subjects, Impaired: irrational

Own Mental State, Irrational

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS, Yes

ILLUSIONS, Yes.

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, Sudden (Commitment)

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

no history

Father, Dead

Paternal Relatives, —

Mother, Dead

Maternal Relatives, —

Brothers and Sisters, 2 Bros. 1 Sister One — Cholera —

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

no history

HABITS, Drinking and Smoking, Both: says not excessively

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches (for 8 years)

OCCUPATION, Healthy or not, Carpet-weaver

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

Sleep, Good Appetite, Good Bowels, regular

Personal and Medical History of August Kreilaus

49/101

M. August Kreilaus

Copy of Order for Hearing Petition of Phillip Nonnenmacher

of the City of Winona in the County of Winona for appointment of Phillip Nonnenmacher or some other suitable person as guardian for August Kreilaus insane; served and service admitted May 4th 1901. by Dr a.g.K

(Papers filed with commitment papers.)

Hearing on Monday 20th May 1901. at Court House Winona

RACTERISTICS.

USUAL WEIGHT, NUTRITION, Not good

r of legs: Prominent Condition of Skin, Some acne Capillaries

: Slight Coarse tremor

nse to Light, Yes Accommodation, Yes

tanding on one foot, Slightly unsteady: Standing Eyes Shut, steady.

ight impairment Grasp, Fingers tense, Eyes Shut, accurate

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

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, Normal

Size, Normal

Apex Beat, 5"

Murmurs, None

ARTERIES,

LUNGS,

Chest Symmetry: Sym

Expansion: Fair

Breath Sounds Roughened.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Poor

BOWELS, Present Condition, Constipated

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

Patient somewhat emaciated, with acne of skin: veins & capillaries enlarged and prominent. Lungs & heart in apparently good condition. Is excited & talkative, but irrational & incoherent. Delusions of a transient nature; also hallucinations and illusions - Condition acute mania, from depressed bodily functions and religious excitement - Possibly hereditary instability.

Personal and Medical History of

Whole No. 5808.

Residence, Winona, Minn

Became resident of State of Minn: 1879. Of Com

Date Admission, 30th April 1901.

Admitted by Dr. E. Z. Wanous hour, 4 o

How Sent, D.E. Vance Jof P. Winona Co

Sex, Male Age, 44

Civil Condition, married

Children, none Age Youngest Child, —

Occupation, Carpet-weaver

Degree Education, Common

Profession of Religion, German Catholic

Habits, no history of intemperance.

Nativity, Germany: parents also born there.

Physicians Committing, W. F. C. Heise and C. P. Robbins

Correspondents, none given on papers

Suicidal

Date of this Attack, April

Duration, 3 days

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, 44

Time of Leaving, Augt 22d 1901

Time in Hospital, 3 Mo. 23 Ds

Result, Recovered: Discharged Aug 22/01

Examination on Admission by Dr. C. L. Chapple *Date of* May 1/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Exalted

MEMORY, Past Events, Impaired

Recent Events, poor Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert: illusive

REASONING POWER, Ordinary Subjects,

Special Subjects, Impaired: irrational

Own Mental State, Irrational

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS, Yes

ILLUSIONS, Yes.

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, Sudden (Commitment)

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

no history

Father, Dead

Paternal Relatives, —

Mother, Dead

Maternal Relatives, —

Brothers and Sisters, 2 Bros. 1 Sister

One — Children — (especially Typhoid Fever, Sunstroke,

PROMINENT DISEASES, Head Injuries and Surgical Operations).

no history

HABITS, Drinking and Smoking, Both: says not excessively

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches for 8 years

OCCUPATION, Healthy or not, Carpet-weaver

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

Sleep, good Appetite, Good Bowels, regular

Personal and Medical History of August Kreilaus

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, varicosities of veins ~~of veins~~ of legs: prominent capillaries Condition of Skin, some acne

TONGUE, Coatings, Promptness of Movement, Coated: prompt: slight coarse tremor

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

SIGHT, good

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

HEARING, good

COORDINATION, Arms, good Legs, Slight impairment Grasp, finger to nose, eyes shut, accurate

Standing on one foot, slightly unsteady: Standing eyes shut, steady.

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

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, normal

Size, normal

Apex Beat, 5"

Murmurs, none

ARTERIES,

LUNGS,

Chest symmetry: sym

Expansion: fair

Breath sounds roughened.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Poor

BOWELS, Present Condition, Constipated

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

Patient somewhat emaciated, with acne of skin: veins & capillaries enlarged and prominent. Lungs & heart in apparently good condition. Is exalted & talkative, but irrational & incoherent. Delusions of a transient nature; also hallucinations and illusions. Condition acute mania, from depressed bodily functions and religious excitement. Possibly hereditary instability.

Personal and Medical History of *August Kreilaus*

1901

This patient was brought here by M. J. Lins, attended by Herman Weibel, in poor physical condition, and with following history of case. There is no history of consanguinity: mother subject to periodic attacks. This is first attack, first symptoms manifested April 27/1901. Disease seems increasing; not variable; no rational intervals. Derangement now shown by delusions, illusions, hallucinations; violent, talkative, rambling. Is not disposed to injure others, nor suicidal; propensity not active; no filthy or destructive habits. Was always very religious; his trouble seems to be religious mania. There is no history of intemperance nor of any severe disease &c, or head-injury. Has been in charge of Sheriff, (confined) - Supposed cause of the disease is religious excitement: no treatment. On personal examination no pathological conditions manifested except nervous excitement & mental aberration. -

Apl 30 On admission, was put on T.W. (G.H.N. R'pt. Complexion light: hair sandy; eyes blue; - Condition of skin, good: varicose veins on both legs: scratches on breast: is dirty: Teeth; 3 gone upper right, and 4 gone, upper left: 2 gone lower left jaw. Is very excitable). —

" " Received on Ward: given bath & put to bed. Is very maniacal. May 1. Filthy & noisy. Seems

May 1/13 very much confused & excited. May 13. (14-day recon up). Patient seems to have recovered

14 his mental condition & works on ward. Is well-behaved. May 14. Transferred to A1.

31 Is working in main kitchen. June 8 Wt 128# p 68 — June 28. Transferred to A2.

June 28 Much improved. Aug 22. Seems very well. Entirely recovered for his attack. —

Aug 22 Sent Home today. —

Discharged

Personal and Medical History of

Personal and Medical History of Albert Wing

Whole No. 5809.
Residence, Kenyon, Minn
Became resident of State of Minnesota 1871: of County 1891.
Date Admission, 30th April 1901.
Admitted by Dr. C. L. Chapple hour, 7 20 P.M.
How Sent, Axel Haller, Jo P. Goodhue County
Sex, Male Age, 30
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Laborer
Degree Education, Common School
Profession of Religion, not a church member
Habits, Patient drank heavily some years back.
Nativity, Goodhue County, Minn: Parents born in Norway
Physicians Committing, F. W. Dimmitt & A. W. Jones
Correspondents, Mrs Christina Wing (mother) Kenyon, Minn

No. for Year, 172.
Insane Relatives, None
Cause Exciting, Not known
Cause Predisposing, Probably injury to chest, some years ago. + habits
Form, acute melancholia
Accompanying Bodily Disorder, Muscular tremors
Suicidal or not, not known to be
Date of this Attack, In January 1901
Duration, about 4 months.
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, about 30.
Time of Leaving, September 3 - 1901
Time in Hospital, 4 Mos 4 Ds
Result, Improved —
Discharged by Board of Control — April 14 - 1902

Examination on Admission by Dr. E. Z. Wanous *Date of* May 1/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Clear
MEMORY, Past Events, Good
Recent Events, " Special Subjects, "
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Correct
REASONING POWER, Ordinary Subjects, Good
Special Subjects, " "
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Normal
DELUSIONS, ~~Systematized,~~ When in spell of poisoning and persecution — Transitory,
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION, January 1 — 1901
ONSET, Gradual or Sudden, Sudden
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption). 1 sister died of phthisis.
Father, Living — well
Paternal Relatives, no Insanity
Mother, Living — well
Maternal Relatives, no insanity —
Brothers and Sisters, 1 bro - dead: 2 sisters dead
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations). Pleurisy - 18 years ago. Overheated 5 & 16 years ago.
HABITS, Drinking and Smoking, 5 years ago, to excess.
HEADACHES, VERTIGO, OR CONVULSIONS, headaches
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any, Has "spells" which last a few hours, when he is much confused and depressed —
Sleep, poor Appetite, good Bowels, regular

Personal and Medical History of Albert Wing

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 4½ PRESENT WEIGHT, 124 lbs USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, No Condition of Skin, Clear
TONGUE, Coatings, Promptness of Movement, Coated. prompt
PUPILS, Equality, Equal Size, normal Response to Light, Good Accommodation, good
SIGHT, normal
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, Normal
COORDINATION, Arms, normal Legs, normal Grasp, Other tests, good
TREMORS, Hands, none Tongue, Facial Muscles, General,
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, yes Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES, Normal
LUNGS,
Chest symmetry: fym
Expansion: fair
Breath Sounds: normal

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

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

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

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

The patient, at present, seems quite normal, but admits having been confused, during which "spells" he is destructive & threatening. Does not know what causes condition. Physical condition seems good. —

Personal and Medical History of Albert Wing

1901

This patient was brought here by Sheriff P. J. Lundquist, in fair physical condition, and with following history of case. There is no history of consanguinity nor heredity. This is 1st attack: first symptoms manifested in January 1901. Is suspicious: thinks people want to injure him; will not eat with the family: thinks poison is put in his food. Disease seems increasing: not variable: no rational intervals: Derangement now shown in that he avoids people: thinks poison is placed in his food. Patient is not disposed to injure others; has not attempted suicide: propensity not known to be active: no filthy or destructive habits. No definite evidence of any previous peculiarities: parents not addicted to intemperance, but patient drank heavily, some years back. Says "he has been overheated several times, and, many years ago, a horse kicked him in chest, injuring him severely. He has not been restrained or confined. Supposed cause of the disease, not known. Treatment, none. On personal examination, there are noticed muscular tremors: looks depressed.

Apl 30 On admission, was put on B3 (G. H. N. R'ft. Complexion light: hair light brown; eyes gray; condition of skin good: Scars on 2nd & 3rd fingers of right hand: Is clean: Teeth good: Behavior good: Examined by M. F. Fahey).

May 1 Received on Ward: given bath: May 1. Is quiet: well-behaved: neat & clean in habits:
3/10 Says "At times, thinks people put something in his food, to make him insane." May 10. Seems
11/14 more restless: worries: does no work. May 11. Is despondent. May 14 (14-day record up) —
July 31 visited by father & sister. July 31. Patient seems some better, but is still depressed.
Aug 31 Patient works on ward. Sept 3. Nothing further specially to report in condition —
Sep 3 Taken home by sister, against the advice of Physicians.

Discharged

Personal and Medical History of

Personal and Medical History of Fred Becker

Whole No. 5813.

Residence, St Paul (Since 1889) —

Became resident of State? — of County? —

Date Admission, 6th May 1901.

Admitted by Dr. C. L. Chapple hour, 7 15 P.M.

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

Sex, Male Age, 31.

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Plasterer

Degree Education, Common school

Profession of Religion, Lutheran.

Habits, not known if intemperate

Nativity, Germany: parents also born there:

Physicians Committing, J.M.A. Gravelle and J.S. Gilfillan

Correspondents, none given in papers

No. for Year, 176.

Insane Relatives, not known

Cause Exciting, not known

Cause Predisposing, not known

Form, Acute Melancholia

Accompanying Bodily Disorder, says none

Suicidal or not, not

Date of this Attack, not stated

Duration, not stated

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, not stated

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* May 7/1901.

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,

Alert & Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

much depressed

DELUSIONS, Systematized, Transitory,

Special Subjects, Does not express any

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, Living -

Paternal Relatives, nothing known

Mother, Living

Maternal Relatives, nothing known

Brothers and Sisters, nothing known

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

Don't know

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not,

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

No

Sleep, poor Appetite, poor Bowels, irregular.

Personal and Medical History of Fred. Becker

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 in PRESENT WEIGHT, 160½ lbs USUAL WEIGHT, NUTRITION, poor

WOUNDS, Abnormalities, No Condition of Skin, anoemic

TONGUE, Coatings, Promptness of Movement, Clear

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

SIGHT,

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

HEARING,

COORDINATION, Arms, normal Legs, " Grasp, —

TREMORS, Hands, No Tongue, Facial Muscles, General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, Hesitating, Yes Slow, Yes

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

Normal

LUNGS,

Chest symmetry: Sym

Expansion: "

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, poor

BOWELS, Present Condition, Constipated

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

The patient seems much worried and depressed: mind seems fixed: will not answer questions: seems to fear he will get into trouble.

Case is one of mild Stuporous Melancholia.

Personal and Medical History of Fred. Beeker

1901

This patient was brought here by Deputy-Sheriff E. Johnson, attended by nurse, in apparently fair physical condition and with following history of case. As to any consanguinity or heredity, none known. This is 1st attack; when first symptoms were manifested, is not stated; he wandered about streets, slept in barns, and out doors, from choice. Disease appears stationary; variable and with rational intervals, but if these are regular, is not known. Derangement now shown by above actions; (he gives no reason for such); If disposed to injure others, is not known is not suicidal: no filthy or destructive habits. As to any previous peculiarities or history of intemperance, not known, and as to any severe disease &c or head-injury, "he says not." - Has been confined in County Jail 2 Days. Cause of the disease, not known: Treatment, none. On personal examination, he appears melancholic; slow or refused to answer questions: wandering looks in his eyes &c. N.B. Patient was committed to State Detention Hospital on 19th April 1901, and was sent here by Certificate endorsed as "Warrant" & signed by Doctors J. M. A. Gravelle, J. T. Gilfillan, Arthur B. Aucker (Supt. D.H.) & E. W. Bazille, Judge of Probates.

May 6 On admission, was put on B3 (G.H.N. Rft. Complexion light; hair brown; eyes blue; Condition of skin good: scars between eyes; scar on left leg, on shin: is clean; teeth: good condition, one gone in upper front Jaw. Behavior good: Confused and appears afraid.). ——— ———

" 9 Received at Art: seems confused: stays by himself: despondent. May 9. Neat & tidy in
" 20 habits: still confused - May 20 (14 Days record up). Patient seems much improved.
June 1 Wt 157#. July 31. Patient still inclined to be depressed and melancholy: also
July 31 somewhat confused: sits by himself. Aug 1 Wt 154#. Jan 31/02. Patient is in good
Aug 31 physical condition; rather melancholy: will not talk: rather indifferent.
Feb. 1 Wt. 149#; Apr. 30 Transferred to B2; Aug 1 Wt. 141#.
Very little change; very quiet; never speaks to anyone; works little as extra kitchen force; on ward is very inactive; health fairly good; habits neat.

1903
Jan. 31 Still works in kitchen; still peaceable; no incidents or change noted.

Personal and Medical History of

Personal and Medical History of Christ Holst

Whole No. 5814

Residence, Town of Goodhue
Became resident of State of Minn 1873: of County 1873.

Date Admission, 6th May 1901.

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

How Sent, Axel Haller, Jopl. Goodhue County

Sex, Male Age, 28.

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession of Religion, Lutheran

Habits, no history of intemperance.

Nativity, Frontenac, Minn: parents born in Germany.

Physicians Committing, J. E. Anderson & H. L. McClintock

Correspondents, Chas. H. Holst (brother) Claybank, Minn
Tel: at Goodhue, Henry Holst, (brother)-

No. for Year, 177.

Insane Relatives, none

Cause Exciting, not known

Cause Predisposing, probably previous attack

Form, acute Delirious Mania

Accompanying Bodily Disorder, Some tremor + weakness.

Suicidal or not, not: but disposed to injure others.

Date of this Attack, about 1st of March last

Duration, about 9 weeks

No. of Attack, 2nd (one occurred about 2 yrs ago) last January

No. of Admission, 1st —

Age First Attack, about 25+

Time of Leaving, August 27 - 1901

Time in Hospital, 9 Mos 21 Ds

Result, Recovered: Discharged Nov 22/01

Examination on Admission by Dr. E. J. Mawers *Date of* May 7/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, " " Special Subjects, mind fixed by spells

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State, appreciates Condition

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

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS, of hearing.

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, Gradual

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

Father, Dead: liver trouble

Paternal Relatives, no insanity

Mother, Living

Maternal Relatives, no insanity

Brothers and Sisters, of 7, 1 Bro. + 2 sisters dead, when young

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Pneumonia + masturbator
chronic gastritis 1.27

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Farming

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

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of Christ Holst

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, birth mark on left wrist Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, Coated: grayish coating

PUPILS, Equality, dilated equal Size, / Response to Light, sluggish Accommodation, Sluggish

SIGHT,

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

HEARING,

COORDINATION, Arms, Normal Legs, normal Grasp, Other tests good

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

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow, Yes

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

normal

LUNGS,

Chest symmetry: right side retards
Expansion: Fair
Breath-Sound: rales over
right lung.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Fair

BOWELS, Present Condition, Constipated

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

The patient shows a marked loss of memory, both for old + recent events. Cerebration sluggish, dull, and mind seems to be fixed. Responds slowly to questions, sometimes not answering at all. Has had some trouble with a woman, whom he has thought of marrying. Trouble came on with an attack of pneumonia, 3 months ago.

The patient has rales over right lung; also expectorates a great deal —

Personal and Medical History of Christ Holst

1901

This patient was brought here by Sheriff P. J. Lundquist, attended by Owen Clifford, in apparently fair physical condition & with following history of case. There is no history of consanguinity, nor heredity. This is not 1st attack; one occurred about 2 years ago, last January; duration about one year; was not sent to hospital. First symptoms of this attack were manifested about the 1st of March last, by loss of memory, following pneumonia and hallucinations. Disease seems stationary; is variable; no rational intervals. Derangement now shown, in that he is afraid of people. Is disposed to injure others, but not suicidal: no filthy or destructive habits. Previously, was quick-tempered: no history of intemperance, nor of any severe disease(?) or head-injury: has not been restrained or confined. Cause of the disease, not known: has been treated by family physicians no effects. On personal examination, there is some tremor: is emotional: says "a certain party has injured him, in a way too horrible to tell". —

May 6 On admission, was put on I.W. (G.H.N. R'pt. Complexion light: hair brown: eyes blue; condition of skin good: birth mark on left wrist: is clean: Teeth: 2 gone lower right; 2, upper left: — " " Behavior good. Examined by Howe & Moore.). — Received on ward: given bath & put to bed: seems very much depressed; melancholy: & suffering from lung-trouble. Put on treatment. May 20. Improved very much. May 25. Seems much better. says "he feels all right": still on treatment. June 1. Wt 157#. P.S. June 28. Working in kitchen. Transferred to A!. July 19. Went out Camping. Aug 24. Returned from Camp. Seems, mentally, entirely recovered: physically much improved. Habits neat & clean. Sent home today.

30/25 June 1/28 July 19 Aug 24 27

Discharged

Personal and Medical History of

Personal and Medical History of William Casey

Whole No. 3815.
Residence, Washington County, Minn
Became resident of State of Minn. over 15 yrs ago. Washington Co.
Date Admission, 7th May 1901.
Admitted by Dr. C. L. Chapple hour, 7.30 PM
How Sent, Frank. T. Wilson, Jof P. Washington Co.
Sex, Male Age, 42 (about)
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Laborer in woods.
Degree Education, Reads.
Profession of Religion, Catholic
Habits, unknown, as to intemperance
Nativity, Unknown: that of Parents unknown also
Physicians Committing, Geo. N. Water and F. G. Landeen
Correspondents, None given in papers

No. for Year, 178.
Insane Relatives, not stated
Cause Exciting, not stated
Cause Predisposing, not stated
Form, ~~Paranoia~~ Dementia
Accompanying Bodily Disorder, some incoordination in walking
Suicidal or not, not
Date of this Attack, March 29th 1901. Entered Stillwater Hospital
Duration, 2.
No. of Attack, 2.
No. of Admission, 1st here
Age First Attack, 2.
Time of Leaving, September 16 - 1902
Time in Hospital, 1 yr 4 mo 11 ds
Result, Died: General paresis (abt 2 yrs)

Examination on Admission by Dr. C. L. Chapple *Date of* May 8/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish: somewhat Confused
MEMORY, Past Events, fair
Recent Events, poor Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull: at times, Seems illusive
REASONING POWER, Ordinary Subjects, poor
Special Subjects,
Own Mental State, Quite good
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Dull & Depressed
DELUSIONS, Systematized, not stated Transitory,
Special Subjects, none
HALLUCINATIONS, None
ILLUSIONS, None
SUMMARY,
Is slow to perceive, think & speak - is depressed

HISTORICAL.
LENGTH INVASION, Probably some time
ONSET, Gradual or Sudden, Gradual
(Question concerning Insanity, Consanguinity, Epilepsy, HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead: rupture
Paternal Relatives,
Mother, Living
Maternal Relatives,
Brothers and Sisters, 2 brothers: 1 Living (Dead).
Children — None
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Gonorrhoea: Measles: mumps. Syphilis
Delirium tremens.
HABITS, Drinking and Smoking, Drinks to excess: says he does not use tobacco
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, Poor Appetite, Good Bowels, Constipated.

Personal and Medical History of William Casey

PHYSICAL CHARACTERISTICS.

HEIGHT, ——— PRESENT WEIGHT, ——— USUAL WEIGHT, NUTRITION, Quite good.
WOUNDS, Abnormalities, a few small scars - from injuries - Condition of Skin, Quite good dilated Capillaries
TONGUE, Coatings, Promptness of Movement, Slight Coat: some Coarse tremors.
PUPILS, Equality, unequal Size, normal Response to Light, Slow Accommodation, Slow -
SIGHT, much impaired in L Eye
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good Inquires if nose, eyes shut, slow: Staggering in rapid motion
COORDINATION, Arms, Good Legs, unpaired Grasp, Staggers, eyes shut, quite unsteady
TREMORS, Hands, Yes Tongue, Yes Facial Muscles, General, No
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow, Slow
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, regular
Strength, Sounds, Fair
Size, n
Apex Beat, ✓
Murmurs, None: normal
ARTERIES, n.
LUNGS,
Chest symmetry: Good
Expansion: Fair
Breath Sounds: N —

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

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

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Fairly Sound.
BOWELS, Present Condition, Quite 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).

This patient appears in fairly good physical condition. General bodily functions fairly normal. But there is considerable unsteadiness in movement, with tremors of tongue & hand. Left pupil is somewhat fixed & sight impaired: says due to injury when a boy - Mentally he is very dull: memory for recent events especially poor: speaks very slowly. Condition appears rather one of blunted faculties, than of depression. Says he had syphilis about 17 years ago & attributes his present trouble to it. Realizes that his mind is not right: has been also a heavy Drinker.

Personal and Medical History of William Casey

1901

This patient was brought here by Dr. C. T. Sidle, attended by none, in fair physical condition and with following history of case. If any consanguinity unknown; as to any heredity, not stated; if 1st attack ?; patient entered Stillwater Hospital, March 29th 1901. The disease seems stationary; not variable; no rational intervals. Derangement now shown by delusions; at times refuses food: melancholy: is not disposed to injure others, nor suicidal; has some filthy and destructive habits. As to any previous peculiarities not stated; as to any history of intemperance, severe disease &c, or head-injury, unknown. He has been locked in room, in hospital. Cause of disease not stated: had bromides, at first. On personal examination he shows apathy: taciturn; refuses to talk: incoordination shown in walking. —

May 7 On admission, was put on B3 (G. H. N. R'pt. Complexion dark: hair dark-brown; eyes blue; condition of skin good: right hand slightly swollen and red: slight abrasion below right knee-rash on back of both legs: is dirty: Teeth: 3 gone in upper jaw: 1, lower jaw. Behavior good. Says that his bowels have not moved for 4 or 5 days"). —

" " Received onward: given bath & put to bed: Is very unsteady: badly demented: suffering
21 from brain-syphilis: May 21. Put on treatment without being improved. June 7. Is
June 7/10 very much disturbed. June 10. Suffers from retention: requires catheterization.
16/22/27 (Likewise on June 16-17-18-19-20 & 22). June 27. Feet badly swollen. July 1. 115#
July 15 Is filthy and in poor physical condition. July 15. Dressed & up, onward. —
31 Shows some mental improvement. Aug 1. Wt 120#. Jany 1/02. Wt 126#. Jany 31. Is
1902 Jany 31 dull, demented & rather untidy: has become, towards the last, more dirty in habits.
Feb. 1/02 Wt. 130#. Quite unsteady; Paretic; demented.
Apr. 1/02 Wt. 146#. July 1/02; 132#. Is steadily becoming more helpless. Sept. 8/02 To I.W. - has been becoming remarkably weak and helpless. Sept. 9/02 Temperature, about normal. Is simply helpless & weak. Sept. 16, - had convulsion during the evening. Temp. went up to 105° during night. Sept. 17/02 Had three very hard convulsions during the day. Sept. 18 - Patient died at 12 30 P.M. having been comatose since last convulsion.

Personal and Medical History of

Personal and Medical History of Tony Polega or Bolega

Whole No. 5816.
Residence, Italy
Became a resident of State? Dont know of County? —
Date Admission, 8th May 1901.
Admitted by Dr. C. L. Chapple hour, 7.20 PM
How Sent, E. W. Bazille, Jeff. Ramsey County
Sex, Male Age, 48.
Civil Condition, unknown
Children, Dont Know Age Youngest Child, —
Occupation, Dont Know: laborer
Degree Education, not educated.
Profession of Religion, Dont Know.
Habits, Dont know as to intemperance
Nativity, Italy: parents also born there.
Physicians Committing, L. E. Penny and W. G. Richeson
Correspondents, none given in papers

No. for Year, 179.
Insane Relatives, Dont Know
Cause Exciting, not known
Cause Predisposing, not stated
Form, Acute Melancholia
Accompanying Bodily Disorder, Dont Know
Suicidal or not, not
Date of this Attack, unknown
Duration, Unknown
No. of Attack, Dont Know
No. of Admission, 1st
Age First Attack, unknown
Time of Leaving, June 21, 1901.
Time in Hospital, 1 mth, 13 das
Result, Improved. —
Discharged July 29/1901.
Taken out by State Agent Gates to his relatives in Chicago — of pp

Examination on Admission by Dr. E. J. Wanous *Date of* May 9/1901 —

MENTAL CHARACTERISTICS.

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

HISTORICAL.
LENGTH INVASION,
ONSET, Gradual or Sudden, ✓
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Not obtainable
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 Tony Polega or Bolega

TONY POLEGA IS A MYSTERY

POLICE SEND HIM TO WORKHOUSE.

When He Is Brought Into the Probate Court He Refuses to Tell About Himself.

"Twelve, thirteen, ——; thirteen, fourteen, —— it," muttered in Italian, were the only responses that could be elicted from the man supposed to be Tony Polega during his examination for insanity yesterday in the probate court. The man comes from Sicily.

The man was picked up after midnight Saturday, wandering about the city. He was arrested on a charge of vagrancy and tabbed as Tony Polega. He was sent to the workhouse Monday. His actions there were considered queer, and Tuesday night he became violently insane, raving and tearing about his cell.

He answers no questions appearing not to comprehend them. It is supposed that he lives in St. Paul or Minneapolis and wandered from home. He was sent to the Rochester hospital.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 120 lbs USUAL WEIGHT, NUTRITION, poor
No Condition of Skin, dark
...ptness of Movement, Clear
Equal Size, normal Response to Light, normal Accommodation, normal
Good
...t, Arcus Senilis, or other troubles,
✓ Legs, ✓ Grasp,
Tongue, Facial Muscles, General,
Delayed Other Reflexes,
...d, Hesitating, Slow,
...EXPRESSION, Sensibility,
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none noted
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,

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

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

The patient is a foreigner and cannot speak any English: seems somewhat depressed, mentally, but attempts, at times, to talk without hesitation; apparently trying to explain his situation.

Personal and Medical History of Tony Polega or Bolega

Whole No. 3816.

Residence, Italy

Became a resident of State ? Don't know of County ? —

Date Admission, 8th May 1901.

Admitted by Dr. C. L. Chapple hour, 7.20 P.M.

How Sent, E.H. Lazelle, Supt. Ramsey County

Sex, Male Age, 48.

Civil Condition, unknown

Children, Don't Know Age Youngest Child, —

Occupation, Don't Know: laborer

Degree Education, Not educated.

Profession of Religion, Don't Know.

Habits, Don't know as to intemperance

Nativity, Italy: Parents also born there.

Physicians Committing, L.E. Denny & W.J. Nickerson

Correspondents, None given in papers

No. for Year, 179.

Insane Relatives, Don't Know

Cause Exciting, not known

Cause Predisposing, not Stated

Form, Acute Delirious

Accompanying Bodily Disorder, Don't

Suicidal or not, Not

Date of this Attack, Unk

Duration, Un

No. of Attack, Don't Kn

No. of Admission, 1st

Age First Attack, unknown

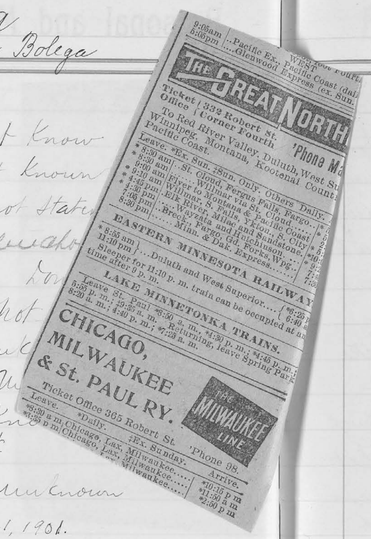
Time of Leaving, June 21, 1901.

Time in Hospital, 1 month, 13 days

Result, Improved. —

Discharged July 29/1901.

Taken out by State Agent Gates to his relatives in Chicago — of Pm



Examination on Admission by Dr. E. J. Warnow *Date of* May 9/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events,

Recent Events, ✓ Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State, ✓

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, ✓ Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, ✓

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

Father, Not obtainable

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 Tony Polega or Bolega

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 5½ PRESENT WEIGHT, 120 lbs USUAL WEIGHT, NUTRITION, Poor

WOUNDS, Abnormalities, No Condition of Skin, Dark

TONGUE, Coatings, Promptness of Movement, Clear

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

SIGHT, Good

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

HEARING,

COORDINATION, Arms, Legs, Grasp,

TREMORS, Hands, Tongue, Facial Muscles, General,

PATELLAR REFLEX, Delayed Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest Symmetry: Sym

Expansion: Good

Breath-Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, Constipated

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

The patient is a foreigner and cannot speak any English: seems somewhat depressed mentally, but attempts at times to talk without hesitation; apparently trying to explain his situation.

Personal and Medical History of Tony Polega or Bolega

1901

This patient was brought here by Deputy Emanuel Johnson, (attended by none), in fair physical condition, and with following history of case. Dont know as to any consanguinity, heredity, if 1st attack or not, when first symptoms of this attack were manifested, or in what way, as to any history of intemperance, any severe disease &c or head-injury. Disease seems stationary; not variable; no rational intervals. Patient tore clothing & matting to pieces. Is not disposed to injure others, nor suicidal: Is of filthy and destructive habits (of clothing). He has been confined in Work-house for 2 days. Cause of disease not known: no treatment. On a Personal examination; patient cant talk: no facts learned. N.B. See letter of W. A. Gates, State Agent, filed with "Committment Papers", authorizing committment of this patient. —

May 8 On admission, was put on B3 (G. H. N. R'pt. Complexion dark: hair black: eyes blue; condition of skin dirty: abrasion on left cheek: 2 small scars on back: is dirty. Teeth. one gone, upper front jaw: 2 gone, upper left jaw. Behavior quiet: is very much confused: Examined by H. Poapst) —

" " Received on ward: given bath. Is very much confused: dull & melancholy. Cannot

16/22 Speak English. May 16. Is untidy: May 22. (14-Day record up). Patient seems somewhat improved mentally; though still inclined to be melancholy & depressed.

June 4 Taken to relatives in Chicago, by State Agent Gates.

Discharged

Personal and Medical History of

Personal and Medical History of Theodore Kehsler

Whole No. 5817.
Residence, St Paul, Minn
Resident of State 16 Years: of County 16 years.
Date Admission, 9th May 1901.
Admitted by Dr. E. F. Wanous hour, 7.30 pm
How Sent, Edmund W. Bazille, Jo P. Ramsey County
Sex, Male Age, 35
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, none
Degree Education, not educated.
Profession of Religion, Catholic
Habits, no history of intemperance
Nativity, Germany: parents also born there.
Physicians Committing, Mason Allen and J. S. Gilfillan
Correspondents, Peter Kehsler
391 Sherburne Ave
St Paul

No. for Year, 180.
Insane Relatives, none
Cause Exciting, Congenital
Cause Predisposing, "chronic"?
Form, Imbecile
Accompanying Bodily Disorder, Epilepsy (during Childhood)
Suicidal or not, Not: but will injure others. —
Date of this Attack, Since birth, weak-minded
Duration, Since birth probably
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, Birth (probably)
Time of Leaving, October 11 - 1901
Time in Hospital, 5 mo 2 ds
Result, Improved —
Discharged by Board of Control
April 14 - 1902

Examination on Admission by Dr. E. F. Wanous *Date of* May 10/1901 -

MENTAL CHARACTERISTICS.

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

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living - well
Paternal Relatives, none Insane
Mother, Living - well
Maternal Relatives, none insane
Brothers and Sisters, well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
at age of seven, had brain fever
HABITS, Drinking and Smoking, No
HEADACHES, VERTIGO, OR CONVULSIONS, Epilepsy
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, poor Appetite, fair Bowels, irregular

Personal and Medical History of Theodore Kehsler

Theodore Kehsler, thirty-five years old, is accused of assaulting his mother and his father at their home, 309 Sherburne avenue, yesterday morning with a stick of wood, inflicting several slight cuts on both. He was arrested and taken to the city hospital. An examination will be made as to his mental condition.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor
...ties, Condition of Skin, bronzed, sluggish
TONGUE, Coatings, Promptness of Movement, Clear - prompt
PUPILS, Equality, equal Size, normal Response to Light, normal Accommodation, normal
SIGHT, wears glasses
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles,
HEARING, good Finger to nose, eyes shut, readily: Standing on one foot unsteady
COORDINATION, Arms, normal Legs, normal Grasp, Standing, eyes shut, considerable swaying
TREMORS, Hands, none Tongue, " Facial Muscles, General,
PATELLAR REFLEX, Exaggerated Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, Slow,
FACIAL EXPRESSION, Sensibility, normal
HEART, Regularity, irritable
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES,
normal
LUNGS,
Chest symmetry: sym
Expansion: good
Breath-sounds: normal

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

EXAMINATION URINE, Quantity, Sp. g. 1026 Reaction, acid Color and Appearance, yellow - light
Albumen, (heat) No. (Nitric acid) No. Sugar, (Fehlings solution) No. (Diazo) No.
Casts and Crystals,
Passed 6 - 25 - 1901 Examined 6 - 25 - 1901.
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, fair
BOWELS, Present Condition, loose

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

The patient, when at the age of seven, had an attack of meningitis, since which time he has been mentally defective. Following this attack he had "spells" simulating Epilepsy. Says "he has not had any lately". At present, seems somewhat demented. Has various ideas that are of a delusional character, though not any very prominent. —
Physically, Emaciated, sluggish & of neurasthenic type.

Personal and Medical History of Theodore Kehsler

Whole No. 5817.

Residence, St Paul, Minn

Resident of State 16 Years: of County 16 years.

Date Admission, 9th May 1901.

Admitted by Dr. E. Z. Wanous hour, 7 30 Pm

How Sent, Edmund W. Bazille, Jo P. Ramsey County

Sex, Male Age, 35.

Civil Condition, single

Children, — Age Youngest Child, —

Occupation, none

Degree Education, not educated.

Profession of Religion, Catholic

Habits, No history of intemperance

Nativity, Germany: parents also born there.

Physicians Committing, Mason Allen and J. S. Gilfillan

Correspondents, Peter Kehsler
391 Sherburne Ave
St Paul

No. for Year, 180.

Insane Relatives, none

Cause Exciting, Congenital

Cause Predisposing, "chronic"

Form, Imbecile

Accompanying Bodily Disorder, Epilepsy (during childhood)

Suicidal or not, Not: but will injure others. —

Date of this Attack, Since birth, weak-minded

Duration, Since birth probably

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, Birth (probably)

Time of Leaving, October 11 - 1901

Time in Hospital, 5 Mo 2 ds

Result, Improved —

Discharged by Board of Control
April 14 - 1902

Atlantic City, N. J., May 8.—Harvard [illegible] the intercollegiate gold tournament on [illegible] Northfield links to-day, contesting in the fi[illegible] with Yale for the cup. Princeton held [illegible] trophy, which it now yields to the wea[illegible] of the crimson. The score stood 15 to [illegible] reckoning by the college system rece[illegible] adopted. The weather was fair, but a [illegible] breeze blew, which affected the playing, [illegible] ers of Harvard distinguished himself with [illegible] long driving and bread, and also for Har[illegible] made the first 9 holes in 37, breaking [illegible]

Examination on Admission by Dr. E. Z. Wanous *Date of* May 10/1901.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, fair

Recent Events, " Special Subjects, "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State,

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

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, Living - well

Paternal Relatives, none Insane

Mother, Living - well

Maternal Relatives, none insane

Brothers and Sisters, well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
at age of seven, had brain fever

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, Epilepsy

OCCUPATION, Healthy or not, Laborer

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

Sleep, poor Appetite, fair Bowels, Irregular

Personal and Medical History of Theodore Kehsler

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, Condition of Skin, bronzed, sluggish

TONGUE, Coatings, Promptness of Movement, Clear - prompt

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

SIGHT, wears glasses

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

HEARING, good Finger to nose, eyes shut, readily: Standing on one foot unsteady

COORDINATION, Arms, normal Legs, normal Grasp, Standing, eyes shut, considerable swaying

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

PATELLAR REFLEX, Exaggerated Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, irritable

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,
normal

LUNGS,
Chest symmetry: sym
Expansion: good
Breath-sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. 1026 Reaction, acid Color and Appearance, yellow - light

Albumen, (heat) No. (Nitric acid) No. Sugar, (Fehlings solution) No. (Diazo) No.

Casts and Crystals,

Passed 6 - 25 - 1901 Examined 6 - 25 - 1901.

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, loose

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

The patient, when at the age of seven, had an attack of meningitis, since which time he has been mentally defective. Following this attack he had "spells" simulating Epilepsy. Says "he has not had any lately". At present, seems somewhat demented. Has various ideas that are of a delusional character, though not any very prominent. —

Physically, Emaciated, sluggish & of neurasthenic type.

Personal and Medical History of Theodore Kehsler

1901

This patient was brought here by Deputy Johnson, in poor physical condition & with following history of case. There is no history of consanguinity, nor heredity, previous peculiarities, nor intemperance. This is 1st attack. has not been in hospital: has been weak-minded since birth: Disease seems increasing: not variable: no rational intervals: Derangement now shown in that he thinks that he is a policeman & attempts arrests: wears star: Patient is disposed to injure others, but not suicidal: no filthy or destructive habits. Was subject to Epilepsy, during childhood. Has been confined in County Jail 2 days. Supposed cause of the disease is congenital. Treatment none. On personal examination he appears melancholy and

May 9. mentally deficient. On admission, was put on B3 (G. H. U. Rpt. Complexion dark; hair dark-brown: eyes blue: Condition of skin fair: has small mole on left shoulder: Is dirty. Teeth: 2 gone, right upper jaw; 2 left upper: 2, right lower: 3 snags, left lower. Behavior good: Examined by H. D. Ballard.)—

N.B. See letter on file of date of May 14/1901, from Mrs M. F. Kennedy, 315 Dayton Ave. St. Paul— giving following facts about Theodore Keshler: "He has worked for us nearly 7 years: never did anything objectionable: is strictly honest: not dangerous or even insane: is a little defective: but seems more so on account of cruelty of parents: Parents are very hard drinkers & it was after one of their orgies that they made complaint of Theodore's insanity: had threatened to do so for a long time. In regard to his being a policeman, Theodore is telling the truth. Mr Kennedy induced Chief Gosse, 2 years ago, to give Theodore the papers & star of a special policeman in order that he might protect himself from the small boys, who, on their way to Neal School, teased & bothered him, at his work. He is a very devout Catholic & it would be a kindness to let him go to church. You may refer to Dr Ramsey, Mrs H. S. Fairchild, The Sisters of St. Agatha's Convent, The Sisters of St. Joseph's Convent, Mrs Ambrose Tighe, Mrs David Emmons of Dayton Avenue & I know they will corroborate my statement."

May 9 Received on Ward: given bath & put to bed: Seems feeble-minded. Is indifferent to sur-
23 -roundings: does no work. May 23. (14 Day record up)- seems some better mentally-
June 28 Is now working on lawn. Transferred to A1. July 31. Is still working out, and
July 31 has a parole. Seems quite interested in his work. is improved: Habits quite tidy.-
Aug 1 Wt 129#. Oct 11. Patient has been drifting along: rather quiet in manner:
Oct 11 and his behavior seeming to become rather more bright. Was sent home, today

Discharged

Personal and Medical History of

Personal and Medical History of Eugene B. Clark.

Whole No. 5818.

Residence, Town Austin, Mower County, Minn

Date Admission, 13th May 1901.

Admitted by Dr. E. J. Watrous hour, 800 PM

How Sent, A. G. Page, Court Commr, Mower County

Sex, Male Age, 46.

Civil Condition, Married

Children, Three Age Youngest Child, —

Occupation, Laborer

Degree Education, Comman School

Profession of Religion, Not a church-member

Habits, No history of intemperance

Nativity, U.S. Wis: Parents born in U.S. -

Physicians Committing, A. W. Allen & A. J. Pierson

Correspondents, John Rockford
Austin, Minn

No. for Year, 181.

Insane Relatives, Aunt suicided: insanity ?.

Cause Exciting, Overwork: hypochondriasis

Cause Predisposing, possibly some heredity.

Form, Acute Mania

Accompanying Bodily Disorder, has had Dysentery.

Suicidal or not, Not, but will injure others. -

Date of this Attack, May 9th - 1901

Duration, 4 Days

No. of Attack, 1st -

No. of Admission, 1st -

Age First Attack, - 46 -

Time of Leaving, May 13 - 1901

Time in Hospital, 9 Days

Result, Died: Acute Mania

Examination on Admission by Dr. E. J. Watrous *Date of* May 14/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, not obtainable

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,
Exalted

DELUSIONS, Systematized, Transitory,

Special Subjects, ✓

HALLUCINATIONS, of hearing

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, Sudden

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

Father,

Paternal Relatives, Will not talk

Mother,

Maternal Relatives,

Brothers and Sisters,

(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
No

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 Eugene B. Clark

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, No Condition of Skin, Yellow; Sluggish

TONGUE, Coatings, Promptness of Movement, badly coated

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

SIGHT, ✓

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

HEARING, Good

COORDINATION, Arms, Patient Legs, in bed Grasp,

TREMORS, Hands, Coarse Tongue, ✓ Facial Muscles, General,

PATELLAR REFLEX, ✓ Other Reflexes,

ARTICULATION, Slurred, ✓ Hesitating, — Slow,

FACIAL EXPRESSION, Sensibility, ✓

HEART, Regularity, irritable

Strength, Sounds, weak

Size, normal

Apex Beat, "

Murmurs, None noted

ARTERIES, full

LUNGS,

Chest symmetry: Sym
Expansion: Fair
Breath Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Constipated

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

The patient was brought here on a "stretcher", apparently much exhausted from his maniacal condition: he would not take any nourishment, & was very destructive before arriving. Eyes are fixed; lips constantly moving, as tho' he is trying to mutter something. Physically, much emaciated & very weak: unable to stand up.

Personal and Medical History of Eugene. B. Clark

1901

This patient was brought here by John. C. Johnson, attended by John Rochford and C.A. Krekow in poor physical condition, and with following history of case. If any consanguinity, not known. An aunt suicided to free husband from matrimonial bonds; not known if it was insanity or not. This is 1st attack: first symptoms manifested May 9th 1901, by violent & maniacal ravings: Disease seems increasing; semi-rational periods: but these are irregular. Derangement now shown in that he has violent "maniacal spells", in which there are violent, profuse & vulgar talks: His insane babblings about family matters: Delusions constantly changing: has tried to bite, kick & strike attendants: has not attempted suicide, but has requested to be shot or poisoned. No filthy or destructive habits. No previous peculiarities, but there has been slight wildness since last August and especially since last December. No history of intemperance: has had dysentery; overworked himself: hypochondriacal: has been restrained or confined. Guarded closely since this last attack, May 9th 1901. Supposed cause of the disease is Overwork; hypochondriasis: has been given bromides and hyoscine hydrobrom: both quieted.

On personal examination, he talks in a rambling babble, stares & has semi-lucid periods. Commitment recommended because he needs medical treatment while held under legal restraint.

May 13 On admission, was put on T.W. (was brought here on a lounge); (G.H.N. Rpt: Complexion sandy: hair red: eyes blue: condition of skin good: large lump on back between shoulders: 2 middle fingers of left hand gone up to 2nd joint: is clean. Teeth: 3 gone, upper left; 2 upper right jaw. Behavior good: Examined by E. E. Moore).

" 1/14 Received on Ward: in a Stuporous Condition. May 14. Extremely restless: out of bed frequently.

17/20 Takes very little nourishment. May 20. Refuses nourishment, and is failing rapidly.

22 Is very weak and dull, and still failing rapidly. Expired at 8.30 P.M.

Died

Personal and Medical History of

Personal and Medical History of Mathias Cikanck

Whole No. 3819

Residence, St. Paul. Minn

Became resident of State 1881. of County 1881.

Date Admission, 15th May 1901.

Admitted by Dr. C. L. Chapple hour, 7 15 PM

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

Sex, Male Age, 65

Civil Condition, married

Children, Eleven Age Youngest Child, —

Occupation, Laborer

Degree Education, moderately educated

Profession of Religion, Catholic

Habits, Dont know as to intemperance

Nativity, Bohemia. Parents also born there

Physicians Committing, A. Shumacek & E. W. McCord

Correspondents, Mrs M. J. Cikanck (wife) 691 Armstrong St. St Paul

No. for Year, 182

Insane Relatives, Dont Know

Cause Exciting, Epilepsy

Cause Predisposing,

Form, Epileptic Dementia

Accompanying Bodily Disorder, Epilepsy for 7 years.

Suicidal or not, Not; but will injure others

Date of this Attack, about 1 week ago

Duration, about 1 week

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, 65.

Time of Leaving, August 3 - 1901

Time in Hospital, 2 Mos. 19 Ds

Result, Recovered: Discharged Aug 22/01

Examination on Admission by Dr. E. J. Warnock *Date of* May 16/1901.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, poor

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, poor

Special Subjects, —

Own Mental State, —

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

DELUSIONS, Systematized, regards Transitory, Money

Special Subjects, and his family -

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, —

Paternal Relatives, Nothing known

Mother, "

Maternal Relatives, "

Brothers and Sisters, Live in Bohemia

Children 11. are sick in hospital (especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).

20 years ago received injury over frontal bone causing depression: Epilepsy 7 years ago.

HABITS, Drinking and Smoking, Drinks to excess. —

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches.

OCCUPATION, Healthy or not, Laborer

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

No

Sleep, poor Appetite, poor Bowels, Constipated

Personal and Medical History of Mathias Cikanck.

Mathias Cikanck
written at time of examination

MENTAL CHARACTERISTICS.

USUAL WEIGHT, NUTRITION, —

WOUNDS, Abnormalities, old scar over frontal bone; recent scar over left parietal Condition of Skin, dark reddish

TONGUE, Coatings, Promptness of Movement, somewhat coated - Sluggish -

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

SIGHT, wears glasses

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

HEARING, Impaired

COORDINATION, Arms, normal Legs, — Grasp, —

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

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,
Hardened

LUNGS,
Chest Symmetry: Sym
Percussion: 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. 1021 Reaction, Strongly acid Color and Appearance, Yellow - clear

Albumen, (Heat) No. (Nitric acid) No. Sugar, (Fehlings Sol.) No (Diazo) No. -

Casts and Crystals,

Passed 6 - 22 - 1901. Examined 6 - 25 - 1901

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, irregular

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

The patient is somewhat confused; easily irritated & thinks people are trying to get the best of him - Says his family tried to get his money from him". Has had Epilepsy for seven years, over which he has worried a great deal - Twenty years ago, received injury on head, caused by falling out of buggy - Present condition due to Epileptic condition, with senility.

Personal and Medical History of Mathias Cikanck

Whole No. 5819

Residence, St. Paul. Minn

Became resident of State 1881. of County 1881.

Date Admission, 15th May 1901.

Admitted by Dr. C. L. Chapple hour, 7 15 P.M.

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

Sex, Male Age, 65

Civil Condition, married

Children, Eleven Age Youngest Child, ✓

Occupation, Laborer

Degree Education, moderately educated

Profession of Religion, Catholic

Habits, Dont know as to intemperance

Nativity, Bohemia. Parents also born there.

Physicians Committing, A. Shimonek by E. W. McCord

Correspondents, Mrs M. J. Cikanck (wife)
691 Armstrong St. St Paul

[illegible]

[illegible]hoid fever, ✓

Cause Exciting, Epilepsy

Cause Predisposing,

Form, Epileptic Dementia

Accompanying Bodily Disorder, Epilepsy for 7 years.

Suicidal or not, not; but will injure others

Date of this Attack, about 1 week ago

Duration, about 1 week

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, 65.

Time of Leaving, August 3 - 1901

Time in Hospital, 2 Mos. 19 Ds

Result, Recovered: Discharged Nov 22/01

Examination on Admission by Dr. E. J. Wanous *Date of* May 16/1901.

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, poor

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects, poor

Special Subjects, ✓

Own Mental State, ✓

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

DELUSIONS, Systematized, regarding Transitory, Money

Special Subjects, and his family -

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father, —

Paternal Relatives, nothing known

Mother, "

Maternal Relatives, "

Brothers and Sisters, 1 2 Live in Bohemia

Children 11. one sick in hospital

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

20 years ago received injury over frontal bone causing depression: Epilepsy 7 years ago.

HABITS, Drinking and Smoking, Drinks to excess. —

HEADACHES, VERTIGO, OR CONVULSIONS, headaches.

OCCUPATION, Healthy or not, Laborer

Detail Date, Duration, and Character of Previous Attack, if any,
No

Sleep, poor Appetite, poor Bowels, Constipated

Personal and Medical History of Mathias Cikanck.

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 in PRESENT WEIGHT, 138½ lbs USUAL WEIGHT, NUTRITION, ✓

WOUNDS, Abnormalities, old scar over frontal bone; recent scar over left parietal Condition of Skin, dark: reddish

TONGUE, Coatings, Promptness of Movement, somewhat coated - Sluggish -

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

SIGHT, wears glasses

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

HEARING, Impaired

COORDINATION, Arms, normal Legs, — Grasp, —

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

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,
Hardened

LUNGS,
Chest Symmetry: 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. 1021 Reaction, strongly acid Color and Appearance, yellow - clear

Albumen, (Heat) No: (Nitric acid) No. Sugar, (Fehlings Sol.) No: (Diazo) No. -

Casts and Crystals,

Passed 6 - 24 - 1901. Examined 6 - 25 - 1901

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, irregular

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

The patient is somewhat confused; easily irritated & thinks people are trying to get the best of him - says "his family tried to get his money from him". Has had epilepsy for seven years, over which he has worried a great deal - Twenty years ago, received injury on head, caused by falling out of buggy - Present condition due to Epileptic condition, with senility.

Personal and Medical History of Mathias Cikarick.

1901

This patient was brought here by Deputy Emanuel Johnson, in fair physical condition with the following history of case. Don't know as to Consanguinity nor heredity. This is 1st Attack: first symptoms manifested at his home, in St Paul, about one week ago, in trying to injure his wife and son. Disease seems increasing: variable with rational interval, but these are not regular. Derangement now shown on the subject of money. Is disposed to injure others, but not suicidal. No filthy or destructive habits. No previous peculiarities noted. As to any history of intemperance dont know. He has been Epileptic for seven years. Has not been restrained or confined. The supposed cause of the disease is Epilepsy: treatment, none. On personal examination, he complains of headache and pains in the Extremities.

May 25 On admission, was put on B.3 (G.H.N. R/ft. Complexion dark: hair gray: eyes blue: condition of skin fair; scars, one on forehead: long scar on top of head: scar on back of right hand: varicose veins: bruises: one on right temple: bruise on left side: 2 small scars on lower part of back. Is dirty. Teeth: 2 gone, lower left: 2, lower right: 1 upper right. Behavior good. Was " " Examined by John Howe & Harry Poapst). — Received Millard: Given bath & put to bed
28 Is stubborn & ill-natured: is untidy: Indifferent to surroundings. May 28. No change
June 1 in patient to report. Expression depressed & manifests delusions. June 1. Wt 151#
30 No apparent change during month. Quiet & well-behaved: talks rationally in his own language:
July 31 apparently, but little mental impairment. July 31. Transferred to B.2. July 31. Same as noted above:
Aug 1 Does nothing, but is very quiet & well-behaved: appears fairly intelligent. Habits clean & tidy. -
3 Was taken home by relative.

Discharged

Personal and Medical History of

Personal and Medical History of *Lucius Anderson*

Whole No. 5821.

Residence, St Paul, Minn

Because resident of State: born here: of County: —

Date Admission, 16th May 1901.

Admitted by Dr. E. J. Wanous hour, 7.30 PM

How Sent, Examined. H. Bazille, Jos. P. Kennedy Co

Sex, male Age, 21

Civil Condition, single

Children, — Age Youngest Child, —

Occupation, Clerk

Degree Education, 2 years of High School

Profession of Religion, Episcopalian -

Habits, No history of intemperance

Nativity, Minnesota; father's Michigan (Cat Bureau); mother's, new Wisconsin ave

Physicians Committing, C. H. Gibbon and Jas. C. Markoe

Correspondents, John. H. Anderson (father) 32 Buckingham Flat St Paul

No. for Year, 184.

Insane Relatives, None

Cause Exciting, unknown

Cause Predisposing, previous attack

Form, simple Insania

Accompanying Bodily Disorder, results of masturbation -

Suicidal or not, Not: but will injure others -

Date of this Attack, About 11th May 1901.

Duration, 5 Days

No. of Attack, 2nd

No. of Admission, 1st here (was at City Hospital)

Age First Attack, 19+

Time of Leaving, May 24 - 1902

Time in Hospital, 1 yr - no 8 ds

Result, Recovered — Discharged Sept May 24/02

Examination on Admission by Dr. E. J. Wanous *Date of* May 19/1901

Dr Lang. 655 Bedford Ave. Brooklyn N.Y.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Quick

MEMORY, Past Events, Good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

rather illusive

REASONING POWER, Ordinary Subjects, fair

Special Subjects, —

Own Mental State, —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted

DELUSIONS, Systematized, No Transitory, —

Special Subjects, —

HALLUCINATIONS, Yes, of "hearing"

ILLUSIONS, —

SUMMARY,

* Mania without Delusions

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, Sudden

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

Father, Living - well

Paternal Relatives, no history of insanity

Mother, Living - well

Maternal Relatives, no history of insanity

Brothers and Sisters, Well

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

scarlet fever, at age of 6 years.

HABITS, Drinking and Smoking, not to excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Clerk in G. P. Office

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

June 1900: spell lasting 25 Days.

Sleep, good Appetite, fair Bowels, Constipated

Personal and Medical History of *Lucius Anderson*

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, No Condition of Skin, anaemic

TONGUE, Coatings, Promptness of Movement, Coated

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

SIGHT, Normal

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

HEARING, Good

COORDINATION, Arms, Normal Legs, Normal Grasp,

TREMORS, Hands, No Tongue, — Facial Muscles, — General,

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, — Hesitating, Yes Slow, Yes

FACIAL EXPRESSION, Sensibility, ✓

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES, Normal

LUNGS, Chest symmetry: Sym Expansion: Good Breath Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Normal

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

The patient seems much excited & agitated. Condition is one of simple mania due to nervous exhaustion & worry about himself. Had a "spell" like this, last Spring, when he was confined to the City Hospital for a week.

Personal and Medical History of *Lucius Anderson*

1901

This patient was brought here by Deputy Johnson attended by Geo. Kuger, in fair physical condition and with following history of case. There is no history of consanguinity nor heredity. This is not 1st attack: one occurred about 18 months ago, when he was about one month at City Hospital. First symptoms of this attack manifested about the 11th of May 1901, by acute maniacal delusions. Disease seems increasing; variable & with rational intervals but these not regular. Derangement now shown by excessive excitability. Is disposed to injure others but not suicidal: no filthy or destructive habits. Is addicted to masturbation. No history of intemperance, nor of any severe disease &c or head-injury. He has been restrained or confined to City Hospital for one month, a year ago. Cause of the disease is unknown. Treatment has been detention in hospital and hygenic treatment — on personal Examination, shows Excessive excitability. ——— ——

May 16 On admission, was put on T.W. (G.H.N. R'pt. Hair brown: eyes brown: condition of skin good: small mole on cheek: Is clean: Teeth: one gone, left upper: one gone, right upper: one, right lower. Behavior fairly good). — Received onward: given bath & put to bed.
17/18 extremely confused & excited. May 17. Noisy, all night. May 18. Became violent: very restless.
20/23/24 May 20. given hot baths — May 23. Patient seems improved. May 24. Given clothes & got up. Seems very much improved, mentally: has quieted down. Takes an interest in his
June 1/9 surroundings. June 1. Wt 161# June 9. visited by father. July 19. Went out Camping
July 19/31 at Oronoco. July 31. Still out at Camp. Is making steady improvement.
Aug 10 Is noted as being in fair physical condition: quite rational, mentally, at present.
27 has parole. Aug 27. Returned from Camp. (To T.W.). Sep 4. Went out to work,
Sep 4/10 with a farmer, in the neighborhood — Sep 10. Returned to Hospital & to T.W.
Oct 13 Visited by his father. Jany 31/02. Has been doing a good deal, musically,
1902 Jany 31 about the House: has parole & seems quite thoroughly recovered.
Feb. 1/02 Wt. 159# Patient is quite healthy; appears quite rational at present. Is giving music lessons in town.
May 24/02 Patient is today discharged from Hospital and starts to working, giving music lessons.

Personal and Medical History of

Personal and Medical History of Patrick Murphy

Whole No. 5825. Resident of State —

Residence, Unknown: Resident of State? alien: Of County? alien

Date Admission, 22nd May 1901

Admitted by W. L. L. Chapple hour, 7 30 P.M.

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

Sex, Male Age, 25 yrs

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession of Religion, Catholic

Habits, Do not Know

Nativity, Ireland: Parents also born there

Physicians Committing, C. Eugene Riggs & E. A. Borchardt

Correspondents, none given in papers.

No. for Year, 188.

Insane Relatives, Do not Know

Cause Exciting, Unknown

Cause Predisposing, not stated

Form, agitated Melancholia

Accompanying Bodily Disorder, Do not Know

Suicidal or not, very suicidal

Date of this Attack, Do not Know

Duration, not known -

No. of Attack, Unknown

No. of Admission, 1st. (at St Joseph's Hosp. 2 wks).

Age First Attack, not known

Time of Leaving, July 6 — 1901

Time in Hospital, 1 Mo. 14 Ds

Result, Recovered: Discharged 11/30/1901

Taken to relative in Montana by State-Agent Gates. O.K.

Examination on Admission by Dr. E. J. Wanous *Date of* May 23/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events,

Recent Events, Impaired Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State, Appreciates condition

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

DELUSIONS, Systematized, of persecution Transitory,

Special Subjects, ✓

HALLUCINATIONS, of hearing & seeing

ILLUSIONS,

SUMMARY,
Attempted Suicide

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Dead:

Paternal Relatives, no insanity:

Mother, Living

Maternal Relatives, no insanity

Brothers and Sisters, 4 / 1 Brother, Insane

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Kicked by horse: no depression
La Grippe, last winter

HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Farming

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

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of Patrick Murphy

MADE INSANE TO BE ROBBED

Pioneer Press June 9/1901

KNOCKOUT DROPS SEND A MAN TO ROCHESTER

Patrick Murphy, Going From Ireland to Butte, Remembers Nothing After One Drink in a St. Paul Saloon.

Down at the Rochester insane hospital the doctors are trying to bring back light to the mind of Patrick Murphy, darkened a month ago in a St. Paul saloon by knockout drops. And State Prison Agent Gates says that Murphy is the third man that knockout drops have sent to the insane hospital.

About a month ago the police found a dazed man wandering about the streets. He was not able to tell anything about himself, and no one appeared that knew him or anything about him. So he was taken to the probate court and sent to Rochester.

He improved somewhat there, and in rational periods he told parts of his story that came back to him. He was Patrick Murphy, he said, going from his native Ireland to Butte, Mont. Between trains he was looking about the streets, when a friendly man asked him to have a drink. He took one drink of whisky, and that was the last he remembered.

Murphy is improving at the hospital, and the doctors hope that in time his reason will be restored.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, fair

es, Scar over trachea, caused by sharp instrument Condition of Skin, clear

omptness of Movement, slightly coated —

Equal Size, large Response to Light, normal Accommodation, normal

Distinct

int, Arcus Senilis, or other troubles, —

Good

ns, Normal Legs, normal Grasp, other tests, normal

Coarse Tongue, " Facial Muscles, General,

, Sluggish Other Reflexes,

tred, Hesitating, Yes Slow, Yes

N, Sensibility, —

Normal

Normal "

d

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,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia:

BOWELS, Present Condition, Constipated.

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

The patient seems depressed and confused: says "a man followed him from New York, and cut his throat: that he could see him standing by his bed, on several occasions": also "hears people talking against him": "thinks he has not been right since he left New York." —

Personal and Medical History of Patrick Murphy

Whole No. 5825. Resident of State —

Residence, Unknown: Resident of State? Alien: of County? alien

Date Admission, 22nd May 1901

Admitted by D. C. L. Chapelle hour, 7:30 P.M.

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

Sex, Male Age, 25 yrs

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession of Religion, Catholic

Habits, Do not know

Nativity, Ireland: Parents also born there

Physicians Committing, C. Eugene Riggs & E. A. Kockert

Correspondents, none given in papers.

No. for Year, 188.

Insane Relatives, Do not know

Cause Exciting, Unknown

Cause Predisposing, not

Form, agitated Dem

Accompanying Bodily Disord

Suicidal or not, ?

Date of this Attack,

Duration,

No. of Attack,

No. of Admiss

Age First A

Time of

Time

Result,

Taken to relative

Agent Gates.

D 11/30/1901

Examination on Admission by Dr. E. J. Warnow Date of May 23/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events,

Recent Events, Impaired Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State, Appreciates Condition

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

DELUSIONS, Systematized, of persecution Transitory,

Special Subjects, ✓

HALLUCINATIONS, of hearing & seeing

ILLUSIONS,

SUMMARY,
Attempted Suicide

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Dead:

Paternal Relatives, no insanity:

Mother, Living

Maternal Relatives, no insanity

Brothers and Sisters, 4 2 * 1 Brother, insane

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Kicked by horse: no depression
La Grippe last winter

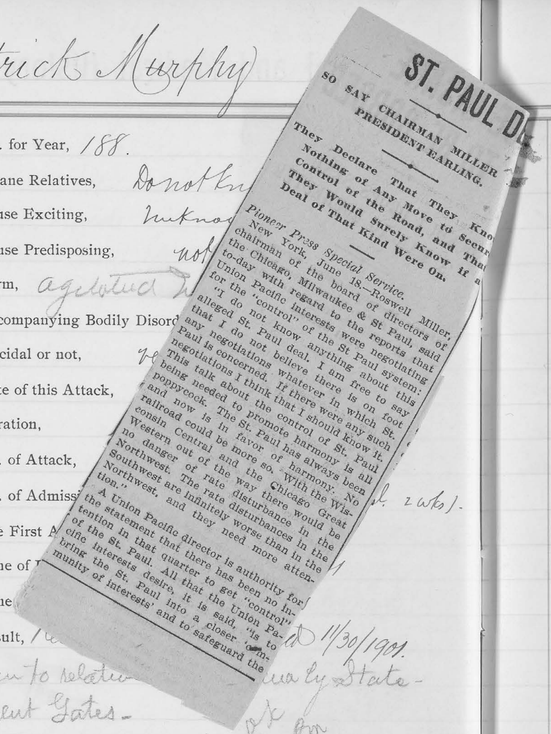
HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Farming

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

Sleep, poor Appetite, poor Bowels, irregular



ST. PAUL DE

SO SAY CHAIRMAN MILLER PRESIDENT EARLING.

They Declare That They Know Nothing of Any Move to Secure Control of the Road, and That They Would Surely Know If a Deal of That Kind Were On.

Pioneer Press Special Service.
New York, June 18.—Roswell Miller, chairman of the board of directors of the Chicago, Milwaukee & St. Paul said to-day with regard to the reports that the Union Pacific interests were negotiating for the "control" of the St. Paul system: "I do not know of any such deal. I am free to say that I do not believe there is any foundation whatever in which St. Paul is concerned. If there were any such negotiations I think that I should know it. This talk about the control of St. Paul being needed to promote harmony is all bosh-cock. The St. Paul has always been in harmony. No railroad could be more so. With the Wisconsin Central and the Chicago & Northwestern out of the way there would be no danger of rate disturbances in the Northwest. The rate disturbances in the Southwest, and they need more attention."

A Union Pacific director is authority for the statement that there has been no intention in that quarter to get "control" of the St. Paul. All that is said, "is to bring the St. Paul into a closer community of interests and to safeguard the

Personal and Medical History of Patrick Murphy

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, Scar over trachea, caused by sharp instrument Condition of Skin, clear

TONGUE, Coatings, Promptness of Movement, slightly coated —

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

SIGHT, Indistinct

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

HEARING, Good

COORDINATION, Arms, normal Legs, normal Grasp, other tests, normal

TREMORS, Hands, Coarse Tongue, " Facial Muscles, General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Hesitating, Yes Slow, Yes

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat,

Murmurs, None noted

ARTERIES,
normal

LUNGS,
Chest Symmetry: Fair
Expansion: Fair
Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia:

BOWELS, Present Condition, Constipated.

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

The patient seems depressed and confused: says "a man followed him from New York, and cut his throat: that he could see him standing by his bed, on several occasions": also "hears people talking against him": "thinks he has not been right, since he left New York." —

Personal and Medical History of *Patrick Murphy.*

1901

This patient was brought here by Deputy Emanuel Johnson, in apparently quite good physical condition, and with following history of case. Very little seems to be known about him, as he is an alien: Residence unknown. Do not know as to consanguinity, when first symptoms of this attack were manifested, or in what way, as to any insane relatives, previous peculiarities, history of intemperance; as to any severe disease &c or head-injury. If 1st attack, is unknown. Disease seems increasing; not variable: no rational intervals. Derangement now shown by delusions of persecution. Patient is not disposed to injure others, but has attempted suicide; attempted to cut his throat: propensity now active. No filthy or destructive habits. He has been at St. Joseph's Hospital for 2 weeks. Cause of the disease unknown. Has had surgical treatment for throat. On personal examination, patient is suffering from delusions of persecution, hallucinations "of sight & hearing", with suicidal intent. ——— . ———

May 22 On admission, was put on T.W. (G.H.N. R/pt. Complexion fair: hair brown: eyes blue: Condition of skin good: large scar on throat: Is clean: Teeth: 3 gone in upper jaw and 3 gone, in lower jaw: Behavior good: Examined by W. F. Knutson). ——— . ———

" " Received on Ward: Given bath: seems somewhat demented, restless & delusional.

31 Has eruption on chest and arms. (Condition urticaria). June 3. Transferred to B3 East.

June 14/78 (14-Day record up). June 28. Seems entirely recovered, mentally. Quite rational.

Jul 16 Taken to relative in Montana, by State agent Gates. —

Discharged

Personal and Medical History of

Personal and Medical History of Andrew Knudson
al Knud Andersen

Whole No. 5828.
Residence, Dont Know
Date Admission, 27th May 1901.
Admitted by Dr. Arthur F. Kilbourne hour, 4 30 P.M.
How Sent, W. A. Eggleston, J of P. Steele County
Sex, Male Age, 49
Civil Condition, Single
Children, ✓ Age Youngest Child, ✓
Occupation, Laborer
Degree Education, Dont know
Profession of Religion, Dont know
Habits, very intemperate
Nativity, Dont know that of patient or of parents.
Physicians Committing, A.B. Stewart and Theo. L. Hatch
Correspondents, none given in papers

No. for Year, 191.
Insane Relatives, Dont know
Cause Exciting, Intemperance only cause known
Cause Predisposing, Intemperance & previous attacks
Form, ~~Not [illegible]~~
Accompanying Bodily Disorder, none mentioned
Suicidal or not, Dont know
Date of this Attack, Ten days ago
Duration, — Ten days —
No. of Attack, Dont know (probably several)
No. of Admission, 5th
Age First Attack, about 39.
Time of Leaving, May 28, 1901
Time in Hospital, One day
Result, Malingerer. (Disch'd. July 29/1901) at special Board meeting.

Examination on Admission by Dr. E. J. Wanous *Date of* May 28/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Clear
MEMORY, Past Events, Good
Recent Events, " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Correct
REASONING POWER, Ordinary Subjects, Good
Special Subjects, "
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, normal
DELUSIONS, Systematized, no Transitory,
Special Subjects,
HALLUCINATIONS, ✓
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden, Sudden
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead
Paternal Relatives, no insanity
Mother, Dead
Maternal Relatives, no Insanity
Brothers and Sisters, all well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations). No
Alcoholism
HABITS, Drinking and Smoking, to excess
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, Appetite, Bowels, poor, while Drinking

Personal and Medical History of Andrew Knudson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 in PRESENT WEIGHT, 150½ # USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, Scar on left elbow Condition of Skin, clear
TONGUE, Coatings, Promptness of Movement, Clear
PUPILS, Equality, equal Size, normal Response to Light, normal Accommodation, normal
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, ✓
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, other tests, normal
TREMORS, Hands, yes Tongue, " Facial Muscles, " General, "
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, — Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
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,

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

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

The patient, before coming here, feigned insanity, by muttering, acting delirious and talking incoherently on various subjects. On arriving at the Hospital he admitted he had been on a protracted spree & eluded the offices to get out of a work-house sentence, which he had received. He has accomplished this, on other occasions.

Personal and Medical History of Andrew Knudson

Personal and Medical History of

1901

This patient was brought here by Sheriff Chas. Mieger, in poor physical condition and with following history of case. Not known as to nativity, residence, consanguinity, heredity, no. of attack, suicidal propensity, previous peculiarities, if he has had any severe disease &c or head-injury. He has probably had several such attacks. First symptom of this attack manifested ten days ago, by mania: disease seems increasing; not variable: no rational intervals. Derangement now shown by continuous incoherency. Is disposed to injure others, and of filthy and destructive habits. Has been long addicted to intemperance: has been kept in Jail 10 Days. Intemperance the only cause known of the disease. Has been given quieting treatment. On personal examination, he is continuously incoherent and excited. Note. This is patient's 5th admission: was committed here twice, as an "Inebriate warrant". His previous records will be found in following Case Books: viz:

Has also been at St Peter Hospital	Vol	16	" 209	No 2691
Has also been Committed as "Knud Anderson"	"	20	" 129	" 3118
Case diagnosed last time as "Chr. Alcoholic Insanity"	"	22	" 357	" 4136
	"	45	" 377	" 5378

May 27 On admission, was put on B³ (G.A.R. Ward. Complexion dark: Hair brown: eyes brown Condition of skin fair: scars on left arm; is dirty: teeth all gone: behavior good: Was examined by Harry Peasley). — Received in ward: given bath & put to bed — " 28 Patient complains of having had money taken away from him, before coming here — On examination, is found to be a malingerer & was returned to Sheriff to-day discharged

Personal and Medical History of George. G. Hatfield

Whole No. 5830.
Residence, Forest. Minn.

Date Admission, 28th May 1901.
Admitted by Dr. E. J. Manous hour, 4 00 P.M.
How Sent, James Hunter, Jail. Rice County
Sex, Male Age, 25 Years
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Comm. school.
Profession of Religion, None: Not a Churchmember
Habits, No history of intemperance
Nativity, Minnesota; Father: Indiana; Mother: Canada.
Physicians Committing, E.C. Fleshner and J.S. Seeley
Correspondents, None given in papers

No. for Year, 193.
Insane Relatives, None
Cause Exciting, was badly frightened
Cause Predisposing, "chronic"
Form, adolescent Dementia
Accompanying Bodily Disorder, Epilepsy ?
Suicidal or not, Not attempted: (but he might: Dr. Seely).
Date of this Attack, about 2 yrs ago.
Duration, — about 2 years —
No. of Attack, 1st. (Duration 2 years) —
No. of Admission, 1st.
Age First Attack, 23.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. J. Manous *Date of* May 29/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Sluggish
MEMORY, Past Events, Fair
Recent Events, Fair Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull
REASONING POWER, Ordinary Subjects, fair
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Depressed
DELUSIONS, Systematized, Transitory, Yes
Special Subjects,
HALLUCINATIONS, —
ILLUSIONS, —
SUMMARY, Thinks everything has gone wrong with him.

HISTORICAL.

LENGTH INVASION, 2 years
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living — well
Paternal Relatives, No Insanity
Mother, Living — well
Maternal Relatives, no Insanity
Brothers and Sisters, all well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
2 years ago Typhoid: Masturbator
kicked in forehead, by horse.
HABITS, Drinking and Smoking, No
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Farmer
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, fair Appetite, fair Bowels, regular

Personal and Medical History of George. G. Hatfield

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft 3/4 in PRESENT WEIGHT, 189½ lb USUAL WEIGHT, NUTRITION, Fair
WOUNDS, Abnormalities, No Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, Slow: Coated
PUPILS, Equality, equal Size, normal Response to Light, Slow Accommodation, Slow
SIGHT, Wears Glasses
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, finger & nose eyes shut, readily: standing on one foot, steady: Standing eyes shut unsteady
TREMORS, Hands, Coarse Tongue, — Facial Muscles, — General,
PATELLAR REFLEX, Normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow, Yes
FACIAL EXPRESSION, Sensibility, Normal
HEART, Regularity, Irritable
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES, Normal
LUNGS,
Chest symmetry: Sym
Fremitus: Good
Heart 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. 1004 Reaction, acid Color and Appearance, Transparent clear
Albumen, (Heat) No: (nitric acid) No. Sugar, (Fehlings Sol) No: (Diazo) No. —
Casts and Crystals,
Passed 6-24-1901. Examined 6-25-1901.
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, fair.
BOWELS, Present Condition, Constipated

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

The patient seems somewhat confused & depressed: "Thinks everyone has gone backonhim". Has not been well, since he had Typhoid, 2 years ago. Had some trouble regarding a horse, at home. Thinks people accuse him of stealing it." — Physically in good condition.

Personal and Medical History of George G. Hatfield

1901

This patient was brought here by G. R. Moshier, attended by J. I. Hatfield in fair physical condition, and with following history of case. There is no history of consanguinity nor heredity. This is 1st attack; duration two years: was not sent to hospital: the treatment has not benefitted him. First symptoms of this attack manifested about 2 years ago; got rattled easily: excited: "Epilepsy ?. Disease appears increasing; variable and with rational intervals: but there is no regularity: sometimes better and worse. Derangement now shown in that "he thinks he is not used right, at home": "thinks his parents are working against him". Patient is not disposed to injure others; has not attempted suicide: (but he might: Dr Seeley): no filthy or destructive habits.— No previous peculiarities noted: no history of intemperance: no severe disease &c or head-injury: was, at first, badly frightened, and had the first convulsion then; in Northfield a year ago, last fall. He has not been restrained or confined. The frightening was the cause of the disease; he was nervous and weak, at the time: result of Typhoid fever. Dr Philips of Northfield treated him. On personal examination, he cant answer intelligently, appearance of countenance, and general actions, nervous conditions &c.

May 28 On admission, was put on B3 (G. H. N. R'ft: Complexion light: hair brown: eyes blue: condition of skin fair: small scar over left eye: 2 small scars on left knee: eruptions on body: is clean: Teeth: has one on upper left: 2 out on lower left: 2 out, lower right.

" " Behavior good: examined by Harry Poapst).— Received on Ward: given bath:—

31 seems confused & delusional. May 31. Worrying & crying — "Wants to go home".—

June 8/10 Attempted to elope. June 10 (14-day record up). No special change in patient's condition

24 Again attempted to elope. July 13. Visited by friend. July 31. No change noticeable in his condition. Still somewhat confused, & seems depressed, at times.

July 31

Aug 1 Wt 172#. Jany 1/1902. Wt 197#. Jany 31. Has been rather restless: tries to elope: has "crying spells"—

1902 Jany 31 Is rather dull & bewildered: (has been visited — nov 9 — by friend) — Feby 1/02. Wt 199 lbs.—

Mar 30 Listless, indifferent & irrational. May 1. 206#. Jany 1/03 203#. Jany 31. Has

1903 Jany 31 remained, steadily, inactive & indifferent. Rather demented.

Personal and Medical History of

Personal and Medical History of John Doe #7

who's true name is James Johnson or James Thompson #2

Whole No. 5832.

Residence, Unknown

President of state, is unknown

Date Admission, 29th May 1901.

Admitted by Dr E. J. Wanous hour, 7:30 P.M.

How Sent, Edmund W. Bazille, Jr. Ramsey County

Sex, Male Age, About 35

Civil Condition, unknown

Children, — Age Youngest Child, —

Occupation, Laborer

Degree Education, unknown

Profession of Religion, unknown

Habits, unknown

Nativity, Unknown: that of parents, unknown.

Physicians Committing, Daniel Pabl & Arthur Sweeney

Correspondents, None given in papers

No. for Year, 195.

Insane Relatives, unknown

Cause Exciting, unknown

Cause Predisposing, unknown

Form, Alcoholic Dementia.

Accompanying Bodily Disorder, None mentioned

Suicidal or not, Unknown

Date of this Attack, not stated

Duration, not stated

No. of Attack, unknown

No. of Admission, 1st (has been at Detention Hospl since May 24-1901)

Age First Attack, not known

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. J. Wanous *Date of* May 30/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Sluggish

MEMORY, Past Events,

Recent Events, will not talk 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, of hearing

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father,

Paternal Relatives, Not obtainable

Mother,

Maternal Relatives,

Brothers and Sisters,

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

No

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Laborer

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

Sleep, Appetite, Poor Bowels,

Personal and Medical History of John Doe #7

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 5½ PRESENT WEIGHT, 155# USUAL WEIGHT, NUTRITION, Fair

WOUNDS, Abnormalities, No Condition of Skin, Normal

TONGUE, Coatings, Promptness of Movement, Clear

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

SIGHT, Good

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

HEARING, Good

COORDINATION, Arms, Normal Legs, Normal Grasp, Otis test, normal

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

PATELLAR REFLEX, — Other Reflexes,

ARTICULATION, Slurred, — Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES, Normal

LUNGS, Chest symmetry: Sym Expansion: Normal 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,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Fair

BOWELS, Present Condition, Irregular

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

The patient refuses to talk: seems rather dull & fearful, as though afraid of people about him: frequently found listening, as though controlled by voices. When persuaded to answer question, will do so only in a whisper. Physical condition good.

Personal and Medical History of John Doe #7

1901

This patient was brought here by Deputy Johnson, in fair physical condition, and with following history of case. As to nativity of patient and parents, residence, if resident of State; religious education, as to consanguinity; no. of attack: if the disease be increasing, decreasing or stationary, if variable or rational intervals; if disposed to injure others or suicidal: as to heredity: any previous peculiarities: history of intemperance; any severe disease &c or head-injury; all is unknown. Patient was found wandering round, by Police Officer: said "he was dead" - Derangement now shown in that he says "he is dead and refuses to talk & answer questions. No filthy or destructive habits. Patient has been at "Detention Hospital" since May 24/1901. Cause of the disease is unknown: treatment, none: On personal examination, he is apathetic, taciturn, refuses to answer questions. Note. Patient was, on 24th May 1901, committed to the "Detention State Hospital", and is now sent here by Certificate, only endorsed on warrant, and signed by proper authorities. —

May 29 On admission, was put on B3 (G.H.N. Rpt. Complexion sandy: hair brown: eyes brown: condition of skin good: has a long scar on back: a few on legs: one on right arm: is clean: Teeth: 5 gone, right upper: 4, left upper: 2, right lower: 2, left upper jaw: Is stubborn: " " Examined by Howe & Poapst.). — Received On ward: given bath & put to bed.

30 Is very stubborn & contrary at times. June. Requested nurse to open door: endeavored to break the door down: June 4. Eloped from crowd. June 5. Was returned.

June 2/4 8-10/11 Again attempted to Elope. June 11. Is very sullen and will not talk. July 31. No special change to note. Aug 1. Wt 142½: Nov 1. Wt 141#. Nov 21. To Dr: Jany 8/02. Transferred to TW: has sore ear: is extremely stubborn & has to be carried to meals: (kept in protection - sheet, to prevent removal of dressing). Jany 19. Up on ward. Jany 31. No change mentally: has been extremely stubborn, sullen & pugnacious: has also received numerous bruises in struggles with patients & nurses, bumping head &c: habits dirty.

July 31. 1902 Jany 8 19 31

Feb. 1 Wt. 139# Feb 3. Up on ward & dressed; kept in bay; Feb. 18 Trans. to B'; continues stubborn: at times talks quite well; at others stupid; restless destructive at night; troublesome to other patients; Feb. 19. Received cut on head, in fight with another patient; 4 stitches taken. Feb. 25 To Infirmary; still very troublesome & violent to patients, constantly getting himself bruised; put in muffs. June 12 Fairly quiet; but somewhat filthy in habits. Transfered to B'. July 9 Transferred to Annex. Aug 1. Wt. 154#.

1903 Jan. 1903 Transferred to Inf. for Erysipelas of face.

Jan 31 Still in bed; has been growing more demented of late; dirty in habits; stubborn; has to be lifted about; eats & sleeps well.

Personal and Medical History of

Personal and Medical History of Merlin Haggard

Whole No. 5833.
Residence, Rochester, Minn
Born in Minnesota: Born in Olmsted County
Date Admission, 31st May 1901.
Admitted by Dr. E. Z. Wanous hour, 11 15 am
How Sent, J. A. Leonard, Jo P. Olmsted County
Sex, Male Age, 19 years
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Employed in Clothing Factory.
Degree Education, Common School -
Profession of Religion, Christian Church
Habits, not intemperate
Nativity, Minnesota: father's, Minnesota: Mother's Indiana.
Physicians Committing, H. H. Witherstine & Chas. T. Granger
Correspondents, Mrs. Maggie Haggard
308 Beaver St. Rochester

No. for Year, 196.
Insane Relatives, none
Cause Exciting, probably masturbation
Cause Predisposing, " " & previous attacks.
Form, Rubescent Insanity
Accompanying Bodily Disorder, Some weakness -
Suicidal or not, not; but will injure others
Date of this Attack, 2 weeks ago
Duration, - 2 weeks -
No. of Attack, 4th (3 previous attacks) —
No. of Admission, 3rd
Age First Attack, 15 years
Time of Leaving, June 11 - 1901.
Time in Hospital, 11 Days (this time)
Result, Improved —
Discharged by Board of Control
Feby 5 - 1902

Examination on Admission by Dr. E. Z. Wanous *Date of* June 1/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused: Sluggish
MEMORY, Past Events, impaired
Recent Events, " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert
REASONING POWER, Ordinary Subjects, poor
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather indifferent
DELUSIONS, Systematized, Transitory, None obtainable
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY, Rather feeble-minded

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead
Paternal Relatives, Insane Cousin
Mother, Living
Maternal Relatives, No Insanity
Brothers and Sisters, 1 Sister
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Masturbator: — no
HABITS, Drinking and Smoking, yes
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Worked in factory
Detail Date, Duration, and Character of Previous Attack, if any,
2 attacks
Sleep, fair Appetite, fair Bowels, irregular

Personal and Medical History of Merlin Haggard

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, no Condition of Skin, quite anaemic
TONGUE, Coatings, Promptness of Movement, coated
PUPILS, Equality, equal Size, normal Response to Light, slow Accommodation, slow
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, no
HEARING, good
COORDINATION, Arms, normal Legs, normal Grasp, other tests, normal
TREMORS, Hands, Coarse Tongue, Facial Muscles, General,
PATELLAR REFLEX, sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, yes Slow, yes
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES,
normal
LUNGS,
Chest Symmetry: sym
Expansion: fair
Breath Sounds: normal

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

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

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

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

The patient seems somewhat confused & will only occasionally answer questions. Generally answers by saying "ask some one else". No definite delusions obtainable. Some answers would indicate he is delusional; also hallucinatory. He is of a feeble minded type; masturbates: condition probably due to heredity and enfeebled physical condition.

Personal and Medical History of Merlin Haggard

1901

This patient was brought here by Sheriff Vine, in fair physical condition, and with following history of case. There is no history of consanguinity nor heredity. This is not 1st attack: others occurred in August 1897 & one or two subsequent attacks: duration 3 weeks: has been at this (Rochester) State Hospital: treatment was beneficial: First symptoms of this attack were manifested 2 weeks ago; abusive and destructive and threatens injury to his family. Disease seems increasing: not variable: no rational intervals: Derangement now shown as stated above (9th question): Patient is disposed to injure others, but is not suicidal: is of filthy and destructive habits. No previous peculiarities noted: no history of intemperance, nor of any severe disease &c, or head-injury. Has been confined at Rochester State Hospital, period of 3 weeks. Cause of the disease is probably masturbation: has been given ordinary treatment for mania. On personal examination, none at this time. Note. This is patient's 3d admission here. He has been under care of trained nurse, from this Institution, previous to present Commitment. For previous record see 1st time, Vol 37 p 185 No 4856: here then 13 days: and 2nd time Vol 39 p 333 No 5080 - here then 10 months and 11 days. Was discharged, on both occasions, as recovered. ——— " ———

May 31 On admission, was put on I.W. (G.H.N. Rpt. Complexion light: hair dark: eyes blue: condition of skin good: vaccination marks on left arm: scar below left knee; scar above left knee and one over right knee: is clean: behavior good: Xd by W. F. Knutson)

" " Received on ward: given bath & put to bed. June 1. Complains of severe head ache & vomited. June 5. Very restless, all night. June 6. Visited by mother; and June 11 visited by mother, and taken home (under contract):

June 1/5/6 11

Discharged

Personal and Medical History of

Personal and Medical History of Ole. O. Oien

Whole No. 3835.
Residence, Freedom, Minn
Became resident of State of Minnesota 1869: of County 1869
Date Admission, 7th June 1901.
Admitted by Dr. C. L. Chapple hour, 10:45 am.
How Sent, Geo. A. Wilson, Jo. P. Waseca County.
Sex, Male Age, 64
Civil Condition, married
Children, four Age Youngest Child, —
Occupation, Farmer
Degree Education, Not educated
Profession of Religion, Lutheran
Habits, Not intemperate
Nativity, Norway: Parents also born there.
Physicians Committing, Dr. Covey & Dr. G. Blanchard
Correspondents, Mrs. Ingeborg Oien (wife) Owatonna, Minn (2 miles)

No. for Year, 198.
Insane Relatives, None
Cause Exciting, Second marriage
Cause Predisposing, Probably age
Form, Senile Dementia
Accompanying Bodily Disorder, (Large veins on legs)
Suicidal or not, Not
Date of this Attack, January 1st
Duration, Over 5 months
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, 63+
Time of Leaving, June 4th 1901
Time in Hospital, — 14 Days —
Result, Died: Senile Dementia.

Examination on Admission by Dr. E. J. Kanavel *Date of* June 8/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused; Sluggish
MEMORY, Past Events, Impaired
Recent Events, " Special Subjects, "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, Poor
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Much Depressed
DELUSIONS, Systematized, Transitory, None Obtainable
Special Subjects,
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden, Sudden
(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father,
Paternal Relatives, Not obtainable
Mother,
Maternal Relatives,
Brothers and Sisters,
(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
no
HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Farming.
Detail Date, Duration, and Character of Previous Attack, if any,
no
Sleep, Appetite, Bowels,
very poor

Personal and Medical History of Ole. O. Oien

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor
WOUNDS, Abnormalities, No Condition of Skin, sluggish
TONGUE, Coatings, Promptness of Movement, badly coated
PUPILS, Equality, Equal Size, normal Response to Light, slow Accommodation, slow
SIGHT, Impaired
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Impaired
COORDINATION, Arms, Normal Legs, normal Grasp, very unsteady, otherwise
TREMORS, Hands, Yes Tongue, " Facial Muscles, " General, "
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow, Yes
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Yes
Strength, Sounds, weak
Size, enlarged
Apex Beat, to left
Murmurs, None noted
ARTERIES,
Sclerotic
LUNGS,
Chest Symmetry: Symmetrical
Expansion: Poor
Breath Sounds: Emphysematous

CRANIAL MEASUREMENTS.

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

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

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, 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).

The patient is much depressed: will not talk: mind seems fixed: perhaps controlled by delusions. Refuses nourishment: sleep poor: physical condition poor.

Personal and Medical History of Ole. O. Oien

1901

This patient was brought here by Sheriff Hans Collins, attended by Bertina Orient, in poor physical condition with following history of case. There is no history of consanguinity nor insanity; previous peculiarities, intemperance, severe disease &c or head injury; this is first attack: first symptoms manifested January 1st, by melancholy periods, increasing. Disease appears to be increasing; variable with rational intervals: about twice a week, he is rational. Derangement now shown in that he sits for a day, refusing to speak: or eat, and cannot be influenced by anyone. Is not disposed to injure others, nor suicidal; no filthy or destructive habits. He has not been restrained or confined: He married, 2nd time, 7 years ago. Supposed cause of the disease is Second Marriage. Treatment, none. On personal examination, refuses to answer questions, & sits, usually, staring before him. He needs restraint and proper care. —

June 7 On admission, was put on T.W. (G.H.N. Dpt. Complexion fair: hair reddish gray; has mole on back; large veins on legs: vaccination mark on right arm: eruptions on body: bruises on back of left hand: is dirty. Teeth: in poor condition: a few gone & several old snags: behavior good) — Received on ward: given bath: refused nourishment.
" " fed mechanically: put on eggnog: Same. For past 8 days, has had to be fed: Is
10/10 failing physically: seems very weak. Same. Failed rapidly & died at 4th Br
21

Died.

Personal and Medical History of

Personal and Medical History of William Holland

Whole No. 5836.
Residence, Elba, Minn
Became resident of State of Minnesota 1871: Of County 1871
Date Admission, 7th June 1901
Admitted by Dr. E. Z. Wanous hour, 6 P.M.
How Sent, D. E. Vance, Jo P. Winona County.
Sex, Male Age, 30
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Farming
Degree Education, Common School
Profession of Religion, Roman Catholic
Habits, not intemperate
Nativity, Elba, Winona Co. Minn: parents born in Ireland
Physicians Committing, L. H. Munger & Edwin S. Muir
Correspondents, Pat. Holland (bro) St Charles, Minn

No. for Year, 199.
Insane Relatives,* none
Cause Exciting, unknown
Cause Predisposing, previous attacks
Form, Acc. mania
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not —
Date of this Attack, June 4th 1901.
Duration, 3 Days
No. of Attack, not 1st. Seemingly 3rd
No. of Admission, 3rd
Age First Attack, — 27 —
Time of Leaving, September 28 - 1901
Time in Hospital, 3 mos 21 ds
Result, Improved. —
Discharged by Board of Control April 14 — 1902

* previous commitment stated "father & mother" former hat insane - brother was also there -

Examination on Admission by Dr. E. Z. Wanous *Date of* June 8/1901

MENTAL CHARACTERISTICS.

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

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden, Sudden
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead: Phthisis
Paternal Relatives, Brother
Mother, Living: nervous
Maternal Relatives, Dont know
Brothers and Sisters, 4 5 1 bro & 1 sister dead: 1 bro. insane
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations). no
HABITS, Drinking and Smoking, yes
HEADACHES, VERTIGO, OR CONVULSIONS, no.
OCCUPATION, Healthy or not, Farming
Detail Date, Duration, and Character of Previous Attack, if any, 2 attacks
Sleep, poor Appetite, poor Bowels, constipated

Personal and Medical History of William Holland

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft 1 in PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poorly nourished
WOUNDS, Abnormalities, hydrocele, varicose veins of leg: several scars. Condition of Skin, sluggish
TONGUE, Coatings, Promptness of Movement, Clear: moist.
PUPILS, Equality, Equal Size, normal Response to Light, How Accommodation, How
SIGHT, normal
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, normal
COORDINATION, Arms, normal Legs, normal Grasp, other tests good
TREMORS, Hands, Tongue, Facial Muscles, General,
PATELLAR REFLEX, Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, irritable
Strength, Sounds, normal
Size, normal
Apex Beat, "
Murmurs, none noted
ARTERIES, full: compressible
LUNGS,
Chest symmetry: sym
Expansion: good
Breath sounds: normal

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

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

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

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

The patient is exalted, talkative & incoherent in speech; goes from one subject to another, before finishing sentence. "Going to the circus: — never will — that fine white horse: tell mother — forest fields & fires — we parted good friends — You are the youngest man — I am only sixteen &c". The patient is emaciated & in poor physical condition — Has a hydrocele, also bad varicose veins of leg: several old scars, following boils, on hip.

Personal and Medical History of William Holland

1901

This patient was brought here by Martin J. Luis, attended by Pat. Holland, in poor physical condition & with following history of case. No history of consanguinity nor of heredity (*Previous Commitment states "father & mother somewhat insane: brother was also here"). This is not 1st attack; seemingly the 3rd; others having occurred in 1896 and in 1898(?) Duration – 1896 – 5 mos: 1898 – 3 mos: when he was at this (*Rochester), hospital; result supposed cure. First symptoms of this attack manifested June 4th 1901: disease seems increasing: not variable: no rational intervals: Derangement now shown on all subjects: violent, at times; Is disposed to injure others, but not suicidal: no filthy or destructive habits; no previous peculiarities noticed: no history of intemperance, nor of any severe disease &c or head injury. Has not been restrained or confined, except as above stated. Cause of disease is unknown. He has not had treatment, since former Confinement. On personal examination, there is found disturbed circulation. *N.B. This is 3rd admission. Here 1st time from Oct 17/94 to Feby 22/95 – see Vol 29 p 73 No 3875. and 2nd time from July 16/97 to Oct 9/97 – see Vol 37 p 93 No 4816. Discharged, as improved, 1st time and as much improved, 2nd time; Diagnosis, in each case, Actute mania. ——

June 7 On admission, was put on B3. (G.H.N. R'ft. Complexion fair: hair light brown: eyes gray: Condition of skin good: slight abrasion on calf of right leg: 5 small scars on left hip: 4 small ones on right hip: bruises on right ankle: is clean: Teeth: one gone, upper right: 2 gone, upper left.
" " Behavior good: Examined by W. Case). – Received on ward: given bath: seems very
10 much confused & noisy: maniacal. June 10. Transferred to I.W. & put to bed there.
16/20 Given clothes & got up. June 20. Patient talks quite rationally: mental condition
25 much improved – (14 – Day record up). June 25. Transferred to B3 ——
July 1/31 Wt 161#. Patient is noisy, at times. July 31. Shows much improvement –
Aug 1/6 Wt 169#. Patient slightly maniacal: some noisy: health fairly good. Aug 6. Rather more excited
12 today: Aug 12. has been becoming rather more excitable: Transferred to C1. Is confused –
29/30 Has improved much, during past week: Is working. Aug 30. Transferred to B2.
Sep 28 Visited by relative & taken home: has been quite rational, during this present month.

Discharged

Personal and Medical History of

Personal and Medical History of Abram Bates

Whole No. 5837

Residence, Lenora, Minn
Resident of Fillmore County for 30 years past

Date Admission, 8th June 1901.

Admitted by Dr. E. J. Wanous hour, 6.30 PM

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

Sex, Male Age, 64.

Civil Condition, Married

Children, Three Age Youngest Child, —

Occupation, Farm Laborer

Degree Education, Can read & write

Profession of Religion, not a Church-member

Habits, not intemperate

Nativity, Canada: Parents also born there.

Physicians Committing, J. H. Phillips and Geo. A. Love

Correspondents, Mrs. A. Bates
(wife) Lenora Minn
Fillmore County

No. for Year, 200.

Insane Relatives, None

Cause Exciting, Dont Know

Cause Predisposing, probably age

Form, acute mania

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not

Date of this Attack, June 1st

Duration, — a week —

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 64.

Time of Leaving, July 19th 1901.

Time in Hospital, 1 mo 11 Ds

Result, Recovered: Discharged Nov 11/1901.

Examination on Admission by Dr. E. J. Wanous *Date of* June 9/1901

MENTAL CHARACTERISTICS.

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

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

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

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

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

DELUSIONS, Systematized, Transitory, Yes
Special Subjects,

HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, Sudden

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

Father, Dead: Brights Disease
Paternal Relatives, No Insanity
Mother, Dead
Maternal Relatives, No Insanity
Brothers and Sisters, 2 bro. Dead
Children 3

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
No

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Farmer

Detail Date, Duration, and Character of Previous Attack, if any,
No

Sleep, Poor Appetite, good Bowels, Irregular

Personal and Medical History of Abram Bates

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, — Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, Coated

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

SIGHT, Good

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

HEARING, good

COORDINATION, Arms, normal Legs, normal Grasp, —

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

PATELLAR REFLEX, — Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, normal

ARTERIES,
—

LUNGS,
Chest symmetry: Sym
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. 1021 Reaction, no Color and Appearance, yellow-dark smoky

Albumen, (Heat) No: (Nitric acid) No. Sugar, (Fehlings Sol) No: (Diazo) No.

Casts and Crystals,

Passed 6-24-1901. Examined 6-25-1901.

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).

The Patient is very maniacal and destructive: Condition came on suddenly. Has no definite delusions: seems quite weak, from exhaustion: must be restrained.

Personal and Medical History of Abram Bates

1901

This patient was brought here by E. L. Blexrud, attended by Michael Masterler, in poor physical condition & with following history of case. There is no history of consanguinity nor heredity, previous peculiarities, intemperance, severe disease &c or head injury. This is the 1st attack: first symptoms manifested June 1st: first noticed by extravagant purchases; is very violent and excitable. Disease seems increasing; not variable: no rational intervals. Derangement now shown in that he is very excitable and violent and talks incoherently. Is not disposed to injure others, nor suicidal; no filthy or destructive habits. He has not been restrained or confined. Dont know cause of the disease; treatment, none. On personal examination, he is excitable & incoherent. He is committed because his disease is of such a nature and in such a state, as to require care & treatment, while under legal restraint. It is dangerous to allow him to be at large. He is now & has been a resident of Fillmore County for last 30 years past. — " — " —

June 8 On admission, was put on T.W. (G.H.N.R.W. Complexion dark: hair gray: eyes blue: condition of skin fair: Is dirty: teeth poor: 5 gone in lower jaw: all gone, but one, in upper jaw: he is
" " inclined to be stubborn. Examined by W. F. Knutson). Received on ward: given bath.
21 put to bed. Is much confused & noisy all night. June 11. Transferred to B3 —
July 1/5 Wt 135#. Is much improved & wants to go home. July 5. Transferred to B2.
19 Eloped, while out with crowd. —

Discharged

Personal and Medical History of

Personal and Medical History of John Pollock

Whole No. 5838.

Residence, not known: claims Minnesota Resident of Minnesota for last 10 years past.

Date Admission, June 10th 1901.

Admitted by Dr. E. J. Wanous hour, 2 P.M.

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

Sex, Male Age, 58

Civil Condition, single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession of Religion, not a Church-member

Habits, Intemperate

Nativity, N. Carolina: Parents also born there. Minnesota

Physicians Committing, J. H. Phillips MD & Geo. A. Love

Correspondents, none given in papers

Note. Lists in Denver Colorado. 721 So. 10th St. (?)

No. for Year, 201.

Insane Relatives, none

Cause Exciting, Dont Know

Cause Predisposing, previous attacks

Form, ~~Acute~~ Mania a potu

Accompanying Bodily Disorder, (scalp fracture of skull)

Suicidal or not, Attempted Suicide by Cutting throat. propensity and active

Date of this Attack, not Stated; probably recent (?)

Duration, probably short. (?)

No. of Attack, not 1st (was here before)

No. of Admission, 2nd

Age First Attack, 52

Time of Leaving, September 23 - 1901.

Time in Hospital, 3 mos 13 Ds

Result, Recovered.

Discharged by Superintendent

Feby 7 - 1902

Examination on Admission by Dr. E. J. Wanous *Date of* June 11/1901

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,

Correct

REASONING POWER, Ordinary Subjects, poor

Special Subjects,

Own Mental State, Does not appreciate Condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted

DELUSIONS, Systematized, Transitory, of persecution, of poisoning

Special Subjects, thinks people want to murder him for money.

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, Sudden

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

Father, Dead

Paternal Relatives, No Insanity

Mother, Dead

Maternal Relatives, No Insanity

Brothers and Sisters, well

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

Injury to Skull: recent scar on throat from attempted suicide.

HABITS, Drinking and Smoking, Excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Farming

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

in '97

Sleep, Appetite, Bowels, Irregular

Personal and Medical History of John Pollock

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, two fingers on left hand amputated Condition of Skin, Quite normal

TONGUE, Coatings, Promptness of Movement, clear

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

SIGHT, ✓

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

HEARING, ✓

COORDINATION, Arms, Normal Legs, Normal Grasp, Patient will not do as asked.

TREMORS, Hands, Coarse Tongue, Facial Muscles, General,

PATELLAR REFLEX, Exaggerated Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest Symmetry: Sym

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. 1022 Reaction, strongly acid Color and Appearance, Yellow clear

Albumen, (Heat) No: (Nitric acid) No Sugar, Fehling's Solution No. Diazo —

Casts and Crystals,

Passed 7-1-1901 Examined 7-1-1901.

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Constipated

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

The patient is suffering from an attack of acute mania: has various delusions. Tried to commit suicide by cutting throat: was found wandering in the woods. Seems very much excited and fearful.

Personal and Medical History of John Pollock

1901

This patient was brought here by E. K. Blevins, attended by Mat Strom, in poor physical condition, and with following history of case. There is no history of consanguinity nor heredity. This is not 1st attack: he was at this (Rochester) Hospital before: (Patient states he was sent from Rochester to "Soldiers Home"). When first symptoms of this attack were manifested or in what way is not stated: disease seems stationary; variable with rational intervals, but periods recur at regular intervals, don't know. Derangement now shown in that he was found wandering around, with his throat cut, and wildly delirious: no disposition to injure others: has attempted suicide, by cutting throat & propensity is now active. No filthy or destructive habits. Don't know as to previous peculiarities: as to intemperance, patient says yes: but not parents: has had fracture of skull on right parietal region: has been confined, yes: claims to have been in Rochester, one month*. Don't know cause of the disease: don't know as to treatment. On personal examination, he has no memory at present; at other times, is wildly delirious. Is committed because it is dangerous to himself and others to have him at large: his disease is of such a nature and in such a state as to require aid and assistance while under legal restraint. He is now & has been a resident of Minnesota for last ten years past. —

*N.B. 3rd attack. (first was Nov 13/96): 2nd admission: was before from Dec 21/97 to Oct 9/97. and discharged April 28/98, recovered. See Vol 37. p 237 No 4880. — "

June 10 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair gray: eyes blue: condition of skin fair: "Tattoo" on right arm: "American Coat of arms": scars on throat: one on right shoulder and one on right side of back: one on right knee: 2 fingers off at 2nd joint on left hand: is dirty: teeth. 3 in upper jaw: 3 in lower jaw. " " Behavior good). — Received on ward: given bath & put to bed: Is suicidal. —

28 remains quietly in bed. Jumers. Dressed & up on ward. July 3. Wt 153# July 22. Transferred to A2. July 31. Quiet: seems much improved. Assists on the ward. —

July 31/ Aug 1/ Wt 176# — Aug 31. Is at present. Quite rational: helps with work on ward, & is of good

Sep 23 disposition. Sep 23. Went home: Has been, during last 2 months, quite rational, and in good physical state.

Discharged

Personal and Medical History of

Personal and Medical History of James H. Goggin

Whole No. 5839.

Residence, Washington Co. —
(was born in County)

Date Admission, June 10th 1901.

Admitted by Dr. E. J. Wanous hour, 7:30 P.M.

How Sent, Asst. J. Wilson, Jail. Washington Co.

Sex, Male Age, 36

Civil Condition, Married

Children, 3 Age Youngest Child, —

Occupation, Laborer

Degree Education, Common School

Profession of Religion, Not a Church-member

Habits, Patient uses liquor

Nativity, Stillwater, Minn. Parents born in Ireland

Physicians Committing, H. C. Voigt and J. G. Lauderen

Correspondents, None given in papers

No. for Year, 202.

Insane Relatives, unknown

Cause Exciting, not stated

Cause Predisposing, previous attack

Form, Alcoholic ~~Dementia~~

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not

Date of this Attack, This spring

Duration, about 2 months (?)

No. of Attack, Not 1st

No. of Admission, 2nd (Rochester Dec '99)

Age First Attack, 35

Time of Leaving, October 28 - 1901

Time in Hospital, 4 mos 18 ds

Result, Improved
Discharged by Board of Control
April 14 - 1902

Examination on Admission by Dr. E. J. Wanous *Date of* June 11/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Fair
Recent Events, Good Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

REASONING POWER, Ordinary Subjects, Fair
Special Subjects,
Own Mental State, appreciates Change

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

DELUSIONS, Systematized, Transitory,
Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

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

Father, Dead

Paternal Relatives, no history of insanity

Mother, Dead

Maternal Relatives, no history of insanity

Brothers and Sisters, 4 well — 3 Children
(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

Syphilis, 15 years ago: has erythematous rash at present time

HABITS, Drinking and Smoking, Excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Laborer

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

Dec '99 to Sept '00

Sleep, Good Appetite, Bowels, Irregular

Personal and Medical History of James H. Goggin

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 11in PRESENT WEIGHT, 164# USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, Scar below chin, also on back of left hand: right leg broken Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, Clear

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

SIGHT, Impaired

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Slight opacity of left cornea.

HEARING, Good

COORDINATION, Arms, Normal Legs, Normal Grasp, Finger to nose, eyes shut, readily: standing on one foot with unsteadiness: staggering, eyes shut, steady —

TREMORS, Hands, Coarse Tongue, " Facial Muscles, " General,

PATELLAR REFLEX, exaggerated Other Reflexes,

ARTICULATION, Slurred, Hesitating, Slow, Yes

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none

ARTERIES, full

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. 1023 Reaction, acid Color and Appearance, light yellow

Albumen, (Heat) No: (Nitric acid) No Sugar, (Fehling's Sol No (Diaze) No. — Cloudy

Casts and Crystals,

Passed 6/24/1901 — Examined 6-25-1901.

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Fair

BOWELS, Present Condition, Constipated

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

The patient was committed here Dec '99, in very much the same condition as this time: no delusions manifested: is somewhat depressed & silly in manner: seems nervous and anaemic. Gives history of syphilis, which is, perhaps, cause of present condition.

Physically, fairly well nourished: has had some family trouble: his wife left him, and he went on protracted spree.

Personal and Medical History of James H. Goggin

1901

This patient was brought here by E. F. Anderson attended by M. H. Barron, in fair physical condition, and with following history of case. As to consanguinity, not stated: as to heredity, unknown. This is not 1st attack: was in Rochester Hospital Dec '99: discharged Sep. 1900. First symptoms of this attack manifested this spring; 2 weeks after he began work in mill: disease seems increasing; if variable & with rational intervals, not stated. Derangement now shown by queer actions; queer talk. Has made general threats to injure others: not suicidal: no filthy or destructive habits: previously, there were erratic actions; entirely different from former ways: neglect work: queer actions: patient uses liquor; as to any severe disease &c or head-injury, nothing stated: has not been confined or restrained, save in hospital. Cause of the disease not stated: refuses medicine. On personal examination, nothing special, but evidence of neighbors and employer very strong: patient spoke of dizzy feelings, at time: dont know what is matter. N.B. 2nd admission: here before from Dec 30 - 1899 to March 13 - 1900: Discharged Sep 22/1900. Recovered: See Vol 45 p 121 No 5478.

Diagnosis: primary mental enfeeblement.

June 10 On admission, was put on B3 (G.H.N.R'pt: Complexion dark: hair dark brown: eyes gray: condition of skin fair: scars on back of left hand: is clean: Teeth: 3 gone, upper left: four
" " gone upper right: behavior good: examined by John Rode). — Received onward: Is somewhat talkative. Says "trouble has been with his family" — nothing specially notice-
28 -able regarding his condition. June 28. Transferred to A1. — July 8. Wt 160# — July 11. Was
July 11 transferred to A2. July 19. Went out camping at Oronoco. July 31. Still out at camp —
Sept 1 1901 Wt 174#. Talks quite rationally. Is in fair mental state. Has been out camping
Oct 28 at Oronoco, for a time: (returned now): Oct 28. Allowed to go home to day. has been cheerful and rational, since last note.

Discharged

Personal and Medical History of

Personal and Medical History of Augustus K. Barnum

Whole No. 5840.

Residence, St. Paul, Minn

Became resident of State 1857: of County 1857.

Date Admission, 12th June 1901.

Admitted by Dr. C. L. Chapple hour, 8th PM

How Sent, E. W. Baziele, Jos P. Ramsey County

Sex, Male Age, 52 Years

Civil Condition, Married

Children, Three Age Youngest Child, —

Occupation, Real Estate

Degree Education, College

Profession of Religion, Episcopal

Habits, Increasing tendency to intoxication

Nativity, Greensboro'. Ala; father's Baltimore. MD. mother's Gettysboro Pa.

Physicians Committing, E. J. Abbott and A. Wharton

Correspondents, James B. Hewitt (bro) St. Paul. Minn

No. for Year, 203.

Insane Relatives, None (father intemperate)

Cause Exciting, Hereditary

Cause Predisposing, Heredity

Form, ~~Mania~~ Mania Potu

Accompanying Bodily Disorder, None mentioned

Suicidal or not, - not -

Date of this Attack, Not stated

Duration, probably long.

No. of Attack, Not 1st (probably several)

No. of Admission, 1st

Age First Attack, About 22

Time of Leaving, 3rd October 1901

Time in Hospital, 3 mos 21 Ds.

Result, Recovered: Discharged Nov 22/1901.

Examination on Admission by Dr. E. Z. Wanous *Date of* June 13/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear

MEMORY, Past Events, Good

Recent Events, " Special Subjects, "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct

REASONING POWER, Ordinary Subjects, Good

Special Subjects, Good

Own Mental State, appreciates condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Normal

DELUSIONS, Systematized, No 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 alcoholic

Father, Dead: Yellow fever

Paternal Relatives, No history of Insanity

Mother, Dead: Bright's Disease

Maternal Relatives, No history of Insanity

Brothers and Sisters, 2 half brothers 3 children - all well - (especially Typhoid Fever, Sunstroke,

PROMINENT DISEASES, Head Injuries and Surgical Operations).

Hay fever

HABITS, Drinking and Smoking, To excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Real Estate

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

Periodic Spells of alcoholism

Sleep, poor Appetite, Good Bowels, good

Personal and Medical History of Augustus K. Barnum

PETITION IN BANKRUPTCY—Augustus Kirby Barnum, a St. Paul real estate man, yesterday filed a petition in bankruptcy in the United States district court. His liabilities are given at $12,363.15. No assets are disclosed.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, —— USUAL WEIGHT, NUTRITION, Good

WOUNDS, Abnormalities, No Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, Clear: prompt

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

SIGHT, wears glasses

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

HEARING, Good Finger to nose, eyes shut, readily: Standing on one foot, unsteady

COORDINATION, Arms, Normal Legs, Normal Grasp, Standing, eyes shut, unsteady

TREMORS, Hands, Coarse Tongue, " Facial Muscles, " General,

PATELLAR REFLEX, exaggerated Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest symmetry: Sym

Expansion: Good

Breath sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, regular

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

The patient has been a periodic drinker; also, is using a cocaine spray. Says "Spells for liquor come on him when he cannot satisfy the desire, until he drinks whiskey" - "periods last 2 or 3 days. Sometimes longer"

Physical condition good: Father was an alcoholic.

Personal and Medical History of Augustus K. Barnum

Whole No. 5840.

Residence, St. Paul, Minn

Became resident of State 1857: of County 1857.

Date Admission, 12th June 1901.

Admitted by Dr. C. L. Chapple hour, 8th PM

How Sent, E. W. Bazielle, Jo. P. Ramsey County

Sex, Male Age, 52 Years

Civil Condition, Married

Children, Three Age Youngest Child, —

Occupation, Real Estate

Degree Education, College

Profession of Religion, Episcopal

Habits, Increasing tendency to intoxication

Nativity, Greensboro'. Ala; father's Baltimore. MD. mother's Gettysboro Pa.

Physicians Committing, E. J. Abbott and A. Wharton

Correspondents, James B. Hewitt (Bro) St. Paul. Minn

No. for Year, 203.

Insane Relatives, None (father [illegible]

Cause Exciting, Hereditary

Cause Predisposing, Heredity

Form, ~~Monomania~~ Polu

Accompanying Bodily Disorder, None mentioned

Suicidal or not, - not -

Date of this Attack, Not stated

Duration, probably long.

No. of Attack, Not 1st (probably several)

No. of Admission, 1st

Age First Attack, About 22

Time of Leaving, 3rd October 1901

Time in Hospital, 3 mos 21 Ds.

Result, Recovered: Discharged Nov 22/1901.

original statement on the subject plied. Mr. Platt would not say he based his assertion. He said had not talked with Senator Qua time regarding the coal strike, an intention of conferring with hi ing acknowledgment of the ent and prolonged cheering of an as that fairly crowded the Baltimor

Examination on Admission by Dr. E. Z. Wanous *Date of* June 13/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear

MEMORY, Past Events, Good

Recent Events, " Special Subjects, "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct

REASONING POWER, Ordinary Subjects, Good

Special Subjects, Good

Own Mental State, appreciates condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Normal

DELUSIONS, Systematized, No 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 alcoholic

Father, Dead: Yellow fever

Paternal Relatives, No history of Insanity

Mother, Dead: Bright's Disease

Maternal Relatives, No history of Insanity

Brothers and Sisters, 2 half brothers 3 children - all well - (especially Typhoid Fever, Sunstroke,

PROMINENT DISEASES, Head Injuries and Surgical Operations).

Hay fever

HABITS, Drinking and Smoking, To excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Real Estate

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

Periodic Spells of alcoholism

Sleep, poor Appetite, Good Bowels, good

Personal and Medical History of Augustus K. Barnum

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, No Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, Clear: prompt

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

SIGHT, wears glasses

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

HEARING, Good Finger & nose, eyes shut, readily: Standing on one foot, unsteady

COORDINATION, Arms, Normal Legs, Normal Grasp, Standing, eyes shut, unsteady

TREMORS, Hands, Coarse Tongue, " Facial Muscles, " General,

PATELLAR REFLEX, exaggerated Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest symmetry: Sym

Expansion: Good

Breath sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, regular

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

The patient has been a periodic drinker; also, is using a cocaine spray. Days & Spells for liquor come on him when he cannot satisfy the desire, until he drinks whiskey" - "periods last 2 or 3 days. Sometimes longer"

Physical condition good: Father was an alcoholic.

Personal and Medical History of Augustus K. Barnum

1901

This patient was brought here by James B. Hewitt, in fair physical condition, and with following history of case. No history of consanguinity: no insane relatives: this is not the first attack: they have occurred, at frequent intervals, for past 30 years. First symptoms of this attack manifested by uncontrollable desire for alcohol: disease seems increasing:- variable & with rational intervals, but these not regular: Derangement now shown by increasing tendency to intoxication. Is not disposed to injure others, nor suicidal: no filthy or destructive habits: no previous peculiarities shown: his father was intemperate: No history of any severe disease &c or head-injury: has not been restrained or confined. Supposed cause of the disease is hereditary: has taken the "Keely Cure" - On personal examination, nothing further mentioned. ——— " ———

June 12 On admission, was put on T.W. (G.H.N. Rpt: Complexion dark: hair black & gray: eyes brown: condition of skin good: Head bald: mole on left side of face: mole on back: Slight eruptions on back: is clean: teeth in fair condition: several filled with gold.-

" " (Behavior good) Received onward: Is neat & clean: talks rationally: (Is an alcoholic)-

26 Given parole of grounds. July 19. Went out Camping at Oronoco, with several

July 19/31 other patients. July 31. Still at Camp. Aug 27. Has been out camping at

Aug 27 Oronoco: Returned today: mental condition fairly good. Sep 18. Visited by Step brother.

Oct 3 Was sent home, today: fairly rational in behavior and talk.

Discharged

Personal and Medical History of

Personal and Medical History of Edward Wagenknecht

Whole No. 5844.
Residence, Mendota, Minn
Date Admission, 14th June 1901.
Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.
How Sent, Thos. P. Moran, Jef P. Dakota County
Sex, Male Age, 23 Years
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Some; up to 4th Reader
Profession of Religion, Lutheran
Habits, not intemperate
Nativity, Inver Grove, Dakota Co. Minn: parents, Germany
Physicians Committing, D. O. VanCapellen and J. C. Hitch
Correspondents, John Wagenknecht
(address of brother) Mendota, Dakota Co Minn

No. for Year, 207.
Insane Relatives, none
Cause Exciting, Dont know
Cause Predisposing, "chronic" (?)
Form, ~~Adolescent~~ Dementia
Accompanying Bodily Disorder, complains of difficulty in passing water
Suicidal or not, — not.
Date of this Attack, in the winter of 1899.
Duration, about 1½ years
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 21+
Time of Leaving, October 11 - 1901
Time in Hospital, 3 mos 27 Ds
Result, Improved.
Discharged by Board of Control April 14/1902.

Examination on Admission by Dr. C. L. Chapple *Date of* June 15/1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Fairly Clear: Sluggish
MEMORY, Past Events, poor
Recent Events, poor Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull — Correct
REASONING POWER, Ordinary Subjects, poor
Special Subjects,
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Indifferent
DELUSIONS, Systematized, Transitory,
Special Subjects, ✓
HALLUCINATIONS,
ILLUSIONS,
SUMMARY, ✓
Is slow: dull: loss of memory: lacking in attention: moral failure

HISTORICAL.

LENGTH INVASION, 2 years or more
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
no history obtainable
Father, Dead
Paternal Relatives, —
Mother, Living - well
Maternal Relatives, —
Brothers and Sisters, 2 (?) 3 well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
no history of any
HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, Some headaches
OCCUPATION, Healthy or not, Farmer
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, Impaired Appetite, fair Bowels, Constipated

Personal and Medical History of Edward Wagenknecht

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 1½ PRESENT WEIGHT, 165 lbs USUAL WEIGHT, NUTRITION, fairly good
WOUNDS, Abnormalities, none apparent Condition of Skin, some acne and prominent capillaries
TONGUE, Coatings, Promptness of Movement, slight coat — prompt
PUPILS, Equality, equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, Arms, good Legs, good Grasp, staunching, eyes shut, steady.
TREMORS, Hands, none Tongue, none Facial Muscles, none General, none
PATELLAR REFLEX, Normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow, rather slow
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, regular
Strength, Sounds, normal
Size, "
Apex Beat, 5 "
Murmurs, none
ARTERIES,
Normal
LUNGS,
Chest symmetry: sym rather flat
Expansion: fair
Breath sounds: feeble

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

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

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Impaired
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).

Presents some abnormalities of development: appears rather low mental grade. Is rather flat chested, with prominent scapulae. Presents a somewhat neurasthenic appearance: mental trouble, evidently, of slow onset, and of nature of a dementia. No insane ideas noticed, but maybe present. Says "he has never felt very well: has practiced masturbation since a boy & had frequent nocturnal emissions & trouble in urinating: has had pain in stomach & back of neck & head. Has consulted numerous physicians & been under treatment." History of syphilis not obtainable. Patient professes not to understand, but admits intimacy with women.

Personal and Medical History of Edward Wagenknecht

1901

This patient was brought here by J. J. Grisim, attended by John Wagenknecht, in poor physical condition, with following history of case. There is no history of consanguinity, nor insanity of relatives; this is first attack: first symptoms manifested in the winter of 1899: loss of memory: disease seems increasing: variable: rational intervals not regular. Derangement now shown in that he cannot remember anything of the past. Is not disposed to injure others, nor suicidal: no filthy or destructive habits: not any previous peculiarities that we know of: no history of intemperance in patient or parents. Complains that, at times, he has difficulty in passing water: has not been restrained or confined. Dont know cause of the disease: as to any treatment, dont know: On Personal Examination, Cannot remember anything, and imagines people are always laughing at him. —— —— —— —— —

June 14 On admission, was put on B³ (G. H. N. R'pt. Complexion light: hair brown, eyes blue; condition of skin fair; little finger on each hand disfigured: eruptions on body: is clean: Teeth: 2 gone, upper right: 2 upper left gone: one gone, lower right: one
" " gone, lower left: Behavior good: Examined by Weldon Case). — Received on ward given bath & put to bed: is delusional: melancholy: suicidal: does not appreciate condition.
19/20 "Thinks we are trying to poison him". June 26. Refused nourishment: no special change noted —
July 1/15/31 Wt 162#. July 15. Visited by brother: July 31. No change to note in patient's condition —
Aug 1 Wt 168#. At present, inclined to think he is going to be poisoned or killed: tries to elope.
18/21 Is stubborn. Aug 18. He is, today, very stubborn & resistive. Aug 21. Visited by brother.
Oct 11 Taken home, by his brother.

Discharged

Personal and Medical History of

Personal and Medical History of Henry. G. Hillson

Whole No. 5845.

Residence, Westfield, Dodge County.

Date Admission, 18th June 1901.

Admitted by Dr. L. L. Chapple hour, 4:20 P.M.

How Sent, J. L. Hunt, Jail. Dodge County.

Sex, Male Age, 28 Years

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, High School

Profession of Religion, Norwegian Lutheran

Habits, Not intemperate.

Nativity, Westfield, Dodge Co. (Parents born in Norway).

Physicians Committing, Edward J. Brown and L. L. Chambers

Correspondents, Guttorm Hillson (father) Blooming Prairie, Minn

No. for Year, 208.

Insane Relatives, Grandfather on his mother's side, & uncle on his father's side; also 2 cousins confined at Rochester.

Cause Exciting, attending a Hypnotic Show.

Cause Predisposing, Heredity

Form, ~~Melancholia, Agitated~~

Accompanying Bodily Disorder, none mentioned

Suicidal or not, Not —

Date of this Attack, In January 1901

Duration, about 5 months

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, 27

Time of Leaving, December 13 - 1901

Time in Hospital, 5 mos 25 ds

Result, Unimproved — Discharged by Aff'd July 9-1902

Examination on Admission by Dr. E. J. Manous *Date of* June —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events, impaired

Recent Events, " Special Subjects, ✓

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Rather alert

REASONING POWER, Ordinary Subjects, poor

Special Subjects, "

Own Mental State, ✓

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Somewhat depressed

DELUSIONS, Systematized, Hypnotism Transitory, ✓

Special Subjects, ✓

HALLUCINATIONS, of hearing

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, ✓

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

Father, Living — well

Paternal Relatives, 4 bro. insane

Mother, Living — indigestion

Maternal Relatives, 2 Daughters of a sister

Brothers and Sisters, 5 well

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

Indigestion: Masturbator

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches

OCCUPATION, Healthy or not, Farming

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

no

Sleep, Appetite, poor Bowels, Constipated

Personal and Medical History of Henry. G. Hillson

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft 3/4 PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor

WOUNDS, Abnormalities, No Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, Slight Coating

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

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, No

HEARING, Good

COORDINATION, Arms, Normal Legs, normal ~~Grasp,~~ Other tests seem good.

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

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, ✓

HEART, Regularity,

Strength, Sounds,

Size, normal

Apex Beat,

Murmurs,

ARTERIES, normal

LUNGS, Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character,

BOWELS, Present Condition,

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

The patient is of a neurasthenic type: Has been treating for "nervousness" for some time: has various delusions regarding his genitals. Thinks he has been hypnotized to "masturbate": that he is controlled by other people.

Personal and Medical History of Henry G. Hillson

1901

This patient was brought here by Sheriff Joel Tucker, attended by Anton Peterson, in fairly good physical condition, and with following history of case. There is no history of consanguinity; but there are insane relatives, Grandfather on his mother's side, and uncle on his father's side, (also two cousins confined at Rochester). This is 1st attack; first symptoms manifested in January 1901: believed that he was being hypnotized at night, and that some one was abusing or masturbating him. Disease seems increasing: variable & with rational intervals; but these not regular. Derangement now shown in that the patient firmly believes that some one is trying to hypnotize him: this belief being so strong that he has been sleeping out-doors, to escape. Is not suicidal: no filthy or destructive habits. No previous peculiarities noted: no history of intemperance, nor of any severe disease &c or head-injury. He has not been restrained or confined. Supposed cause of the disease is Attending a Hypnotic Show. Treatment by local physician. On personal examination, he seems to act in a rational manner on all subjects, excepting the idea of hypnotism, which is getting worse. Commitment of said Henry G. Hillson recommended because he is insane.

June 18 On admission, was put on T.W. (G.H.N. R'pt. Complexion dark: hair brown: eyes blue; Condition of skin good. Little finger off, between first & second joint, left hand: is clean: Teeth: 2 gone, left upper; 1 left lower jaw. Behavior good: Examined by C. L. Vankirk). ——

" " Received on ward: Given bath & put to bed (Is a sexual hypochondriac): has delusions re-

27 -garding hypnotism, and seems very depressed & melancholy: June 27 Was visited by

July 1/31 father. July 1. Seems failing, physically. Wants his clothes. July 31. Patient is not as

Aug 1 well, either mentally or physically. Aug 1. Wt 123#. Rather weak & unsteady in walk.

20/25 Patient fainted: falling & striking his face. Aug 25. Was visited by a sister-

Sep 1 Wt 125#. Oct 1. Wt 122#: has been receiving baths, electricity & medicine. Nov 1. Wt 118#.

Nov 1 Continues weak: is rather stubborn & unreasonable: at times, has to be forced to eat-

Dec 13 Visited by some of his people & was taken home, today, by his father. ——

Discharged

Personal and Medical History of

Personal and Medical History of Lars. B. Lee

Whole No. 5847.

Residence, Town of Holden

Because resident of State of Minnesota 1861. of County 1861.

Date Admission, 19th June 1901.

Admitted by Dr E. J. Wanous hour, 7.30 PM

How Sent, Axel Haller, Jeff. Goodhue County

Sex, Male Age, 45.

Civil Condition, Single

Children, None Age Youngest Child, —

Occupation, Farmer

Degree Education, Common School

Profession of Religion, Lutheran Church

Habits, no history of intemperance

Nativity, Wisconsin; parents born in Norway

Physicians Committing, J. O. Anderson and A. W. Jones

Correspondents, none seen in papers

No. for Year, 210.

Insane Relatives, none

Cause Exciting, Cause unknown

Cause Predisposing, "Chronic"

Form, Chr. Hallucination

Accompanying Bodily Disorder, None Mentioned

Suicidal or not, not

Date of this Attack, April 1899

Duration, 2 years 2 months

No. of Attack, 1st —

No. of Admission, 2nd (first before June/99 - Rec 2/1900).

Age First Attack, 42.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. J. Wanous *Date of* June 20/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, Impaired

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects, —

Own Mental State, appreciates Condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed

DELUSIONS, Systematized, Transitory, People are after him

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, —

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

Father, Living

Paternal Relatives, —

Mother, Living

Maternal Relatives, —

Brothers and Sisters, 3 3 —

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

Rheumatism

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Farming

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

Yes

Sleep, Appetite, Bowels,

Says all night

Personal and Medical History of Lars. B. Lee

PHYSICAL CHARACTERISTICS.

HEIGHT, 6ft 2½ PRESENT WEIGHT, 170 lbs USUAL WEIGHT, NUTRITION, Poor

WOUNDS, Abnormalities, — Condition of Skin, Quite Clear

TONGUE, Coatings, Promptness of Movement, Slight Coating

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

SIGHT, good

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

HEARING, Good

COORDINATION, Arms, Normal Legs, Normal Grasp, Able test readily & steady

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

PATELLAR REFLEX, Exaggerated Other Reflexes,

ARTICULATION, Slurred, Hesitating, Yes Slow, Yes

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES, —

LUNGS,

Chest Symmetry: Sym

Expansion: Fair

Breath Sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character,

BOWELS, Present Condition,

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

The patient sits with head drooping on chest: much depressed & delusional. "Thinks people are after him to do him harm". Will only answer occasionally & questions. Has been here before, during which time his symptoms were similar to this attack. Physically, is emaciated.

Personal and Medical History of Lars B. Lee

1901

This patient was brought here by P. J. Lundquist, attended by Martin Gjellum in poor physical condition, with following history of case. There is no history of Consanguinity nor heredity: this is first attack; first symptoms manifested in April 1899, on religion: Believes himself an unpardonable sinner, and thinks people are trying to kill him. Disease seems increasing; variable; probably no rationable intervals. Derangement now shown in that he believes people are trying to kill him by poisoning, hanging &c: at times, will not eat and hides himself from people. Has threatened to injure others, but is not suicidal: no filthy or destructive habits. Was said to be not so bright as other boys: also quick-tempered. No history of intemperance in patient or parents, nor of any severe disease &c or head-injury. Was confined in State Hospital for Insane, at Rochester, Minn, from June '99 to Nov 2d-1900 - Cause of disease is unknown: Treatment none, except as above. On personal examination Pulse 95 Temp. 99 1/5: tongue coated: sullen. ——— " ———

June 19 On admission, was put on B3 (G.H.N. Rpt: Complexion dark; black, a little gray: eyes gray: Condition of skin good: is rather dirty: teeth: 4 gone, upper left: 2, right upper jaw: Behavior good: Examined by W. Case). - N.B. As stated, patient was here before: from June 2-1899 to Nov. 2-1900, and discharged May 1/1901, (improved): this 2nd admn: See Vol 43 p 121 No 5325: Diagnosis then made, Acute Melancholia -

" " Received on ward: Given bath. Is melancholy, delusional: does not associate with

23 other patients - June 23 Some improvement noticeable. July 3 (14-day record up) -

July 3/31 Patient shows much improvement. July 31. Is quiet: well behaved: says "he feels well" -

Aug 1/31 Wt 175# - Aug 31. Talks quite freely & rationally: health is good: Jany 31/02. Is

Jan 31 inclined to help on the ward: general condition good and has had no sickness -

Feb. 1/02 Wt. 180# Mar. 30/02 Is rather dull; but usually well behaved. May 1/02 Wt. 178#. Works steadily in C.D.R.

03 Jan. 31. Patient's condition remains about the same in every way - Works steadily; but is dull & listless.

Personal and Medical History of

Personal and Medical History of Charles W. Tyler

Whole No. 5848.
Residence, Simpson: Minn.
Always lived in Minn: Born here (County) -
Date Admission, 20th June 1901.
Admitted by Dr. E. J. Wanous hour, 3.00 P.M.
How Sent, J. A. Leonard. Jofl. Olmsted County
Sex, Male Age, 31
Civil Condition, married
Children, four Age Youngest Child, —
Occupation, Farmer
Degree Education, not educated -
Profession of Religion, Christian Church
Habits, no history of intemperance
Nativity, Olmsted Co. Minn: (father's, Cleveland, Ohio: Mother's N.Y.)
Physicians Committing, H. H. Witherstein and Chas. T. Granger
Correspondents, none given in papers.

No. for Year, 211.
Insane Relatives, Grand-mother, aunt, father & sister.
Cause Exciting, Heredity & self-abuse.
Cause Predisposing, Heredity
Form, Melancholia, Sub-acute
Accompanying Bodily Disorder, (Seminal emissions) -
Suicidal or not, not, but will injure others.
Date of this Attack, about 10 days ago
Duration, about 10 Days
No. of Attack, 2nd (one, about a year ago) -
No. of Admission, 1st
Age First Attack, - about 30 -
Time of Leaving, August 12 - 1901
Time in Hospital, 1 mo 23 ds
Result, Improved —
Discharged by Board of Control April 14 - 1902

Examination on Admission by Dr. E. J. Wanous *Date of* June 21/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused, by Spells
MEMORY, Past Events, Impaired
Recent Events, " " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct, at present
REASONING POWER, Ordinary Subjects, Good
Special Subjects, " "
Own Mental State,
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather depressed
DELUSIONS, Systematized, Transitory,
Special Subjects, ✓
HALLUCINATIONS,
ILLUSIONS,
SUMMARY, ✓

HISTORICAL.
LENGTH INVASION, 1 Year
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living. In R.S.H. 12 years ago
Paternal Relatives, sister & mother
Mother, Living
Maternal Relatives, no Insanity
Brothers and Sisters, 2 1 sister Insane
4 children - 1 child sickly (especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
Typhoid: pneumonia: measles
Some kidney trouble -
HABITS, Drinking and Smoking, Excess
10 years ago drank to excess.
HEADACHES, VERTIGO, OR CONVULSIONS, chr. headache
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
✓
Sleep, Appetite, Bowels,
has been taking medicine for all these

Personal and Medical History of Charles W. Tyler

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor
WOUNDS, Abnormalities, No, operated for varicocele Condition of Skin, dry, bronzed.
TONGUE, Coatings, Promptness of Movement,
PUPILS, Equality, equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, Impaired
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, ✓
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, other tests, readily & steady
TREMORS, Hands, No Tongue, Facial Muscles, General,
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, Slow,
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES,
normal
LUNGS,
Chest Symmetry: Sym
Expansion: normal
Breath Sounds: normal

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

EXAMINATION URINE, Quantity, Sp. g. 1015 Reaction, strongly acid Color and Appearance, light yellow clear
Albumen, (Heat): No: (Nitric acid) No. Sugar, Fehling solution - No: Diazo - no.
Casts and Crystals,
Passed 7-1-1901: Examined 7-1-1901.
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, normal
BOWELS, Present Condition, Irregular

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

The patient, at times, is confused; gets Ideas he wants to do some one harm: is afraid he will harm some of his family, during spell. Has threatened them, when in "Confused Spell".

During Examination, seems quite normal, except that he is depressed.

Personal and Medical History of Charles W. Tyler.

199

This patient was brought here by Sheriff Vine, in poor physical condition & with following history of the case. There is no history of consanguinity, but there are insane relatives; Grand-mother, aunt, father & sister; this is not 1st attack; one occurred about a year ago; duration 2 weeks; first symptoms of this attack manifested about 10 days ago, by a desire to injure his family. Disease seems increasing; variable & with rational intervals, but these at irregular intervals. Derangement now shown in that he has an uncontrolable desire to kill his baby. Is disposed to injure others, but not suicidal: no filthy or destructive habits. No previous peculiarities noted, no history of intemperance, nor of any severe disease &c or head-injury. He has not been confined or restrained. Supposed cause of the disease is heredity and self-abuse: has had treatment for the relief of seminal emissions. On personal examination nothing more than above. June 10 On admission, was put on T.W. (S.A.N. Rpt. Complexion light: hair light brown: eyes blue: condition of skin good: small scar on back of 2 middle fingers of right hand: small scar under chin. Is clean. Teeth: 2 gone lower right: one gone, right upper: Behavior good: Examined by Ballard). — Received on Ward: Complains of stomach trouble & constipation. July 3. Visited by wife: was put on electrical treatment. July 3 Aug 12 (patient is a hypochondriac) — Aug 12. Taken home by wife: had made some improvement mentally.

Discharged

Personal and Medical History of

Personal and Medical History of Stephen P. Halpin

Whole No. 5849.
Residence, St. Paul, Minn
Became resident of State 34 years ago: of County 34 yrs ago
Date Admission, 20th June 1901.
Admitted by Dr. E. J. Wanous hour, 7.30 P.M.
How Sent, E. W. Bazille, Jo P. Ramsey County
Sex, Male Age, 34
Civil Condition, married
Children, None Age Youngest Child, –
Occupation, Grocery Clerk
Degree Education, Common School
Profession of Religion, Catholic
Habits, Morphine & Cocaine
Nativity, St Paul, Minn: parents born in Ireland
Physicians Committing, Wm Davis and Charles P. Arzt
Correspondents, William Halpin
29 Garfield, St. Paul

No. for Year, 212.
Insane Relatives, Father Insane 13 years: now at Rochester
Cause Exciting, Morphine & Cocaine
Cause Predisposing, Heredity & above habits
Form, Morphinism
Accompanying Bodily Disorder, Nervousness & weakness
Suicidal or not, not
Date of this Attack, a few months after discharge
Duration, Some 5 months.
No. of Attack, 3rd (probably more)
No. of Admission, 3rd
Age First Attack, about 27.
Time of Leaving, August 23rd 1901
Time in Hospital, 2 Mos 3 Ds
Result, Recovered: Discharged 11/22/01.

Examination on Admission by Dr. E. J. Wanous *Date of* June 21/1901

MENTAL CHARACTERISTICS.

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

HISTORICAL.
LENGTH INVASION,
ONSET, Gradual or Sudden, ✓
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living: Insane
Paternal Relatives, no Insanity
Mother, Living: well
Maternal Relatives, no Insanity
Brothers and Sisters, all well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations). ✓
HABITS, Drinking and Smoking, yes
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
May 17/98 – June 30/98: July 6/1900 to Aug 14/1900.
Sleep, Appetite, poor Bowels,

Personal and Medical History of Stephen P. Halpin

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, Emaciated
WOUNDS, Abnormalities, Scars over arms & legs, from hypo: Condition of Skin, Dry
TONGUE, Coatings, Promptness of Movement, Slight Coating
PUPILS, Equality, equal Size, large Response to Light, Slow Accommodation, Slow
SIGHT, fair
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, no
HEARING, Good Finger to nose, eyes shut, unsteady: Standing on one foot, can not
COORDINATION, Arms, normal Legs, — Grasp, Standing, eyes shut, very unsteady
TREMORS, Hands, marked Tongue, marked Facial Muscles, marked General,
PATELLAR REFLEX, absent Other Reflexes,
ARTICULATION, Slurred, yes Hesitating, yes Slow,
FACIAL EXPRESSION, Sensibility, –
HEART, Regularity, normal
Strength, Sounds, about normal
Size, normal
Apex Beat, "
Murmurs, none noted
ARTERIES,
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. 10.25 Reaction, Alkali slight Color and Appearance, Yellow – Cloudy
Albumen, Heat: no: Nitric acid: no Sugar, Fehling's Solution: No: Diazo: no.
Casts and Crystals,
Passed July 2 – Examined July 2 –
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Insomnia.
BOWELS, Present Condition, Irregular

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

The patient has been previously committed, suffering from Morphinism, as he is now. Has been taking about 8 grs. a day "hypo". – Is very nervous.

Personal and Medical History of Stephen. P. Halpin

1901

This patient was brought here by Geo. Kreeger, in poor physical condition, with following history of the case. There is no history of consanguinity: Father insane 13 years: now at Rochester — This is not 1st attack: (3rd & probably more): others occurred in 1898: duration three months (also in 1900.), when he was at Rochester Minn; discharged: also committed to Rochester. July 6 — 1900. First symptoms of this attack were manifested a few months after discharge commenced with morphine. Disease seems increasing: variable & with rational intervals, but these not regular. Derangement now shown in that he uses morphine and Cocaine, and has hallucinations and delusions. Is not disposed to injure others: not suicidal: propensity not active: no filthy or destructive habits. No previous peculiarities noted. There is history of intemperance: father, hard drinker: no severe disease &c or head-injury. Patient has not been restrained or confined. Cause of Disease, Morphine and Cocaine. Treatment, none. On personal examination, is very nervous; has twitching movements; has delusions: hears voices; becomes wild & uncontrolable in absence of drug. N.B. This is 3rd admission: here 1st time, from May 20/19 — 98 to June 30/98. See. Vol 39 p241 No. 5046: and 2nd time, from July 6 — 1900 to Aug 14 — 1900. See Vol 47 p85 No 5621. (form was Morphine Insanity) — " — — —

June 20 On admission, was put on T.W. (G.H.N. P'pt. Complexion Dark: hair black, bald; eyes blue; condition of skin good: scars on arms and legs: Is dirty: Teeth all gone. Behavior good).

" " Received on ward: given bath & put to bed: (Is a morphine-fiend): given treatment

July 6/12 for same: July 6. Seems nervous: vomited several times. July 12. Has improved some.

31 given clothes & transferred to B3. July 31. Is in good physical condition: Habits clean.

Aug 23 Sent home today.

Discharged

Personal and Medical History of

Personal and Medical History of James S. Maple

Whole No. 5850.

Residence, St. Paul, Minn

Became resident of State 1889: Of County, Ramsey 2 years

Date Admission, 20th June 1901.

Admitted by Dr. E. Z. Wanous hour, 7 30 P.M.

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

Sex, Male Age, 32.

Civil Condition, Married

Children, Two Age Youngest Child, —

Occupation, Buyer — Shoes

Degree Education, Common school

Profession of Religion, Catholic —

Habits, Addicted to Intemperance

Nativity, Iowa: Father's, Ohio: Mother's, Ireland

Physicians Committing, H. W. Davis and O. Martel

Correspondents, Mrs. James S. Maple (wife) 442 Fuller St. St. Paul

No. for Year, 213.

Insane Relatives, none

Cause Exciting, Syphilis

Cause Predisposing, previous attack

Form, Mania without delusions

Accompanying Bodily Disorder, Syphilis

Suicidal or not, not —

Date of this Attack, June 16 — 1901

Duration, 4 Days.

No. of Attack, 2nd (one, 1 year ago)

No. of Admission, 1st

Age First Attack, — 31.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* June 21/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Good

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Correct

REASONING POWER, Ordinary Subjects, Good

Special Subjects,

Own Mental State,

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

DELUSIONS, Systematized, Transitory,

Special Subjects, ✓

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, ✓

Mania, without delusions

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Dead — Bright's

Paternal Relatives, no Insanity

Mother, Living — well

Maternal Relatives, no Insanity

Brothers and Sisters, all well

Children 2 — well (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

PROMINENT DISEASES, Syphilis, at age of 17.

HABITS, Drinking and Smoking, to Excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Shoe — Salesman

Detail Date, Duration, and Character of Previous Attack, if any, no

Sleep, good Appetite, good Bowels, Constipated

Medical History of James S. Maple

A L'ART NOUVEAU CELL

James Marple Adorns His Quarter at the Jail.

James Maple, demented, who was taken in charge by the police yesterday, had a lovely time at the county jail last night. When he was left in undisturbed possession of his cell he proceeded to decorate his temporary home according to the weird ideas of beauty which an insane person may have. He was naturally hampered by lack of materials, but his clothes, bedding and everything movable in the cell was sufficient. Every garment he had on him and everything pertaining to his bed was torn to shreds and fastened to the sides and top of the cell in festoons and any other way his fancy could suggest. The effect was picturesque in a crazy way.

Maple was enjoying himself immensely when an attendant from Rochester broke into his play and took him back.

about July 2 — 3 — 01

his companion. A little clever questioning led the patient to give his name and the causes which led to his "elopement." He had, so he said, escaped from the institution by securing the keys to his ward and climbing down a fire escape. At Oronoco one of the nurses attempted to restrain him and the maniac drew a razor, threatening to kill the nurse. Mr. Maple had started for St. Paul. The sheriff stated that his duty compelled him to return Mr. Maple to Rochester, and he also desired possession of the razor which was given. The patient was promptly restored to the institution, the sheriff returning home about midnight. The hospital authorities were relieved at the return of Maple for whom most diligent search had been made.

Rochester Bulletin Aug 27/1901

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, fair

Scar on elbow: also in inguinal region Condition of Skin, Sluggish

s of Movement, badly coated: prompt.

l Size, large Response to Light, yes Accommodation, yes

Good

nt, Arcus Senilis, or other troubles, —

Good

ns, Normal Legs, normal Grasp, other tests readily & quite steady

No. Tongue, Facial Muscles, General,

Sluggish Other Reflexes,

red, no Hesitating, Slow,

N, Sensibility, normal

normal

mal

Size,

Apex Beat,

Murmurs, None

ARTERIES, full

LUNGS,

Chest symmetry: Sym

Expansion: good

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, 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).

The patient is exalted & very talkative: mind wanders, in conversation: talks a great deal about his abilities as salesman: Case is one of mania.

Personal and Medical History of James S. Maple

Whole No. 5850.

Residence, St. Paul, Minn

Became resident of State 1889: Of County, Ramsey, 2 years

Date Admission, 20th June 1901.

Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.

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

Sex, Male Age, 32.

Civil Condition, Married

Children, Two Age Youngest Child, —

Occupation, Buyer — Shoes

Degree Education, Common school

Profession of Religion, Catholic —

Habits, Addicted to Intemperance

Nativity, Iowa: Father's, Ohio: Mother's, Ireland

Physicians Committing, H. W. Davis and O. Martel

Correspondents, Mrs. James S. Maple (Wife) 442 Fuller St. St. Paul

No. for Year, 213.

Insane Relatives, None

Cause Exciting, Syphilis

Cause Predisposing, previous attack

Form, Mania without delusions

Accompanying Bodily Disorder, Syphilis

Suicidal or not, not —

Date of this Attack, June 16 — 1901

Duration, 4 Days.

No. of Attack, 2nd (one, 1 Year ago)

No. of Admission, 1st

Age First Attack, — 31.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* June 21/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Good

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Correct

REASONING POWER, Ordinary Subjects, Good

Special Subjects,

Own Mental State,

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

DELUSIONS, Systematized, Transitory,

Special Subjects, ✓

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, ✓

Mania, without delusions

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Dead — Bright's

Paternal Relatives, no Insanity

Mother, Living — well

Maternal Relatives, no Insanity

Brothers and Sisters, 2 3 all well

Children 2 — well (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

PROMINENT DISEASES, Syphilis, at age of 17.

HABITS, Drinking and Smoking, to Excess

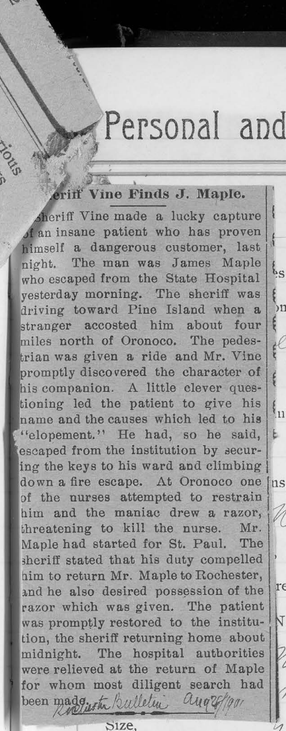
HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Shoe — Salesman

Detail Date, Duration, and Character of Previous Attack, if any, no

Sleep, good Appetite, good Bowels, Constipated

other painful and serious from which most mothers can be avoided by the use of her's Friend." This great remedy a God-send to women, carrying them through their most critical deal with safety and no pain. Friend" need fear the suffering or it robs the ordeal of its horror and child and leaves her in



Sheriff Vine Finds J. Maple.

Sheriff Vine made a lucky capture of an insane patient who has proven himself a dangerous customer, last night. The man was James Maple who escaped from the State Hospital yesterday morning. The sheriff was driving toward Pine Island when a stranger accosted him about four miles north of Oronoco. The pedestrian was given a ride and Mr. Vine promptly discovered the character of his companion. A little clever questioning led the patient to give his name and the causes which led to his "elopement." He had, so he said, escaped from the institution by securing the keys to his ward and climbing down a fire escape. At Oronoco one of the nurses attempted to restrain him and the maniac drew a razor, threatening to kill the nurse. Mr. Maple had started for St. Paul. The sheriff stated that his duty compelled him to return Mr. Maple to Rochester, and he also desired possession of the razor which was given. The patient was promptly restored to the institution, the sheriff returning home about midnight. The hospital authorities were relieved at the return of Maple for whom most diligent search had been made. Rochester Bulletin Aug 28/1901

Personal and Medical History of James S. Maple

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, fair

...s, scar on elbow: also in inguinal region Condition of Skin, Sluggish

...mptness of Movement, badly coated: prompt.

...equal Size, large Response to Light, yes Accommodation, yes

Good

...nt, Arcus Senilis, or other troubles, —

Good

...ns, Normal Legs, normal Grasp, other tests readily & quite steady

No. 1 Tongue, Facial Muscles, General,

Sluggish Other Reflexes,

...red, no Hesitating, Slow,

...N, Sensibility, normal

...normal

...mal

Size,

Apex Beat,

Murmurs, None

ARTERIES, full

LUNGS,

Chest symmetry: Sym

Expansion: good

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, 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).

The patient is exalted & very talkative: mind wanders, in conversation: talks a great deal about his abilities as salesman: Case is one of mania.

Personal and Medical History of James S. Maple

Whole No. 5850.

Residence, St. Paul, Minn. Ramsey

Because resident of State 1889: of County 2 years

Date Admission, 20th June 1901.

Admitted by Dr. E. J. Wanous hour, 7.30 P.M.

How Sent, E. W. Bazelle, Jol. P. Ramsey County

Sex, Male Age, 32.

Civil Condition, married

Children, Two Age Youngest Child, —

Occupation, Buyer — Shoes

Degree Education, Common school

Profession of Religion, Catholic —

Habits, Addicted to Intemperance

Nativity, Iowa: Father's, Ohio: Mother's, Ireland

Physicians Committing, A. W. Davis and O. Martel

Correspondents, Mrs James S. Maple (Wife) 442 Fuller St. St Paul

No. for Year, 2[illegible]

Insane

Cause E.

Cause Pred

Form, [illegible]

Accompanying

Suicidal or not,

Date of this Attack, June 16 — 1901

Duration, 4 Days.

No. of Attack, 2nd (one, 1 year ago)

No. of Admission, 1st

Age First Attack, — 31.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. J. Wanous *Date of* June 21/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Good
Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct

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

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

DELUSIONS, Systematized, Transitory,
Special Subjects, /

HALLUCINATIONS,

ILLUSIONS,

SUMMARY, /
Mania, without delusions

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Dead — Bright's

Paternal Relatives, no insanity

Mother, Living — well

Maternal Relatives, no insanity

Brothers and Sisters, 3 all well
Children 2 — well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Syphilis, at age of 17.

HABITS, Drinking and Smoking, & Excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Shoe - Salesman

Detail Date, Duration, and Character of Previous Attack, if any,
no

Sleep, good Appetite, good Bowels, Constipated

A. LUTZI,
210 S. Broadway, Rochester, Minn.
CZAR WANTS A HORSEMAN
John Campbell of Montana Offered $10,000 a Year.
John Campbell, a retired mining man, who has a ranch on the Brooklyn lands, and who has a cup in 1882 and 1883 and who also received $10,000 a year. Mr. Campbell, according to the contract, is to have charge of his training stables at St. Petersburg. He says, has offered him an annual salary of $10,000 a year and 10 per cent of Campbell's profits on races. Mr. Campbell says he has not yet signed the contract and may not do so. This court, he says, has offered him a salary of $10,000 a year and 10 per cent of Campbell's profits on races. Mr. Campbell says he has not yet signed the contract and may not do so. Philadelphia Press and money on races. Mr. Campbell nor his agents have accepted the offer and the conditions of the contract. Mr. Campbell is one of the richest men in the world. He is not a horseman, neither Mr. Campbell nor his agents is that neither Mr. Campbell nor his agents are interested in any piece and money on races. Mr. Campbell is one of the richest men in the world. He is not a horseman, neither Mr. Campbell nor his agents is that neither Mr. Campbell nor his agents are interested in any piece and money on races. Mr. Campbell is one of the richest men in the world, stables

Personal and Medical History of James. S. Maple

1901

This patient was brought here by Dep-Sheriff Emanuel Johnson, in fair physical condition, with following history of case. There is no history of consanguinity nor heredity. This is not first attack: one occurred one year ago, duration 1 week: not sent to hospital: first symptoms of this attack manifested June 16 – 1901: Quarrelsome; disease seems increasing: variable & with rational intervals, but these not regular: Derangement is now shown in that he imagines he is superior to anything else: is disposed to injure others; but not suicidal: no filthy or destructive habits: no previous peculiarities noticed: patient (and parents) addicted to intemperance. Is subject to Syphilis: has not been restrained or confined. Supposed cause of the disease is Syphilis. Treatment has been Sedatives and Sedatives. On personal examination, nothing mentioned.-

June 20 On admission, was put on T.W. (G.H.N.Pft. Complexion dark: hair black & gray: eyes brown: Condition of skin good: scars on left elbow: is clean: teeth: 4 gone in upper jaw: behavior good:

" 30 Received on ward: given bath: is exalted: talks about "Socrates Shoes" – June 30 is rather

July 5 incoherent and has exalted ideas: very talkative. July 5. (14 day record up.) –

T 19 Patient is still exalted. July 7. Visited by wife. July 19. Went out Camping at Monroe.

" 31 Still at Camp. Aug 3. Returned from Camp. Aug 28. Attempted to elope from

Aug 28 Chapel. Was transferred to C¹: was very threatening, noisy and abusive. Still somewhat

Sept 10 exalted. Sept 10. Taken home by wife. Oct 25. Was returned from home & put on B³ –

Oct 26 Patient attacked another patient & threw him on floor: very stubborn: talks in threatening

" 29 manner: restless: Oct 29. Struck one of nurses & had to be held: attempted to head lock &

Nov 1 Patient talks freely, but in a boastful way, but has quieted down some, since coming.

1902 Jany 1 Has improved, during past month, and is quite well-behaved. Jany 25. Again went

" 25 on a trial, going alone – July 2/02 Received on ward (Returned)

July 4/02. Had trouble with Wm Walsh; but was stopped

before fight commenced. July 5/02 Threatens Lane (another

patient,) several times. Also threw stand at Woolery (Pat.)

Tried to sing & became noisy during the night. Was

angry and inclined to fight. July 7/02 Still restless –

and rises at night. July 10/02 Annoys other patients.

July 31/02 Has quieted down some. Aug 27/02 Has been

quite quiet during the month & has gone to A². Sept 22/02

Patient has been very quiet. Tonight escaped thro window

by means of sheets tied together. Sept. 23/02 Was returned

yesterday. Is very restless & excitable. Sept. 25/02 Was

found smoking in bed room at night. had a slug

that he had made out of a handkerchief. Sept. 27/02 Very

restless & unmanagrable. To B¹ from B³. Placed in

single room on C¹. Tore up sheet & mattress during night.

Sept. 30/02 Has become somewhat quiet again.

Personal and Medical History of James S Maple

Nov. 1/12 To B² – Nov. 9 Visited by friend. Nov. 27 Was

out at football game – became much excited

& talkative; eloped same evening. Dec. 1 Returned

to B¹; Slept on C¹. Dec. 5/02 Trans. to C¹. Had unlocked

screens on B¹. Dec. 31 Taken to city, to have

treatment of teeth. Jan 15/03 Tooth treated in town.

Jan. 17 Has been excitable; noisy & troublesome. Today

refused medicine & food. Barred door to room.

Set fire to some towels. Searched – matches found

on person. Later, very destructive: Put in

seclusion one hour. Jan. 18, One tooth extracted;

at night tore up bedding & was filthy in

room. Jan. 19 Again tore up bedding; set fire

to same; threatening bodily harm to night

nurse. Jan. 20–23 Is protective sheet part of

the time; noisy; abusive; threatening; sleep doses.

Jan 03 Jan 31. Continues noisy; abusive; trying to cause

trouble with other patients. (Dr. Chapple)

Personal and Medical History of Philip Stokoe

Whole No. 5851.
Residence, St. Paul. Minn.

No. for Year, 214.
Insane Relatives, not that is known
Cause Exciting, Alcohol
Cause Predisposing, previous attack
Form, Alcoholic Insania
Accompanying Bodily Disorder, Tremor, more or less general
Suicidal or not, not

Date Admission, 21st June 1901.
Admitted by Dr. E. J. Wanous hour, 7:30 P.M.
How Sent, Edmund W. Bazille, Jo. P. Kawsey County
Sex, Male Age, 46
Civil Condition, married
Children, four Age Youngest Child, —
Occupation, Laborer
Degree Education, Common School
Profession of Religion, not a church - member
Habits, Intemperate
Nativity, Durham, England: parents born in England
Physicians Committing, Charles J. Denny and E. C. Eberly
Correspondents, Mrs. Philip Stokoe
43 West Sycamore St.
St Paul

Date of Attack, August 1900.
Duration, 10 months.
No. of Attack, 2nd (one, in Sept 1898)
No. of Admission, 2d
Age First Attack, 45
Time of Leaving, September 6 — 1901
Time in Hospital, 2 mos 16 ds
Result, Recovered: Discharged 11/25/01

Examination on Admission by Dr. E. J. Wanous *Date of* June —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, impaired
Recent Events, " " Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
—

REASONING POWER, Ordinary Subjects, —
Special Subjects, —
Own Mental State, appreciates condition

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

DELUSIONS, Systematized, Transitory, Yes
Special Subjects,

HALLUCINATIONS, of hearing
ILLUSIONS,
SUMMARY,

HISTORICAL.

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

Father, Dead - old age
Paternal Relatives, no insanity
Mother, Dead: operation
Maternal Relatives, no insanity
Brothers and Sisters, all well
Children - 4 - well (especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).

no

HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Machinist
Detail Date, Duration, and Character of Previous Attack, if any,
Sept 1898
Sleep, poor Appetite, poor Bowels, Constipated

Personal and Medical History of Philip Stokoe

SAINT PAUL, MINN.

REFUSES TO KISS THE DOG

Pioneer Press - June 27/01

BUT DEPUTY DOES NOT OBJECT TO PRETTY GIRLS

Novel Request Made of a Clerk in the Probate Court Is Only Half Executed by Clerk Roedler.

"Go ahead, kiss her. I want you to kiss her," said Philip Stokoe in the probate court yesterday, pointing to his pretty eighteen-year-old daughter.

Deputy Clerk Jack Roedler was alone in the office. He hesitated at the novel request, but Mr. Stokoe was insistent, and Mr. Roedler says he kissed the young lady just to please her father. The white-faced tan dog that had followed Mr. Stokoe looked on wistfully.

"Now, get down on your knees and kiss the dog," commanded Mr. Stokoe. This request yas not as pleasing as the first one, and Mr. Roedler refused to comply, even for the sake of the father. In his suave way, however, he smoothed things over and took Mr. Stokoe into the court room, where he was to come up for examination on information of insanity.

The examination showed that Mr. Stokoe had delusions, and Judge Bazille committed him to the insane hospital at Rochester. Mr. Stokoe is forty-six years old and has four children.

Displays of affection have been frequent in the probate court during the past week. A few days ago a woman, who was being examined, showed a strong desire to hug Judge Bazille. She was restrained, however, by the attendants.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor

ties, No Condition of Skin, sluggish

romptness of Movement, Coated

Equal Size, Normal Response to Light, Normal Accommodation, Normal

good

lint, Arcus Senilis, or other troubles, —

good

ms, Normal Legs, Normal Grasp, Abn tests good

No Tongue, — Facial Muscles, — General, —

, Normal Other Reflexes, "

red, Normal Hesitating, — Slow, —

ON, Sensibility,

Normal

mal

ted

ial

Pupils

Fundus

Heart 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. 1020 Reaction, acid Color and Appearance, light yellow: clear

Albumen, Heat: no — Nitric acid - no. Sugar, Fehling's Solution, No: Picric — no -

Casts and Crystals,

Passed July 2 — Examined July 2.

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).

The patient is much confused excited: is of delirious nature: very talkative & will not remain in bed. Was here before in much the same condition, which lasted only a few days. Has been a hard drinker and emotion is partly due to that. —

Personal and Medical History of Philip Stokoe

Whole No. 5851.
Residence, St. Paul. Minn.

Date Admission, 21st June 1901.
Admitted by Dr. E. E. Warnow hour, 7:30 P.M.
How Sent, Edmund W. Bazille, Jof P. Ramsey County
Sex, Male Age, 46
Civil Condition, married
Children, four Age Youngest Child, —
Occupation, Laborer
Degree Education, Common School
Profession of Religion, Not a Church - member
Habits, Intemperate
Nativity, Durham, England: parents born in England
Physicians Committing, Charles J. Denny and E. C. Eshelby
Correspondents, Mrs. Philip Stokoe
43 West Sycamore St. St Paul

No. for Year, 214.
Insane Relatives, No
Cause Exciting,
Cause Predisposing,
Form, Alcoh
Accompanying Bodily Dis
Suicidal or not,
Date of this Attack,
Duration,
No. of Attack, 2nd
No. of Admission,
Age First Attack,
Time of Leaving,
Time in Hospital,
Result, Recovere

Examination on Admission by Dr. E. J. Warnow

MENTAL CHARACTERISTICS.

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

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

Father, Dead - old age
Paternal Relatives, No Insanity
Mother, Dead: operation
Maternal Relatives, No Insanity
Brothers and Sisters, all well
Children - 4 - well
(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
No
HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Machinist
Detail Date, Duration, and Character of Previous Attack, if any,
Sept 1898
Sleep, poor Appetite, poor Bowels, Constipated

Strong
MI
HALF
Saturday we will pla
Trimmed Hats at ex
out of our workroom
Regular $30.00 Hats.....
Regular $25.00 Hats.....
Regular $22.50 Hats.....
Regular $20.00 Hats.....
Regular $18.00 Hats.....
Regular $16.00 Hats.....
Regular $15.00 Hats.....
Regular $14.00 Hats.....
Regular $13.50 Hats.....
Regular $12.00 Hats.....
Regular $10.50 Hats.....
Regular $10.00 Hats.....
This Sale Satur
67, 69, 71 an
of 3½ per cent and made it payable June 29.
Chicago, June 21.—W. C. Brown's selection as additional vice president and general manager of the Lake Shore lines gave life to the liveliest satisfaction in railway circles here. President Harris of the Bloomington, of which Mr. Brown has been general manager since 1896, expressed deep regret at the loss of Mr. Brown. Mr. Brown is forty-eight years old. He began his career in railroading as a wood cutter and section hand on the Milwaukee in 1870, became a telegrapher and rose rapidly through the various

Personal and Medical History of Philip Stokoe

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, poor
WOUNDS, Abnormalities, No Condition of Skin, sluggish
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, Normal Response to Light, Normal Accommodation, Normal
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, good
COORDINATION, Arms, Normal Legs, Normal ~~Grasp~~, Ataxic test good
TREMORS, Hands, No Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, Normal Other Reflexes, "
ARTICULATION, Slurred, Normal Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, Normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES, Normal
LUNGS, Chest symmetry: Sym 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. 1020 Reaction, acid Color and Appearance, light yellow: clear
Albumen, Heat: No — Nitric acid - No. Sugar, Fehling's Solution, No: Deposit — no —
Casts and Crystals,
Passed July 2 — Examined July 2.
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).

The patient is much confused & excited: is of delirious nature: very talkative & will not remain in bed. Was here before in much the same condition, which lasted only a few days. Has been a hard drinker and condition is partly due to that. —

Personal and Medical History of Philip Stokoe

1901

This patient was brought here by Deputy Johnson, in poor physical condition, with the following history of case. No history of Consanguinity: not any of heredity, that is known. This is not first attack: one occurred in September 1898; duration about 6 months; was at this (Rochester) hospital; considerable improvement, lasting about 6 months. First symptoms of this attack manifested August 1900: indolent and improvident: disease seems increasing: not variable: no rational intervals. Derangement now shown by imaginative stories, and delusions, such as thinking particles of tobacco are bugs. Is not disposed to injure others, nor suicidal; no filthy or destructive habits. No previous peculiarities manifested. There is history of Intemperance in parents & he is intemperate, himself; no severe disease &c, except slight injury to head, 12 years ago. He has not been confined or restrained. Supposed cause of the disease is alcohol: treatment, none. On personal examination, there is noted a tremor, more or less general: delusions and hallucinations. N.B. This is 2nd admission: was here before from Oct 15th - 1898 to March 1st - 1899 - Discharged improved: See Vol 41 p113 No 5155

Form: Acute Confusional Insanity. —— " ——

June 21 On admission. was put on T.W. (G.H.N. Rpt. Complexion dark: hair dark-brown: eyes gray: condition of skin good: herniae on right side: is dirty: Teeth: 2, right upper gone: 1, left upper gone; behavior bad: put up a "Scrap" taking him in, to the ward). ——

" " Received on Ward: seems somewhat confused and excited: will not remain in bed: has right-sided hernia. June 29. Given clothes and got up on ward: asks to assist with work.

29 July 31 seems much better, mentally: is somewhat childish, however. Sep 6. Has been paroled,

Sep 6 and is getting along very well. Sent home, today.

Discharged

Personal and Medical History of

Personal and Medical History of Hugh Jaeger

Whole No. 5852.
Residence, St. Paul, Minn
Resided in Minnesota, 4½ years: in County, 3 years
Date Admission, 22nd June 1901
Admitted by Dr. E. J. Wanous hour, 7:30 PM
How Sent, Edmund W. Bazille, Jeff. County Co
Sex, Male Age, 34
Civil Condition, Married
Children, Two Age Youngest Child, —
Occupation, Cornice Maker
Degree Education, High School
Profession of Religion, Not a church member
Habits, Not intemperate
Nativity, Wisconsin: Fathers, Germany: Mothers, Wisconsin
Physicians Committing, O. Pillington Archibald & Wm Davis
Correspondents, Mrs Hugh Jaeger
959 Jacks St. St Paul

No. for Year, 215.
Insane Relatives, None
Cause Exciting, Dont Know
Cause Predisposing, "Chronic"
Form, Disturbed Delusional Insanity
Accompanying Bodily Disorder, None mentioned
Suicidal or not, Not: but has threatened others.
Date of this Attack, One year ago
Duration, one year
No. of Attack, Not 1st (one, about one year ago).
No. of Admission, 1st
Age First Attack, 33.
Time of Leaving, September 19–1901
Time in Hospital, 2 Mos 2 Ds
Result, Unimproved —
Discharged by Board of Control
April 14–1902

Examination on Admission by Dr. E. J. Wanous *Date of* June 23/01.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
rather Sluggish
MEMORY, Past Events, Good
Recent Events, Not Good Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, fair, except on subject
Special Subjects, of wife: admits it might be due to sickness.
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, ✓
(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
✓
Father, Dead: accidental
Paternal Relatives, no Insanity
Mother, Dead: Childbirth
Maternal Relatives, no Insanity
Brothers and Sisters, well
children – 2 – well
(especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
no
HABITS, Drinking and Smoking, yes
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Draftsman (?)
Detail Date, Duration, and Character of Previous Attack, if any,
✓
Sleep, poor Appetite, poor Bowels, Irregular

Personal and Medical History of Hugh Jaeger

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 8 PRESENT WEIGHT, 140 lbs USUAL WEIGHT, NUTRITION, Poor
WOUNDS, Abnormalities, ✓ Condition of Skin, Sallow
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, Normal Response to Light, Quick Accommodation, Normal
SIGHT, ✓
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, ✓
HEARING, good
COORDINATION, Arms, Normal Legs, Normal Grasp, Does other tests readily & steady.
TREMORS, Hands, ✓ Tongue, ✓ Facial Muscles, ✓ General, ✓
PATELLAR REFLEX, Normal Other Reflexes,
ARTICULATION, Slurred, Normal Hesitating, Slow,
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity, Normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, Normal
ARTERIES, Normal
LUNGS,
Chest Symmetry: Symm
Expansion: Good
Breath Sounds: Normal

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

EXAMINATION URINE, Quantity, Sp. g. 1032 Reaction, acid Color and Appearance, Dark-straw cloudy
Albumen, (Heat) No. (Nitric acid): No Sugar, (Fehling Sol) No: (Braze) No –
Casts and Crystals,
Passed 6/24/1901. Examined 6/25/1901
OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, Good
BOWELS, Present Condition, Irregular

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

The patient seems depressed & worried: Has been very restless & troubled with insomnia. Mind seems fixed on the subject of family trouble and he talks freely about it. Patient borders on the paranoiac type of insanity: perhaps of pseudo-condition.

Personal and Medical History of Hugh Jaeger

1901

This patient was brought here by Deputy Johnson, in poor physical condition, with following history of case. There is no history of consanguinity nor heredity. This is not 1st attack: one occurred about one year ago, duration to present time: was not sent to hospital: First symptoms of this attack manifested one year ago: unjustified suspicions as to his wife's fidelity. Disease seems increasing: not variable: no rational intervals on this subject. Derangement now shown as above. He has threatened to injure others, but is not suicidal. No filthy or destructive habits. No previous peculiarities manifested: no history of intemperance nor of any severe disease &c or head-injury. He has not been restrained or confined. Dont know cause of the disease. Treatment, none. As to personal examination, see Yourself.

June 22 On admission was put on B3 (G.H.N.R.Pt. Complexion light: hair brown: eyes blue: condition of skin good: birth mark on left thigh: is clean: Teeth. 3 gone, upper jaw: 2 gone, lower jaw: behavior good: Examined by Ira Blood). – Received on ward: is somewhat depressed:

" " has peculiar ideas regarding wife. Talks rationally, otherwise. July 5. Patient seems improved.

July 5 quite anxious to go home. July 11. Transferred to A2. July 13. Complains of swelling of

11/13 right hand. July 16. Visited by friend. July 19. Went out Camping, at Oronoco.

16/19 Still out at Camp. Aug 19. Came in from Camp: Aug 20. Was visited by wife

31 and 2 Children. Aug 21. Again went out to Camp. "Crying & Despondent" "being

Aug 20/31 wrongfully kept here, he claims". Sep 7. Returned from Camp. – Sep 19. Patient allowed

Sep 7/19 to go home: had been of good disposition, and behavior, during past month.

Discharged

Personal and Medical History of

Personal and Medical History of Philip Sac-Marie

Whole No. 5856.
Residence, Caledonia Township
Date Admission, 28th June 1901
Admitted by D. O. C. Heyerdale hour, 4.00 P.M.
How Sent, L. Budahl, J. of P. Houston County
Sex, Male Age, 24
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Reads & writes
Profession of Religion, Roman Catholic
Habits, no history of intemperance
Nativity, Minnesota: father's, Luxemborg: mother's, Belgium
Physicians Committing, D. C. Rhines and W. E. Browning
Correspondents, Peter Sac Marie, Caledonia Minn (father) lives 2 miles in country
Family Physician: has none: Joseph Sac Marie, Caledonia (brother) lives in Caledonia

No. for Year, 219
Insane Relatives, none
Cause Exciting, Lightning-stroke
Cause Predisposing, previous attack
Form, Acute Melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not: but will injure others
Date of this Attack, probably recent ?
Duration, probably short ?
No. of Attack, 2nd (one, 2½ years ago).
No. of Admission, 1st —
Age First Attack, about 21
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. Z. Hanons *Date of* June 29/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Confused: Sluggish
MEMORY, Past Events, Impaired
Recent Events, " " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull
REASONING POWER, Ordinary Subjects, poor
Special Subjects, " "
Own Mental State, Does not appreciate Condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Depressed
DELUSIONS, Systematized, none 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).
Father, Dead
Paternal Relatives, No history of Insanity
Mother, Dead
Maternal Relatives, no Insanity
Brothers and Sisters, well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
right eye has been injured: also some scars over eye: cause not known.
HABITS, ~~Drinking~~ and Smoking, yes
HEADACHES, VERTIGO, OR CONVULSIONS, headache
OCCUPATION, Healthy or not, farmer
Detail Date, Duration, and Character of Previous Attack, if any, 2½ years ago
Sleep, — Appetite, — Bowels, — very irregular

Personal and Medical History of Philip Sac-Marie

Trouble Drives Him Insane.

Philip St. Mary, a resident of Houston county, has been brought to the State Hospital here, being committed by Judge Budahl of Caledonia. Philip St. Mary figured prominently in the trial for the murder of his brother a few months ago. The deceased was a cripple and ill-used by his parents, it was claimed. When his decomposed remains were discovered not far from the St. Marys' home, the parents were thought by many to have brought about his death and a trial resulted. Evidence to convict was lacking. The son, Philip, who was implicated in the case is now said to be hopelessly insane. He imagines that he has a family of ten children and is particularly violent to the members of the household. Rochester Bulletin 7/1/1901

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 197# USUAL WEIGHT, NUTRITION, fair
...es, mentioned above Condition of Skin, ✓
...mptness of Movement, Clear
... Size, normal Response to Light, normal Accommodation, normal
...ired
...t, Arcus Senilis, or other troubles, right eye impaired
...ood
..., Normal Legs, Normal Grasp, —
...s, Hands, none Tongue, ✓ Facial Muscles, General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow, yes
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity, normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES, full
LUNGS,
Chest symmetry: Sym
Expansion: Good
Breath Sounds: Normal

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

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

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

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

The patient is depressed & confused: his statements are entirely wrong, from history of Commitment, says he is 40 years old; married & has 4 children; that he has lived with his family: that his father is dead &c" — Is of low mental development. —

Personal and Medical History of Philip Sac-Marie

Whole No. 5856.
Residence, Caledonia Township
Date Admission, 28th June 1901
Admitted by D. O. C. Heyerdale hour, 4.00 P.M.
How Sent, L. Budahl, J. of P. Houston County
Sex, Male Age, 24
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Reads & writes
Profession of Religion, Roman Catholic
Habits, no history of intemperance
Nativity, Minnesota: father's, Luxemborg: mother's, Belgium
Physicians Committing, D. C. Rhines and W. E. Browning
Correspondents, Peter Sac Marie, Caledonia Minn (father) lives 2 miles in country
Family Physician: has none: Joseph Sac Marie, Caledonia (brother) lives in Caledonia

No. for Year, 219
Insane Relatives,
Cause Exciting,
Cause Predisposing,
Form, Acute
Accompanying Bodily D
Suicidal or not,
Date of this Attack,
Duration,
No. of Attack, 2nd (one, 2½ years ago)
No. of Admission, 1st —
Age First Attack, about 21
Time of Leaving,
Time in Hospital,
Result,

from.'
"Another thing, boys—and that is, get an early start. The boy in business who starts with a manual school education at 17 or 18 will get a start that the boy who goes through college will never catch up with, other things being equal. That does not apply to the professions, of course—only to business Out of 40 men I know who are great leaders in the business world, only two are college graduates."

SAVED BY PET RATTLERS.

Warned Their Owner of a Fire by Giving the Alarm.

The other night Leve Dalton, who lives in the mountains nine miles east of Morgantown, W. Va., swore out a warrant before Justice M. Hayes for the arrest of Ed Hart, a neighbor, whom he charges with firing grass and leaves, thereby burning his fences and endangering his home.

Examination on Admission by Dr. E. Z. Wanous *Date of* June 29/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused: Sluggish
MEMORY, Past Events, Impaired
Recent Events, " " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, Poor
Special Subjects, " "
Own Mental State, Does not appreciate Condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, None 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).
Father, Dead
Paternal Relatives, No history of Insanity
Mother, Dead
Maternal Relatives, No Insanity
Brothers and Sisters, well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
right eye has been injured: also some scars over eye: cause not known.
HABITS, ~~Drinking~~ and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, headache
OCCUPATION, Healthy or not, farmer
Detail Date, Duration, and Character of Previous Attack, if any,
2½ years ago
Sleep, — Appetite, — Bowels, —
very irregular

Personal and Medical History of Philip Sac-Marie

PHYSICAL CHARACTERISTICS.

HEIGHT, 6ft PRESENT WEIGHT, 197# USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, mentioned above Condition of Skin, ✓
TONGUE, Coatings, Promptness of Movement, Clear
PUPILS, Equality, — Size, normal Response to Light, normal Accommodation, normal
SIGHT, Impaired
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, right eye impaired
HEARING, good
COORDINATION, Arms, Normal Legs, Normal Grasp, —
TREMORS, Hands, None Tongue, ✓ Facial Muscles, General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, Slow, Yes
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity, normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES,
full
LUNGS,
Chest Symmetry: Sym
Expansion: Good
Breath Sounds: Normal

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

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

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

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

The patient is depressed & confused: his statements are entirely wrong, from history of Commitment, says he is 40 years old; married & has 4 children; that he has lived with his family: that his father is dead &c" — Is of low mental development. —

Personal and Medical History of Philip Sac-Marie

1901

This patient was brought here by Sheriff F. H. Evans, attended by D. P. Stewart, in fair condition and with following history of case. There is no history of consanguinity, nor heredity. This is not 1st attack: one occurred 2½ years ago; condition growing worse: no treatment: first symptoms of this attack manifested by talking and laughing to himself: disease seems increasing: not variable: Derangement now shown by delusion as to the ownership of property. He is disposed to injure others, but not suicidal: no filthy or destructive habits: no previous peculiarities noted: no history of intemperance: nor of any severe disease &c or head-injury. He has been confined one night, in County Jail. Supposed cause of the disease is Lightning-stroke: treatment none: On personal examination, delusions mentioned. Commitment of said Philip Sac Marie recommended because Sec 17. No 1. 2 & 5.

June 28 On admission, was put on B³ (G.H.N. Sft. Complexion sandy: hair brown: eyes blue: condition of skin good: spot in right eye: scars on forehead: scar on upper lip: scar on right side: one on right knee: is clean: Teeth good: one gone, right lower jaw: behavior good: Exc'ly harmless) -

" " Received on Ward; given bath: seems much confused & delusional. July 2. Does

July 2/31 not talk with anyone. Does not appreciate his condition. July 31. No special change

Aug 1 in patient's condition. Aug 1. Wt 200#. Oct 1 Wt 206#. Will rarely talk: has poor memory.

Oct 1 lies around, on floor: rather demented. Nov 1. Wt 208#. Jany 25/02. Transferred to B²

1902 Jany 31 No change, mentally: very quiet: indolent: discontented: health fairly good. —

Feb. 1/02 Wt. 198#; Feb. 17 Transferred to D²; Mar. 1/02 Taken out to work on farm, does not do much; Mar. 16 Complains of lame back; does no work. Aug. 1 Wt. 160#.

1903 Jan 31. Worked little on farm during fall; nothing now; contrary; surly; habits clean. In fair physical health; sleeps and eats well. (Dr. Chapple)

Personal and Medical History of

Personal and Medical History of Ole Nelson #2

Whole No. 5857.
Residence, Washington Co.
Became resident of state over 6 years ago: of County Do.
Date Admission, June 29th 1901.
Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.
How Sent, Frank. T. Nelson, Jof P. Washington County
Sex, Male Age, 40
Civil Condition, single
Children, none Age Youngest Child, ✓
Occupation, Laborer
Degree Education, Unknown
Profession of Religion, Unknown
Habits, Unknown
Nativity, Sweden: parents also born there
Physicians Committing, T. C. Clark and B. J. Merrill
Correspondents, none given in papers
(From Poor Farm)

No. for Year, 220.
Insane Relatives, Unknown
Cause Exciting, Unknown
Cause Predisposing, previous attacks
Form, Chr. Mellancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, Not, but may injure others.
Date of this Attack, Thursday night (27th)
Duration, - 2 Days -
No. of Attack, Not 1st (4 or 5 since Feby 1901) -
No. of Admission, 1st (was at County Alms-house)
Age First Attack, 39 past
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* June 30/1901

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, not appreciate condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
rather depressed
DELUSIONS, Systematized, Transitory,
Special Subjects,
none obtainable
HALLUCINATIONS, ✓
ILLUSIONS, ✓
SUMMARY,

HISTORICAL.
LENGTH INVASION, ✓
ONSET, Gradual or Sudden, ✓
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Nothing Known
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
no
HABITS, Drinking and Smoking, at one time
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, no
Detail Date, Duration, and Character of Previous Attack, if any,
✓
Sleep, Appetite, Bowels,
poor

Personal and Medical History of Ole Nelson #2

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 PRESENT WEIGHT, 125# USUAL WEIGHT, NUTRITION, poor
WOUNDS, Abnormalities, no Condition of Skin, bronzed
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, ✓
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, ✓
HEARING, ✓
COORDINATION, Arms, normal Legs, normal Grasp, —
TREMORS, Hands, Coarse Tongue, " Facial Muscles, — General, ✓
PATELLAR REFLEX, sluggish Other Reflexes, ✓
ARTICULATION, Slurred, ✓ Hesitating, ✓ Slow, yes
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
Apex Beat,
Murmurs, none noted
ARTERIES,
Sclerotic
LUNGS,
Chest symmetry: yes
Expansion: poor
Breath Sounds: Emphysematous

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

EXAMINATION URINE, Quantity, Sp. g. 1020 Reaction, acid Color and Appearance, Dark yellow cloudy
Albumen, Heat: no: Nitric acid: no: Sugar, Fehling's solution no: Diazo, no:
Casts and Crystals,
Passed 7-1-1901. — Examined 7-1-1901.
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).

The patient remains very quiet: rather fearful, but will not answer only occasional questions: apparently of low mental development: has been an inmate of poor farm: no delusions obtainable: none stated: Physically is emaciated: seems very nervous:

Personal and Medical History of Ole Nelson #2

1901

This patient was brought here by Ignatius Fazendin, in poor physical condition & with following history of case. As to any consanguinity or heredity, unknown. This is not 1st attack; others occurred, 4 or 5 since February 1901: at no time sane but violent from 10 to 15 hours, when suffers: has not been sent to hospital: First symptoms of this attack manifested on Thurs. night; chases women; excessively talkative; incoherent talk: disease seems increasing. Variable: ordinarily, does not talk, nor even move. Derangement now shown on no particular subject, except excessive infatuation for women: abnormal sexual desires: no disposition to injure others, save as above. Is not suicidal: no filthy or destructive habits. No previous peculiarities noted, except probably a masturbator: forced to go to meals, and to eat. As to any history of intemperance, unknown: as to any severe disease &c or head-injury, unknown. He has been confined at County Alms-house. Cause of disease, unknown: no treatment, except restraint. Facts learned on personal examination, none, save to confirm above.

June 29 On admission, was put on B3 (G.H.N. Report: Complexion dark: hair dark-brown: eyes blue; condition of skin fair: 6 small moles on back of shoulders: small dark spot on right hip: varicose veins on both legs: eruptions on abdomen: is clean: Teeth: 5 old snags in upper jaw: 10 in lower jaw: behavior good: Examined by Case & Howe)

" 7/30 Received on ward: given bath: June 30. Transferred to TW: put to bed. July 13. Patient

July 13/15 quiet: seldom talks: manifests no special peculiarities: July 15. Given clothes and

31 got up. July 31. No change to report. Aug 1. Wt 113# Aug 31. Seldom speaks: quiet.

Sept 1 Wt 122# Oct 1. Transferred to A4. Oct 24. Patient has, part of time, refused nourishment:

Oct 24 and has been rather weak & stupid. Jany 7/02. Transferred to TW. Jany 24. Moved

Jany 24/31 back to A4. Jany 31. Quiet: well behaved: no special change, mentally: physically, rather weak.

Feb. 1/02 140#. Quiet and well behaved; does not work; seldom speaks. Jan. 31/03. 154#. Works some now; but has remained the same during the whole year.

Personal and Medical History of

Personal and Medical History of Gottlieb Poff

Whole No. 5859.
Residence, Carlston, Freeborn County
Date Admission, 1st July 1901.
Admitted by Dr. L. A. Linton hour, 7 45 P.M.
How Sent, Herman Glackmer, J.of P. Freeborn County
Sex, Male Age, 36
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Laborer
Degree Education, partially educated
Profession of Religion, not a church member
Habits, not intemperate
Nativity, Germany: Parents also born there
Physicians Committing, G. W. Barck and W. E. Todd
Correspondents, J. H. Bice, Freeborn, Freeborn Co., Minn
"no relatives in this Country"

No. for Year, 222.
Insane Relatives, None
Cause Exciting, Dont Know
Cause Predisposing, chronic
Form, ~~[illegible]~~
Accompanying Bodily Disorder, nervousness.
Suicidal or not, propensity active
Date of this Attack, July 1900
Duration, about a year —
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, 35
Time of Leaving, March 11th 1902
Time in Hospital, 8 Mos. 10 Dy
Result, Improved: Discharged Sept 11-1902 By Bof. C.

Examination on Admission by Dr. E. J. Wanous *Date of* 2 July 1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Somewhat confused
MEMORY, Past Events, good
Recent Events, " Special Subjects,
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
✓
REASONING POWER, Ordinary Subjects, fair
Special Subjects, "
Own Mental State, does not appreciate condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Exalted
DELUSIONS, Systematized, Transitory,
Special Subjects, ✓
HALLUCINATIONS, of hearing
ILLUSIONS, ✓
SUMMARY,

HISTORICAL.
LENGTH INVASION, ✓
ONSET, Gradual or Sudden, ✓
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead: heart trouble
Paternal Relatives, no history of Insanity
Mother, Dead: Stomach trouble.
Maternal Relatives, no history of Insanity
Brothers and Sisters, 3 3 well.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
No
HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS,
OCCUPATION, Healthy or not, Farming
Detail Date, Duration, and Character of Previous Attack, if any,
No
Sleep, Appetite, Bowels,
poor

Personal and Medical History of Gottlieb Poff

49/225
M. Gottlieb Poff
Copy of Order for Hearing Petition of J. H. Bice on July 29/1901 at Albert Lea Minn for appointment of as guardian for Gottlieb Poff insane; served and ~~service admitted~~ filed July 10/1901.
(Papers filed with commitment papers.)

RACTERISTICS.
USUAL WEIGHT, NUTRITION, well nourished
t arm Condition of Skin, clear
upt
se to Light, Yes Accommodation, Yes
normal Grasp, other tests readily, firm and steady
TREMORS, Hands, No Tongue, — Facial Muscles, — General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, normal
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES,
normal
LUNGS,
Chest symmetry: sym
Expansion: good
Breath Sounds: normal

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

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

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

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

The patient appears somewhat confused & exalted: has been living alone: says "people trouble him, nights, by coming around his house, beating drums, singing & shouting to him: also troubled by some woman, who, he thinks, wants him to marry her: often hears her speaking to him, miles away".
patient is very hallucinatory —

Personal and Medical History of

Whole No. 5859.

Residence, Carlston, Freeborn County

Date Admission, 1st July 1901.

Admitted by Dr. L. G. Linton hour, 7 P.M.

How Sent, Herman Glackmer, J of P. Freeborn County

Sex, Male Age, 36

Civil Condition, single

Children, — Age Youngest Child, —

Occupation, Laborer

Degree Education, partially educated

Profession of Religion, not a church member

Habits, not intemperate

Nativity, Germany: Parents also born there

Physicians Committing, G. W. Barck and W. E. Todd

Correspondents, J. H. Price, Freeborn, Freeborn Co., Minn

"no relatives in this Country"

Cause

Form, [illegible]

Accompanying Bodily Disc.

Suicidal or not, propensity

Date of this Attack, July 1900

Duration, about a year —

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 35

Time of Leaving, March 11th 1902

Time in Hospital, 8 Mos. 10 Ds

Result, Improved: Discharged Sept 11-1902 By Bof. C.

Examination on Admission by Dr. E. J. Wanous *Date of* 2 July 1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Somewhat confused

MEMORY, Past Events, good

Recent Events, " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

✓

REASONING POWER, Ordinary Subjects, fair

Special Subjects, "

Own Mental State, does not appreciate condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Exalted

DELUSIONS, Systematized, Transitory,

Special Subjects, ✓

HALLUCINATIONS, of hearing

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Dead: heart trouble

Paternal Relatives, no history of Insanity

Mother, Dead: stomach trouble.

Maternal Relatives, no history of Insanity

Brothers and Sisters, 3 3 well.

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

No

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not, Farming

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

No

Sleep, Appetite, Bowels,

poor

Personal and Medical History of Gottlieb Poff

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10 in PRESENT WEIGHT, 160 lbs USUAL WEIGHT, NUTRITION, well nourished

WOUNDS, Abnormalities, "Tattoo" mark on right arm Condition of Skin, clear

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, ✓

HEARING, good

COORDINATION, Arms, normal Legs, normal Grasp, other tests readily, firm and steady

TREMORS, Hands, No Tongue, — Facial Muscles, — General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

normal

LUNGS,

Chest symmetry: sym

Expansion: good

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, poor.

BOWELS, Present Condition, regular

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

The patient appears somewhat confused & exalted: has been living alone: says "people trouble him, nights, by coming around his house, beating drums, singing & shouting to him: also troubled by some woman, who, he thinks, wants him to marry her: often hears her speaking to him, miles away".

patient is very hallucinatory —

Personal and Medical History of Gottlieb Poff

1901

This patient was brought here by C. M. Wilkinson attended by J. H. Bice, in fair physical condition, and with following history of case. There is no history of consanguinity nor heredity. This is 1st attack; first symptoms manifested July 1900; thought people came around him: disease seems increasing: variable & with rational intervals, but these not regular. Derangement now shown in that he imagines that women come round him and annoy him. Is not disposed to injure others. Has not attempted suicide, but propensity now active: no filthy or destructive habits. No previous peculiarities noted: no history of intemperance, nor of any severe disease &c or head injury. He has not been restrained or confined. Dont know supposed cause of the disease: treatment, none. On personal examination, patient is found to be nervous.

July 1 On admission, was put on B3 (G. 8 H. N. B. Pt. Complexion sandy: hair sandy: eyes blue: condition of skin, good: scars on first finger of left hand: and scar on left thumb: is dirty. Teeth: one gone, right lower: one gone, left lower; behavior good. Examined by Blood & Howe)-

" " Received on Ward: given bath: patient is delusional & hallucinatory: says he hears girls talking to him". July 6. Wants to return home: reasoning power is good. July 22. Transferred to A2.

July 6/22 31 Works faithfully & intelligently in "Centre". July 31. Seems improved mentally and is quite rational. Aug 1. Wt 164# Oct 30. Seems cheerful: is quiet & well-behaved: works about "Centre": "Thinks he is imposed upon by being kept here": "That he was pursued by enemies". Nov 1. Wt 165" - Jany 27/02. To B2. Jany 31 - Until lately, has been quiet and well-behaved; working well, both on & off the ward. Acted rather foolish, at times, but talked sensibly, for most part. Recently has been restless and noisy at night. Mar 11 Eloped today: has been trusted: has had parole: worked some in "Centre": has behaved fairly well, but his delusions are, at times, quite manifest. Feb. 1/02. In good physical condition; talk somewhat incoherent. Mar. 11/02 Patient eloped from the hospital today. Has improved as regards his condition, during the past month.

Aug 1 Oct 30 Nov 1 1902 Jany 31 Mar 11

Personal and Medical History of

Personal and Medical History of Joseph Drazin

Examinations made 3rd & 6th days of July 1901.

Whole No. 5860.

Residence, not given

Resident of Minnesota 6 years: of County 1 year

Date Admission, 6th July 1901.

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

How Sent, Joseph Leonard, Jail. Otter Tail County

Sex, Male Age, 23

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, Yes: Bohemia Language

Profession of Religion, Catholic

Habits, No history of intemperance

Nativity, Bohemia: Parents also born there.

Physicians Committing, J. G. Cross and A. L. Adams

Correspondents, Chas. Irke (Employer) Oronoco, Minn

No. for Year, 223.

Insane Relatives, No: Nothing can be learned -

Cause Exciting, Drug - poisoning

Cause Predisposing, not stated

Form, Acute Mania - in Patient

Accompanying Bodily Disorder, None mentioned

Suicidal or not, not attempted, but threatens self-Destruction

Date of this Attack, July 2.

Duration, — 4 Days -

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, — 23 -

Time of Leaving, July 20th 1901

Time in Hospital, - 14 Ds -

Result, Recovered: Discharged 11/22/1901

Examination on Admission by Dr. E. J. Warnes *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Good

Recent Events, Impaired Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

REASONING POWER, Ordinary Subjects, Poor

Special Subjects, " "

Own Mental State, ✓

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

DELUSIONS, Systematized, "being drugged" Transitory, ✓

Special Subjects, ✓

HALLUCINATIONS, of hearing

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, —

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Mother died of Phthisis pulmonalis

Father, Living - well

Paternal Relatives, No Insanity

Mother, Dead: Insane 4 years

Maternal Relatives, Now Insane

Brothers and Sisters, One dead

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
No

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches

OCCUPATION, Healthy or not, Farming

Detail Date, Duration, and Character of Previous Attack, if any,
No

Sleep, Poor Appetite, Poor Bowels, Irregular

Personal and Medical History of Joseph Drazin

Crazed by Circus Lemonade.

A young man employed as a farm laborer, Joseph Drazin by name, claimed in the probate court that he was under the influence of knock-out drops administered to him in circus lemonade. He was feeling all right until he drank the stuff at the circus. The next he realized was finding himself in jail Tuesday night. He was out of his mind on Wednesday but when examined before Judge Leonard declared that his delirium was due to knock-out drops. His watch was gone and $11 in cash, he said. The examination was continued till Saturday afternoon, when Mr. Drazin was found to be still far from a normal mental condition. At times he would be violent and again perfectly quiet. In the latter spells he would talk rationally and confirm his first story as to the cause of his delirium. In order that he might have necessary treatment and be under watchful care, Drazin was committed to the state hospital.

PHYSICAL CHARACTERISTICS.

½ PRESENT WEIGHT, 151 lb USUAL WEIGHT, NUTRITION, fair

, No Condition of Skin, Normal

mptness of Movement, Clear

Equal Size, normal Response to Light, Normal Accommodation, Normal

aret in right Eye

t, Arcus Senilis, or other troubles, Strabismus

Good

, Normal Legs, Normal Grasp, Other tests good

No Tongue, — Facial Muscles, — General,

Normal Other Reflexes,

d, Normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, Irritable

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest Symmetry: Symm

Expansion: Good

Breath sounds: Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good

BOWELS, Present Condition, Constipated

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

The patient seems confused. Thinks he was "doped" at the Circus & have his money taken away from him. Was found on the streets very much excited and delirious, partly due, perhaps, to alcoholism.

His mother was insane: appears to have some taint of heredity: Physical condition good.

Personal and Medical History of Joseph Drazin

Examinations made 3rd & 6th days of July 1901.

Whole No. 5860.

Residence, not given

Resident of Minnesota 6 years: of County 1 year

Date Admission, 6th July 1901.

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

How Sent, Joseph Leonard, Jof P. Olmsted County

Sex, Male Age, 23

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farmer

Degree Education, yes: Bohemia Language

Profession of Religion, Catholic

Habits, no history of intemperance

Nativity, Bohemia: parents also born there

Physicians Committing, J. G. Cross and A. S. Adams

Correspondents, Chas. Irke (Employer) Oronoco, Minn

No. for Year, 223.

Insane Relatives, No: nothing can be learned —

Cause Exciting, Drug-poisoning

Cause Predisposing, not stated

Form, ~~Acute Insania~~ — A Paton

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not attempted, but threatens self-destruction

Date of this Attack, July 2.

Duration, — 4 Days —

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, — 23 —

Time of Leaving, July 20th 1901

Time in Hospital, — 14 Ds.

Result, Recovered: Discharged 11/22/1901

Examination on Admission by Dr. E. Z. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Good

Recent Events, impaired Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects, " "

Own Mental State, —

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

DELUSIONS, Systematized, "being drugged" Transitory, —

Special Subjects, —

HALLUCINATIONS, of hearing

ILLUSIONS, —

SUMMARY,

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, —

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Mother died of phthisis pulmonalis

Father, Living - well

Paternal Relatives, no Insanity

Mother, Dead: Insane 4 years

Maternal Relatives, none Insane

Brothers and Sisters, one Dead

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
no

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, headaches

OCCUPATION, Healthy or not, Farming

Detail Date, Duration, and Character of Previous Attack, if any,
no

Sleep, poor Appetite, poor Bowels, irregular

Personal Joseph Drazin

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7½ PRESENT WEIGHT, 151# USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, no Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, clear

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

SIGHT, Impaired in right eye

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

HEARING, Good

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

TREMORS, Hands, no Tongue, — Facial Muscles, — General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, irritable

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,
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,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good

BOWELS, Present Condition, Constipated

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

The patient seems confused. Thinks he was "doped" at the circus to have his money taken away from him. Was found on the streets very much excited and delirious, partly due, perhaps, to alcoholism.

His mother was insane: appears to have some taint of heredity: physical condition good.

Personal and Medical History of Joseph Drazin

1901

This patient was brought here by Sheriff E. H. Vine, attended by Walter Smith, in fair physical condition, and with following history of case. There is no history of consanguinity: as to any insane relatives, no; nothing can be learned. This is 1st attack: first symptoms manifested July 2: hallucination; believes he is persecuted: disease appears decreasing: variable and with rational intervals, but these are not regular. Derangement now shown in that he threatens self-destruction: is fearful of imaginary foes. Is not disposed to injure others. Has not attempted suicide: no filthy or destructive habits. Previously, was forgetful, at times. No history of intemperance: nor of any severe disease &c or head-injury: He has been confined, 4 Days, in County Jail. Supposed cause of Disease is Drug-poisoning: Treatment given, antispasmodic and Eliminative. On personal examination, facts learned as stated above. It is probable that drugs were administered by travelling show-man, tending to create delusions, which are of temporary nature.

July 6 On admission, was put on B3 (G. H. N. R. H. Complexion dark: hair brown: eyes gray: condition of skin good: mole on back: Scars: one on little finger of left hand, one on left knee, one on right side of upper lip: eruptions on back of thighs: is clean: Teeth: one gone left upper jaw. Behavior good: Examined by Howe & Edison) -

" " Received onward: given bath: has an idea he was "doped" at Circus-grounds: seems

13/14 somewhat nervous and confused. July 13. visited by friend - July 14 Works onward. —

20 Patient seems to have recovered his mental condition & was taken home by a friend.

Discharged

Personal and Medical History of

Personal and Medical History of Gustave Ewend or Ewend

Whole No. 5863

Residence, Faribault County.

Became resident of Minnesota about 1875. of County, about 1875

Date Admission, 8th July 1901.

Admitted by Dr. E. J. Wanous hour, 4.30 P.M.

How Sent, John W. Vance, Jeff. Faribault County

Sex, Male Age, 53

Civil Condition, Married

Children, Ten Age Youngest Child, —

Occupation, Farming

Degree Education, Common School

Profession of Religion, Lutheran

Habits, Drinks liquor

Nativity, Germany: parents also born there.

Physicians Committing, G. S. Smart and A. J. Franklin

Correspondents, Julia Ewand (wife) Blue Earth. Minn

No. for Year, 226.

Insane Relatives, None

Cause Exciting, not stated: Probably Intemperance

Cause Predisposing, previous attacks

Form, Ch. ~~[illegible]~~

Accompanying Bodily Disorder, None mentioned

Suicidal or not, Threatens to shoot family & himself

Date of this Attack, July 2d 1901

Duration, — 6 days —

No. of Attack, Several —

No. of Admission, 2nd

Age First Attack, 45 — 50.

Time of Leaving, 17th July 1902.

Time in Hospital, 1 Year — 9 Days

Result, Recovered: Disgd. Jany 13/03 By Supt

Examination on Admission by Dr. E. J. Wanous *Date of* Augt 28/1901.

(Dictated)

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear — fairly quick

MEMORY, Past Events, fair

Recent Events, good Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct

REASONING POWER, Ordinary Subjects, fair

Special Subjects, —

Own Mental State, —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather exalted

DELUSIONS, Systematized, Transitory,

Special Subjects,

no delusions obtainable

HALLUCINATIONS, none

ILLUSIONS, none

SUMMARY,

✓

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, sudden

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

Father, Dead

Paternal Relatives, no history of Insanity

Mother, Dead

Maternal Relatives, no history of Insanity

Brothers and Sisters, well: Children 9 — well

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

—

HABITS, Drinking and Smoking, Drinker

HEADACHES, VERTIGO, OR CONVULSIONS, None

OCCUPATION, Healthy or not, farmer

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

previously committed here

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of Gustave Ewend or Ewend

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 9 in PRESENT WEIGHT, 146 lb USUAL WEIGHT, — NUTRITION, good

WOUNDS, Abnormalities, varicose veins, left leg Condition of Skin, bronzed

TONGUE, Coatings, Promptness of Movement, Clear

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

SIGHT, wears glasses

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, ptosis of Right eyelid

HEARING, Good

COORDINATION, Arms, normal Legs, " " Grasp, " "

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

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, Hesitating, somewhat Slow,

FACIAL EXPRESSION, rather depressed, by spells — Sensibility,

HEART, Regularity, irritable

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

normal

LUNGS,

Chest symmetry: Sym

Expansion: good

Breath sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, regular

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

Patient, on admission, seemed somewhat disturbed & excited: is easily irritated: by spells, depressed: worries about family: has threatened to do them harm, when at home. Generally excited by alcoholic debauchery; when not drinking, gets along quite well. General physical condition is good.

Personal and Medical History of Gustave Ewend or Ewend

1901

This patient was brought here by G.W. Freer, attended by Charles Freer, in fair physical condition, and with following history of case. Parents or grand-parents, no relations: no insane relatives: this is not 1st attack; another occurred July 30-1900 - Discharged April 30-1901. (Had been at Rochester State Hospital): when he first returned, seemed better for 2 or 3 days; then, as bad as before. First symptoms of this attack manifested July 2nd 1901: threatened to kill his family. Disease appears increasing: variable: attacks are not regular: has rational intervals. Derangement now shown in that he threatens to shoot his family and himself; keeps gun loaded: Is disposed to injure others: has not attempted suicide, but threatens to injure others and himself: propensity now active. No filthy habits: had broken chairs and other furniture. Previously, showed an irritable temper; abusive talk to family. He drinks liquor: had an injury to head, at twelve years of age: has been confined at Rochester Asylum, July 30-1900 to Apl 30-1901(?). Supposed cause of disease is not stated. Sent to Rochester, for treatment, July 30-1900 - On personal examination, is excitable and talkative, abuse language about his family. (N.B. As above stated, patient was here before, from July 30-1900 to Oct 30-1900, and discharged Apl 30-1901 as recovered. - Form of Insanity: Alcoholism: has had several attacks: see Vol 47 p 121 No 5635)

July 8 On admission, was put on B3. (G.H.N. R'pt. Complexion dark: hair black: eyes gray: Condition of skin good: varicose veins, left leg: Teeth in very poor condition: 5 gone, upper jaw: 3, lower jaw. Behavior good: Examined by J. F. Blood). —

" 11/11 Received on Ward: seems somewhat destructive & depressed. July 11. Seems very nervous - says "he had trouble with his family". July 15. Is better: assists with work. July 31. In good condition: mental trouble probably due to alcoholism. Aug 1. Wt 159# —

15/31 Aug 1 31 1902 Patient restless: anxious to go home. Jany 31/02. Worked some, for a while, in carpenter-shop.

Jany 31 Recently, was somewhat noisy & talkative, during night: is quick-tempered: rather childish in his talk, concerning his own trouble, but expresses no definite delusions. Feb. 1/02 164#

Patient shows no delusions; but is rather silly and shows somewhat of feebleness of mind. July 17/02 Eloped from Hospital today. Has been very anxious to get away for a long time.

Personal and Medical History of

Personal and Medical History of Patrick Boyne

Whole No. 5864. No. for Year, 227.

Residence, Dresback, Minn. Insane Relatives, none

Became resident of State of Minnesota abt 1866. Of County abt 1867. Cause Exciting, Masturbation

Date Admission, 9th July 1901. Cause Predisposing, previous attacks

Admitted by Dr. E. J. Parsons hour, 4:00 P.M. Form, ~~Melancholia (with dementia)~~ Primary Dementia

How Sent, D. C. Vance, Jof P. Winona County. Accompanying Bodily Disorder, "results" of masturbation

Sex, Male Age, 36 (?) Suicidal or not, Suicidal

Civil Condition, single Date of this Attack, not stated

Children, — Age Youngest Child, — Duration, Probably some time

Occupation, Farming No. of Attack, 2nd (probably several)

Degree Education, very little No. of Admission, 2nd (Was at Mendota. 1903)

Profession of Religion, not a church member Age First Attack, abt 29

Habits, (probably not good; uses a good deal of tobacco) Time of Leaving,

Nativity, London, Eng. (Parents born in Ireland). Time in Hospital,

Physicians Committing, L. H. Munger and Paul. P. Blair Result,

Correspondents, Ed. Boyne, La Crescent, Minn (Bro).
— (3 miles from town) —

Examination on Admission by Dr. E. J. Parsons *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired
Recent Events, Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

REASONING POWER, Ordinary Subjects, Poor
Special Subjects, "
Own Mental State, —

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

DELUSIONS, Systematized, None obtainable ~~Transitory~~
Special Subjects,

HALLUCINATIONS, ✓
ILLUSIONS, ✓
SUMMARY,
patient shows marked loss of memory

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —

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

Father, Dead: Consumption
Paternal Relatives, No Insanity
Mother, Living — well
Maternal Relatives, No Insanity
Brothers and Sisters, 1 bro. died of consumption

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

No

HABITS, Drinking and Smoking, Excess
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
Oct 1-1897 to July 6-1901
Sleep, Good Appetite, good Bowels, Regular

Personal and Medical History of Patrick Boyne

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9½ PRESENT WEIGHT, 138# USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, No Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, badly coated

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

SIGHT, Good

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

HEARING, Good

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

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

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, regular

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

normal

LUNGS,

Chest symmetry: Gym
Expansion: good
Breath Sounds: normal

CRANIAL MEASUREMENTS.

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

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

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, Constipated

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

The patient is of a low mental development: can neither read nor write: has been a hard drinker + smoker; also has been a chronic masturbator. Case appears to be one of a mild dementia, which has followed a former melancholic condition.

Physically fairly nourished + good condition.

Personal and Medical History of Patrick Boyne

1901

This patient was brought here by M. J. Luis, attended by Geo. Eckert, in fair physical condition, with following history of case. There is no history of consanguinity nor of heredity. This is not first attack: (has probably had several attacks): one occurred in 1897, Oct 1st, and was then at Rochester, Minn; discharged Feby 6/1901: result of treatment was temporarily beneficial. He has been confined in Asylum at Mendota, Wis, about 5 months: returned here (probably means home) July 8/1901. Disease seems stationary; there are rational intervals, but these at irregular intervals and duration: apparent mental & physical weakness. Derangement now shown by loss of memory and general incoherence and inaccuracy of statements in conversation: tendency to wander: Is not disposed to injure others: has attempted suicide: took camphor, supposing it to be carbolic acid: propensity not active now: no filthy or destructive habits: not any previous peculiarities that we know of. Patient uses a good deal of tobacco: No history of any severe disease &c or head-injury. He has been in Asylums for most of time for 4 years. Supposed cause of the disease is masturbation: has had Asylum treatment: On personal examination, is apathetic, debilitated, appearance melancholy, evidence of masturbation in appearance of genital organs. N.B. Patient was here before, from Sept 29 – 1897 to June 5 – 1900, and discharged Feby 6 – 1901. improved: See Vol 37 page 257 No 4887. —

July 9 On admission, was put on B3 (G.H.N.R'pt. Complexion fair: hair dark brown: eyes gray: Condition of skin good: is clean: Teeth: one gone, lower jaw: Behavior good: Examined by Jas. F. Blood)

" 1/15 Received on ward: seems confused and demented. July 15. assists with work on ward.

31 Patient is given to "Sprees", and has always been a hard-drinker — July 31. No special

Aug 1/31 change to report, in patient's condition. Aug 1. Wt 135#. Aug 31. Behaves fairly well and is

Oct 17 in good physical condition. Oct 17. Eloped: Brought back at 3 30 P.M. Nov 1 Wt 139# Jany 25 pr. To B2

1901 Jany 31 No change, in any way. Works on ward, whenever asked. Is very quiet: Answers questions briefly. Is considerably demented.

Feb. 1/02 Wt. 133#; May 1 Works regularly in kitchen; quiet & tidy. Aug. 1/02 Wt. 130#. Dec. 29 Trans. to Annex. Jan. 17/03 Visited by friends.

Jan 31 03 Becoming more careless and untidy in habits; listless; demented; works little (Dr. Chapple)

Personal and Medical History of

Personal and Medical History of Nicholas Waggoner

Whole No. 5865.

Residence, St Paul

Resident of State 10 years: of County, 10 years

Date Admission, 9th July 1901

Admitted by Dr. E. Z. Wanous hour, 7.30 pm

How Sent, Henry Gallick, Court Commr. Ramsey Co.

Sex, Male Age, 65 (?)

Civil Condition, Married

Children, - 6 - Age Youngest Child, —

Occupation, Tanner

Degree Education, Common School

Profession of Religion, Catholic

Habits, not known, if intemperate

Nativity, Germany: parents also born there

Physicians Committing, J. S. Gilfillan and John A. Vieregge

Correspondents, no correspondents

Mrs. Nicholas Waggoner, Hastings, Minn (wife) lives on 7th Street

No. for Year, 228.

Insane Relatives, not known

Cause Exciting, not known

Cause Predisposing, probably age

Form, ~~[illegible]~~

Accompanying Bodily Disorder, none mentioned

Suicidal or not, If propensity active?

Date of this Attack, not known

Duration, not known

No. of Attack, not known

No. of Admission, 1st

Age First Attack, not stated

Time of Leaving, April 10 - 1902 since died

Time in Hospital, 9 mos 1 day

Result, Unimproved: Disgd. May 10 - 1902 (By B of C)

Examination on Admission by Dr. E. Z. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, " Special Subjects, ✓

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull

REASONING POWER, Ordinary Subjects, ✓

Special Subjects, ✓

Own Mental State, Does not appreciate Condition

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

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS, ✓

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Dead -

Paternal Relatives, nothing known about family

Mother, Dead -

Maternal Relatives,

Brothers and Sisters,

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

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches

OCCUPATION, Healthy or not, Laborer

Detail Date, Duration, and Character of Previous Attack, if any, No

Sleep, good Appetite, fair Bowels, irregular

Personal and Medical History of Nicholas Waggoner

as possible.

An Old Resident Dead.

Special Cable to The Globe.

HASTINGS, Minn., April 13.—Nicholas O. P. Wagner, of this city, who returned from Rochester last week, died at the residence of his son, H. J. B. Wagner, in Vermillion, this morning, aged seventy years. He was long a resident of Dakota county.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, fair

...es, Double hernia Condition of Skin, bronzed: sluggish

TONGUE, Coatings, Promptness of Movement, coated

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

SIGHT, impaired

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

HEARING, Impaired

COORDINATION, Arms, no Legs, no Grasp, The patient seems very unstable & nervous.

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

PATELLAR REFLEX, Delayed Other Reflexes,

ARTICULATION, Slurred, — Hesitating, yes Slow,

FACIAL EXPRESSION, Sensibility, ✓

HEART, Regularity, irregular

Strength, Sounds, Distinct

Size, Enlarged

Apex Beat, to left & down

Murmurs, mitral trouble

ARTERIES, ✓

LUNGS,

Chest symmetry: Sym

Expansion: poor

Breath sounds: Indistinct on right side.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. 1024 Reaction, acid Color and Appearance, yellow

Albumen, Heat: no: nitric acid - no. Sugar, Fehling's Sol: no: Diazo - no. Slight sediment

Casts and Crystals,

Passed July 11 - Examined July 11

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, Constipated

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

The patient seems very much confused & delusional: memory, in both recent and past events, much impaired. Says "he is two hundred and three years old". Cannot remember anything about being sent here. Has a marked cardiac trouble. Condition due to senility, combined with physical ailment.

Personal and Medical History of Nicholas Waggoner

Whole No. 5865.

Residence, St. Paul

Resident of State 10 years: of County, 10 years

Date Admission, 9th July 1901

Admitted by Dr. E. Z. Wanous hour, 7.30 pm

How Sent, Henry Gallick, Court Commr. Ramsey Co.

Sex, Male Age, 65 (?)

Civil Condition, Married

Children, - 6 - Age Youngest Child, —

Occupation, Tanner

Degree Education, Common School

Profession of Religion, Catholic

Habits, not known, if intemperate

Nativity, Germany: parents also born there

Physicians Committing, J. S. Gilfillan and John A. Vieregge

Correspondents, no correspondents

Mrs. Nicholas Waggoner, Hastings, Minn (wife) lives on 7th Street

No. for Year, 228.

Insane Relatives, not known

Cause Exciting, not known

Cause Predisposing, probably age

Form, senile dementia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, If propensity active?

Date of this Attack, not known

Duration, not known

No. of Attack, not known

No. of Admission, 1st

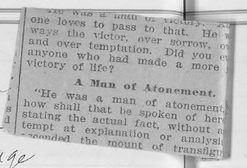
Age First Attack, not stated

Time of Leaving, April 10 - 1902 since died

Time in Hospital, 9 mos 1 day

Result, Unimproved: Disgd. May 10 - 1902 (By B of C)

He was a man of victory. ... one loves to pass to that. He ... ways the victor, over sorrow, ... and over temptation. Did you ... anyone who had made a more ... victory of life?



A Man of Atonement.

"He was a man of atonement ... how shall that be spoken of her ... stating the actual fact, without ... tempt at explanation or analysis ... ascended the mount of transfig...

Examination on Admission by Dr. E. Z. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, " Special Subjects, ✓

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull

REASONING POWER, Ordinary Subjects, ✓

Special Subjects, ✓

Own Mental State, Does not appreciate Condition

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

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS, ✓

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Dead -

Paternal Relatives, nothing known about family

Mother, Dead -

Maternal Relatives,

Brothers and Sisters,

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

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches

OCCUPATION, Healthy or not, Laborer

Detail Date, Duration, and Character of Previous Attack, if any, No

Sleep, Good Appetite, fair Bowels, Irregular

Personal and Medical History of Nicholas Waggoner

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, Double hernia Condition of Skin, bronzed: sluggish

TONGUE, Coatings, Promptness of Movement, coated

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

SIGHT, impaired

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

HEARING, Impaired

COORDINATION, Arms, no Legs, no Grasp, The patient seems very unstable & nervous.

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

PATELLAR REFLEX, Delayed Other Reflexes,

ARTICULATION, Slurred, — Hesitating, yes Slow,

FACIAL EXPRESSION, Sensibility, ✓

HEART, Regularity, Irregular

Strength, Sounds, Distinct

Size, Enlarged

Apex Beat, to left & down

Murmurs, mitral trouble

ARTERIES, ✓

LUNGS,

Chest symmetry: Sym

Expansion: poor

Breath sounds: Indistinct on right side.

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

EXAMINATION URINE, Quantity, Sp. g. 1024 Reaction, acid Color and Appearance, Yellow

Albumen, Heat: No: nitric acid - no. Sugar, Fehling's Sol: No: Diazo - no. slight sediment

Casts and Crystals,

Passed July 11 - Examined July 11

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, Constipated

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

The patient seems very much confused & delusional: memory, in both recent and past events, much impaired. Says "he is two hundred and three years old". Cannot remember anything about being sent here. Has a marked cardiac trouble. Condition due to senility, combined with physical ailment.

Personal and Medical History of Nicholas Waggoner

1901

This patient was brought here by Deputy Johnson, in fair physical condition. History of case is rather meagre. There is no history of Consanguinity. If this is the 1st attack; if sent to a hospital; when first Symptoms of this attack were manifested, and in what way; if disease is increasing, decreasing or stationary; if variable & there are rational intervals; if disposed to injure others, or if he has attempted suicide (Propensity now active?); if disposed to filthy or destructive habits; if any insane relatives; if any previous peculiarities; if he or parents were intemperate or used any narcotic, all is unknown. Derangement now shown by incoherent ideas, delusions. There is no history of any severe disease &c or head-injury. He has been confined in Police Station, one day. Cause of the Disease is not known; if given treatment, not known. On personal examination, (as stated in No 17): i.e. incoherent ideas & delusions. " " "

July 9 On admission, was put on T.W. (G.H.N. Rift. Complexion dark: hair gray: eyes blue: condition of skin fair: small mole on left side of neck: Sore on right side of back, caused by truss: Is clean: Teeth: 9 out of upper jaw: 8 out of lower jaw: Behavior good: feet and " " legs are swollen. Received on ward: Given bath & put to bed: (is a case of Senility) 11/22 Is confused & wanders about aimlessly. July 11. Extremely restless, all night. July 22 visited Aug 23 by wife. Aug 23 Patient transferred to T.W. Complains of hernia: very restless, all night. Sept 1/2 Put on treatment & improved. Sept 1. Wt 143#. Sept 4. Taken home by Son. 5 Returned today: is rather unruly: quite demented: no special Physical ailment noted. Oct 21 1901 Rather troublesome: hides Spittoons &c. Jany 30. Wt 153#. Jany 31. Patient has continued Jany 31 rather confused: with transitory Delusions & incoherent talk. Behavior rather restless. Feb 1/02. 156#. Is rather dull and demented. Usually appears confused. Is somewhat childish. Mar. 3/02 Had a fainting spell at 10.30 A. M. (Showed heart failure). Shock and Dyspnoea very great; pulse very irregular. Seems to have pain in region of heart. Mar. 6/02 Patient is still in bed. Suffers a good deal from Dyspnoea. Is restless and confused. Mar. 17/02 Still continues restless and confused. Pulse is weak and varies very greatly. Mar. 18/02 Had several sinking spells. Visited by Son. Mar. 31/02 Patient seems to have a good deal of pain in region of the heart. Very restless and has considerable Dyspnoea. Apr. 9/02 Condition appears rather hopeless. Patient was today, taken home by son who wishes to care for him at home.

Personal and Medical History of

Personal and Medical History of Jeff Johnson colored

Whole No. 5867

Residence, Winona, Minn

Became resident of Minnesota about 1856. Of Co. abt 1856

Date Admission, 11th July 1901.

Admitted by Dr. C. L. Chapple hour, 4th P.M.

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

Sex, Male Age, 93 (about)

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Laborer

Degree Education, not educated

Profession of Religion, not a church member

Habits, uses tobacco occasionally; no other stimulant

Nativity, Alabama: parents born in Virginia

Physicians Committing, Hans Lichtenstein & C. P. Robbins

Correspondents, has no relatives known — has been in Poor-House, 30 years.

No. for Year, 230.

Insane Relatives, not as far as known

Cause Exciting, Injury to head ?

Cause Predisposing, " " & probably age

Form, ~~[illegible]~~

Accompanying Bodily Disorder, great weakness

Suicidal or not, not: but violent to others.

Date of this Attack, more than 30 years ago

Duration, — over 30 years.

No. of Attack, 1st —

No. of Admission, 1st (was at Poor house)

Age First Attack, about 62.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. J. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, " " Special Subjects, ✓

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects, " "

Own Mental State, ✓

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

DELUSIONS, Systematized, Transitory, yes

Special Subjects,

HALLUCINATIONS, ✓

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Nothing known

Paternal Relatives,

Mother,

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, No

OCCUPATION, Healthy or not, "poor Farm".

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

Sleep, Appetite, Bowels, impaired

Personal and Medical History of Jeff Johnson

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, No Condition of Skin, ✓

TONGUE, Coatings, Promptness of Movement, Clear

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

SIGHT, Impaired

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

HEARING, Impaired

COORDINATION, Arms, — Legs, — ~~Grasp~~, Hypnosal tests, quite steady

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

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, — Slow,

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES, Normal

LUNGS,

Chest Symmetry: Sym

Expansion: fair

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, irregular

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

The patient appears confused & very forgetful; not able to appreciate his surroundings. Has been a resident of "Winona Poor Farm" for thirty years. —

Personal and Medical History of Jeff Johnson

1901

This patient was brought here by M. J. Luis, attended by William Lambkin, in fair physical condition, with following history of case. As to any consanguinity, cannot tell: not any insane relatives, as far as known. This is 1st attack: has been drawing on him for thirty years. First symptoms of this attack manifested more than thirty years gradual feeblemindedness. Disease seems increasing: no rational intervals: Derangement now shown by incoherence of speech; more or less severe fits of passion, without apparent cause; melancholy; feebleness and deficiency of memory; wanders around; shouts; talks and gesticulates to imaginary persons. He threatens violence, when in passion: has not attempted suicide; propensity not active: no filthy or destructive habits: We do not know of any previous peculiarities: nothing known of his parents; patient uses tobacco occasionally: no other stimulant. There is evidence of fracture of skull, many years ago. Has not been restrained or confined. Supposed cause of the disease is injury to head (?): not any treatment.

On personal examination, he shows feeble judgment and deficiency of memory, childishness & incoherence, delusions. ——— " ———

July 11 On admission, was put on T.W. (G. H. N. R'pt. Complexion black: hair gray & bald: eyes brown: condition of skin, dirty: scars on left buttock: is dirty: teeth in poor condition: Behavior good: Examined by C. A. Vankirk). ———

" " Received on Ward: Given bath & put to bed: seems much confused: talkative: (condition due
25 to senility). July 25. Up & dressed: spends much of the time, "drawing". July 31. No change
31 to report, in patients' condition. Aug 1 Wt 158#. Sep 3. To D3. Jany 1/02 Wt 162#
1902 July 31 No change: has been in fairly good health: talks very irrationally: makes "pictures" - habits slouchy: is harmless.

03 Feb. 1/02 Wt. 161#; Aug. 1 Wt. 162#

Jan 31. Very demented and incoherent; habits untidy; does nothing but stands about and draws pictures on every thing at hand. Peaceable in behavior. (Dr. Shapple)

Personal and Medical History of

Personal and Medical History of Chas Evans #2

Whole No. 5868.

Residence, Hennepin ?

Inmate of Prison: Claims to be from South Tenn.

Date Admission, 11th July 1901.

Admitted by Dr. E. Z. Wanous hour, 7.30 P.M.

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

Sex, Male Age, 27

Civil Condition, married

Children, one Age Youngest Child, —

Occupation, Cigar-maker

Degree Education, Yes: Can read & write

Profession of Religion, Methodist

Habits, Unknown

Nativity, Nebraska; father's Tennessee: Mother's Neb.

Physicians Committing, H. A. Schneider and W. H. Pratt

Correspondents, none given in papers

No. for Year, 231.

Insane Relatives, prisoner has stated Mother died in Asylum

Cause Exciting, Unknown

Cause Predisposing, heredity possibly

Form, Acute Melancholy

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not

Date of this Attack, about 3 or 4 weeks

Duration, about 3 or 4 weeks.

No. of Attack, not stated

No. of Admission, 1st here.

Age First Attack, not given

Time of Leaving, 18th Sept 1901 (to State Prison)

Time in Hospital, 2 mos. 7 Ds

Result, Recovered: Discharged Nov 22/1901. 6 P.M.

Examination on Admission by Dr. E. Z. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Sluggish

MEMORY, Past Events, Impaired

Recent Events, " " Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects, " "

Own Mental State, —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed

DELUSIONS, Systematized, of persecution Transitory,

Special Subjects,

HALLUCINATIONS, ✓

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Living - well

Paternal Relatives, No Insanity

Mother, Dead - hydrophobia

Maternal Relatives, no

Brothers and Sisters, 5 4

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

Scar on head, about 3 in. long, caused by falling off a train.

HABITS, ~~Drinking~~ and Smoking, to excess.

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Shoe-work, in prison

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

✓

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of Chas Evans #2

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10½ PRESENT WEIGHT, 145# USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, ✓ Condition of Skin, anaemic

TONGUE, Coatings, Promptness of Movement, clear

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

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, no

HEARING, good

COORDINATION, Arms, normal Legs, normal ~~Grasp~~, other tests, steady & firm

TREMORS, Hands, no Tongue, slight Facial Muscles, — General, —

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, ✓ Hesitating, — Slow, Yes

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, none noted

ARTERIES,

normal

LUNGS,

Chest symmetry: Sym

Expansion: good

Breath sounds: "

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Constipated

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

The patient appears somewhat depressed & melancholic. "Thinks people, at the Prison "had it in" for him" and "tried to do him harm" - Case has been a chronic masturbator: is anaemic and weak. Confinement and deprivation have brought on a melancholia.

Personal and Medical History of Chas. Evans #2

1901

This patient was brought here by M. A. Withrow, attended by M. C. Colligan, with following history. If any consanguinity unknown: prisoner has stated mother died in asylum. If this is first attack, not stated: first symptoms of this attack manifested by falling off physical and mental condition; insomnia: about 3 or 4 weeks ago. Disease appears increasing rapidly. Derangement now shown as above, delusions as to persecutions - rapid failure in mental and physical condition. Is not disposed to injure others. Has not attempted suicide: no filthy or destructive habits: no previous peculiarities noted; if addicted to intemperance unknown: Claims he was struck on head by car. Has been under prison discipline. Cause of the disease is unknown: Treatment none. On personal examination, there are noted scar on head: poor memory: slur in speech. - N.B. Copy of Warrant of Commitment accompanied patient: same filed with papers. prisoner sentenced to hard Labor in State prison at Stillwater for the term of 6 years —

July 11 On admission, was put on C! (G.H.N.R.Pt. Complexion fair: hair brown: eyes blue: Condition of skin good: small sore on left arm; vaccination scar on left arm; scars on right leg: scar on top of head: is clean: Teeth: 2 gone, lower jaw: behavior good: Temp. 100° P 70.)

" " Received on Ward: very quiet & well-behaved: does not talk, unless addressed: neat in habits

12 and appearance. T. P. R normal: on regular and extra diet: bowels and urine regular. July 12. Com-

13 -plains of being nervous. July 13. Complains of pain in stomach: given ½ oz salts: T 100° —

15 appeared somewhat confused, this morning: objected to taking of temperature: Is on medicine.

17/18 one teaspoonful before meals. July 17. Objected to medicine. July 18. is quiet & well-behaved —

24 still reticent, but speaks rationally, when addressed. (Appears to be "Shamming") = July 24. - (14-Day record up) No insane ideas noticeable: appears slightly nervous & agitated, at times;

30 (Evidently feigned). Is still on medicine: Works on ward — July 30. Says he does not want to

Aug 2/31 go back to Stillwater — Aug Wt. 157#. Aug 31. No special notes to make —

Sep 18 Returned to State-Prison

Discharged

Personal and Medical History of

Personal and Medical History of Albert J. Krieger

Whole No. 5869.
Residence, Blue Earth Co.
Inmate of State Prison, Stillwater min
Date Admission, 11th July 1901.
Admitted by Dr. E. J. Wanous hour, 7 30 P.M.
How Sent, Frank T. Nelson, Jos P. Washington Co.
Sex, Male Age, 22
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Can read & write
Profession of Religion, Presbyterian
Habits, Unknown
Nativity, Cal. father's Germany: mother's, Ireland
Physicians Committing, W. H. Pratt and H. A. Schneider
Correspondents, none given in papers

No. for Year, 232
Insane Relatives, unknown
Cause Exciting, unknown
Cause Predisposing, not stated
Form, Acute melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not, but will injure others.
Date of this Attack, about 6 weeks ago
Duration, about 6 weeks.
No. of Attack, unknown
No. of Admission, 1st here
Age First Attack, unknown
Time of Leaving,
Time in Hospital,
Result,

Recd Copy of Commitment paper from Warden Walfer in letter Jany 11/1902

NB See Letter of Warden Walfer Feb 28/02 "Sentence expires this day"

Examination on Admission by Dr. E. J. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Somewhat Sluggish
MEMORY, Past Events, good
Recent Events, " " Special Subjects, /
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, Good
Special Subjects, on religious subjects
Own Mental State, Thinks he is well
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, on religious subjects Transitory,
Special Subjects, —
HALLUCINATIONS, ✓
ILLUSIONS, ✓
SUMMARY,

HISTORICAL.
LENGTH INVASION, ✓
ONSET, Gradual or Sudden, ✓
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead
Paternal Relatives, No Insanity
Mother, Living
Maternal Relatives, No Insanity
Brothers and Sisters, 3 1 well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Gonorrhoea, several times: 2 weeks ago, struck by guard: slight abrasion.
HABITS, Drinking and Smoking, So & cess.
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Stone - cutter
Detail Date, Duration, and Character of Previous Attack, if any,
No
Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of Albert J. Krieger

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 3/4 PRESENT WEIGHT, 148# USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, Torex on legs Condition of Skin, —
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, large Response to Light, yes Accommodation, yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, no
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, Does other tests both readily & steadily
TREMORS, Hands, yes Tongue, yes Facial Muscles, General,
PATELLAR REFLEX, Exaggerated Other Reflexes,
ARTICULATION, Slurred, — Hesitating, — Slow, yes
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, irritable
Strength, Sounds, normal
Size, "
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,

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

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

The patient is of low mental development: appears somewhat depressed & melancholic: "Thinks he was sent here because of church-affairs:" "That people were trying to "do him up;" by making him do hard work, and then laugh at him for doing it." Has a skin-trouble: perhaps psoriasis.

Personal and Medical History of Albert J. Krieger

1901

This patient was brought here by Dr. M. A. Withrow, attended by M. C. Colligan, in fair physical condition, with following history of case. If any consanguinity, not stated. if any insane relatives unknown: if first attack is unknown: First symptoms of this attack manifested about 6 weeks ago; peculiar conduct in school; sudden unexpected assaults, without provocation. Disease seems increasing. Derangement now shown by delusions as to persecution; melancholia: assaults without provocation. Patient is disposed to injure others, but has not attempted suicide: no filthy or destructive habits: no peculiarities shown, save as above: if addicted to intemperance unknown; if he has been subject to any severe disease &c or head-injury unknown. He has been under prison discipline. Cause of the disease is unknown. Treatment none. On personal examination, he is melancholy; nothing: Scar on head received, while assaulting prisoner. From testimony introduced Albert J Krieger is insane. N.B. Copy of Warrant of Commitment accompanied patient; same filed with papers. prisoner sentenced to confinement in the Minnesota State Prison at Stillwater, at hard labor, for the term of one year and six months.

July 11 On admission, was put on B3 (9 Hm Rpt complexion dark: hair black: eyes gray: condition of skin fair: large sores on legs: Scars: one on left side of head: one on left forefinger: Scar on top of head: eruptions on face: is clean: Teeth: one gone, upper jaw: one gone, lower jaw: Behavior good: Examined by I. F. Blood) —

" " Received on Ward: has hallucinations of hearing: also is delusional: does not appreciate condition — July 20. Laughs and talks to himself: July 31. But little change noticed.

20/31 Aug 1 In fair physical condition: talks connectedly, but laughs to himself: hears strange voices, at night". Aug 17. Had a "dizzy spell" & fell out of chair & seemed quite

17 Oct 1 helpless: recovered, however, to his normal. Oct 1 Wt 158# — Jany 1/02 Wt 160#

1902 July 31 no improvement: Talks & laughs to himself. Feb. 1/02 153# May 30/02 Rather stupid and listless. Sometimes restless at night. June 15/02 Got into a fight & attacked nurses. Sept. 14/02 Was again pugnacious and had to be held for a few minutes.

03 Jan. 31. Seems to be occasionally inclined to fight; but otherwise his condition has remained unchanged throughout the year. (Dr. Chapple)

Personal and Medical History of

Personal and Medical History of H. A. Larson

Whole No. 5870.
Residence, St. Paul
Became resident of State 1865: of County 3 mos
Date Admission, 11th July 1901.
Admitted by Dr. E. Z. Wanous hour, 7 30 PM
How Sent, E. W. Bazille, J of P. Ramsey County
Sex, Male Age, 58.
Civil Condition, Widower
Children, 7 Age Youngest Child, —
Occupation, Machinist
Degree Education, Common School
Profession of Religion, Baptist
Habits, Intemperate
Nativity, Norway; parents also born there.
Physicians Committing, Hartland C. Johnson and W. G. Richeson
Correspondents, none given in papers

No. for Year, 233.
Insane Relatives, one brother
Cause Exciting, alcohol
Cause Predisposing, previous attks & possibly heredity
Form, Dipsomaniac
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not —
Date of this Attack, 16 days ago
Duration, 16 days.
No. of Attack, 3rd (probably several) —
No. of Admission, 2nd here
Age First Attack, about 52 years
Time of Leaving, August 14 — 1901
Time in Hospital, 1 mos 3 Dr
Result, Recovered: Discharged Nov 22/01

Examination on Admission by Dr. E. Z. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, rather Confused
MEMORY, Past Events, Impaired
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Alert
REASONING POWER, Ordinary Subjects, Poor
Special Subjects, " "
Own Mental State, ✓
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Exalted
DELUSIONS, Systematized, None 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).
Father, Dead —
Paternal Relatives, no Insanity
Mother, Dead —
Maternal Relatives, no insanity
Brothers 3 and Sisters 2, 1 bro. dead
Children — 8 — 7 living — well (especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations). Rheumatism
HABITS, Drinking and Smoking, to excess
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any, Two previous attacks.
Sleep, good Appetite, good Bowels, irregular

Personal and Medical History of H. A. Larson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 PRESENT WEIGHT, 168# USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, No Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, Clear
PUPILS, Equality, Equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, ✓
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, Finger to nose, eyes shut, uncertain. Standing on one foot, swaying. Standing, eyes shut, rather unsteady
TREMORS, Hands, Coarse Tongue, yes Facial Muscles, General,
PATELLAR REFLEX, Sluggish Other Reflexes, —
ARTICULATION, Slurred, normal Hesitating, — Slow,
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none
ARTERIES, normal
LUNGS,
Chest symmetry: Sym
Expansion: good
Breath Sounds: normal

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

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

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

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

The patient has been here before: when admitted, appeared confused, excited: but no delusions were obtained. Case had been on a drinking-spree, which was beginning cause of attack. Cleared up, after being here two days.

Personal and Medical History of H. A. Larson

1901

This patient was brought here by Deputy Johnson, in fair physical condition & with following history of case. If parents or grand-parents related, not known: one brother insane. This is not first attack; others occurred 1 year ago and 3 years ago: Duration of 1st attack 2 mo: 2nd attack 20 mo: has been at Rochester & St. Peter Hospitals. result of treatment, recovery. First symptoms of this attack manifested 16 days ago: by delusions. Disease seems stationary: variable & with rational intervals, but these not regular. Derangement now shown by delusion of persecution. Is not disposed to injure others, nor suicidal; no filthy or destructive habits. no previous peculiarities noted: is addicted to intemperance: no severe disease &c or head-injury. He has been 4 days in jail. Cause of the disease is alcohol. Treatment, none; on personal Examination, nothing mentioned. N.B. Certificate of Jury bears date of 1st July 1901, at which date patient was committed to the "Detention Hospital"; Endorsement duly made on Warrant, 11th July 1901, Committing him here. —

N.B. This is patient's 2nd admission here: Was here before from Sept 1 - 1898 to March 20 - 1899 and discharged Aug 9/99, as improved. Case diagnosed then as "Recurrent Mania". See Vol. 41 page 49 no 5130. He has probably had several attacks. —

July 11 On admission, was put on B3 (G. H. N. Rlpt. Complexion dark: hair, black and gray: eyes gray: Condition of skin good: scars on left thumb: one on little finger. To clean: Teeth: Two gone, upper jaw. Behavior good: Examined by J. F. Wood).

" 1/14 Received on ward: Given bath & change of clothes. July 14. Patient seems much improved:

20/11 Condition is rational: July 20. Transferred to A1. July 21. Had tooth extracted: Keeps on

Aug 14 improving: Aug 14. Patient entirely recovered — (Condition due to alcoholism) —

Was sent home.

Discharged

Personal and Medical History of

Personal and Medical History of John Dablow

Whole No. 5874.

Residence, Goodhue, Goodhue County. Became resident of State of Minnesota in 1864: of County 1864

Date Admission, 12th July 1901.

Admitted by Dr. E. J. Wanous hour, 7:30 PM

How Sent, Axel Haller, Jof P. Goodhue County.

Sex, Male Age, 37.

Civil Condition, Married

Children, Two Age Youngest Child, —

Occupation, Farmer

Degree Education, Common school

Profession of Religion, Lutheran

Habits, No history of intemperance

Nativity, Goodhue County, Minnesota; Parents Germany

Physicians Committing, B. Jacking and A. W. Jones

Correspondents, John Dablow Sr. (Father) Hay Creek, Minn

No. for Year, 237.

Insane Relatives, None

Cause Exciting, Unknown

Cause Predisposing, Chronic

Form, Chr. Melancholia

Accompanying Bodily Disorder, None mentioned

Suicidal or not, predisposition to suicide.

Date of this Attack, Spring of 1900.

Duration, about 15 Months.

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, about 36.

Time of Leaving, May 27 — 1902

Time in Hospital, 10 mos 15 days

Result, Unimproved: Dis. Nov 22 - 1902 by B of C.

Examination on Admission by Dr. E. J. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, impaired

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

REASONING POWER, Ordinary Subjects, Poor

Special Subjects, " "

Own Mental State, Does not appreciate Condition

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).

Father, Living — well

Paternal Relatives, No Insanity

Mother, Dead: cause not known

Maternal Relatives, No Insanity

Brothers and Sisters, Brother dead: very young Children 2 — well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Complains of stomach trouble

HABITS, Drinking and Smoking, Not to excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, farming

Detail Date, Duration, and Character of Previous Attack, if any,
No

Sleep, Poor Appetite, Poor Bowels, Irregular

Personal and Medical History of John Dablow

5874 / 49 / 261

M John Dablow Jr.

Copy of Order for Hearing Petition of John Dablow Sr. father of John Dablow Jr. for appointment of John Dablow Jr last Petitioner — as guardian for John Dablow Jr. insane; served and ~~service admitted~~ filed 23 Augt 1901 Hearing set for 10th Sept 1901 at Red Wing - Minn

(Papers filed with commitment papers.)

RACTERISTICS.

USUAL WEIGHT, NUTRITION, Poor

in Condition of Skin, Sluggish

ulous

nse to Light, Yes Accommodation, Yes

Fingers tremor, eyes shut, normal
Standing on one foot, normal
Normal Grasp, Standing, eyes shut, tongue swaying

TREMORS, Hands, Yes Tongue, Yes Facial Muscles, Yes General,

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, Hesitating, Yes Slow, Yes

FACIAL EXPRESSION, —

HEART, Regularity, Irritable

Strength, Sounds, Distinct

Size, Normal

Apex Beat, "

Murmurs, None

ARTERIES,
Soft

LUNGS,
Chest symmetry: Symm
Expansion: Fair
Breath Sounds: Normal

Sensibility, Normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Fair

BOWELS, Present Condition, Irregular

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

The patient seems of low mental development: acts indifferent & cannot be relied upon regarding answers: Seems very forgetful. Case has been a chronic masturbator, which is partly cause of present condition.
Complains of stomach trouble: also has a very irritable heart.

Personal and Medical History of

Whole No. 5874.

Residence, Goodhue, Goodhue County.
Became resident of State of Minnesota in 1864: of County 1864.

Date Admission, 12th July 1901.

Admitted by Dr. E. J. Wanous hour, 7.30 PM

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

Sex, Male Age, 37.

Civil Condition, Married

Children, Two Age Youngest Child, —

Occupation, Farmer

Degree Education, Common school

Profession of Religion, Lutheran

Habits, No history of intemperance

Nativity, Goodhue County, Minnesota; parents Germany

Physicians Committing, B. Jaehing and A. W. Jones

Correspondents, John Dablow Sr.
(father) Hay Creek, Minn

Insa...

Cause Excit...

Cause Predisposing,

Form, Chr. Mill...

Accompanying Bodily Disorder, no.

Suicidal or not, predisposition to ...

Date of this Attack, Spring of 1900.

Duration, about 15 months

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, about 36.

Time of Leaving, May 27 — 1902

Time in Hospital, 10 mos 15 Ds

Result, Unimproved: Disd. Nov 22 - 1902 by B of C.

Examination on Admission by Dr. E. J. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, impaired

Recent Events, " " Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull

REASONING POWER, Ordinary Subjects, Poor

Special Subjects, " "

Own Mental State, does not appreciate condition

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).

Father, Living — well

Paternal Relatives, no Insanity

Mother, Dead: cause not known

Maternal Relatives, no Insanity

Brothers and Sisters, Brother dead: very young
Children 2 — well

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
complains of stomach trouble

HABITS, Drinking and Smoking, not to excess

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, farming

Detail Date, Duration, and Character of Previous Attack, if any,
no

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of John Dablow

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft 3 PRESENT WEIGHT, 170# USUAL WEIGHT, NUTRITION, poor

WOUNDS, Abnormalities, requires circumcision Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, whitish, tremulous

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

SIGHT, normal

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, no

HEARING, normal

COORDINATION, Arms, normal Legs, normal Grasp, Finger to nose, eyes shut, normal; standing on one foot, normal; standing, eyes shut, some swaying

TREMORS, Hands, yes Tongue, yes Facial Muscles, yes General,

PATELLAR REFLEX, sluggish Other Reflexes,

ARTICULATION, Slurred, Hesitating, yes Slow, yes

FACIAL EXPRESSION, — Sensibility, normal

HEART, Regularity, irritable

Strength, Sounds, Distinct

Size, normal

Apex Beat, "

Murmurs, none

ARTERIES,
soft

LUNGS,
Chest symmetry: sym
Expansion: fair
Breath sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, irregular

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

The patient seems of low mental development; acts indifferent & cannot be relied upon regarding answers: seems very forgetful. Case has been a chronic masturbator, which is partly cause of present condition.
Complains of stomach trouble: also has a very irritable heart.

Personal and Medical History of John Dablow

1901

This patient was brought here by E. J. Lundquist and John Dablow, in poor physical condition, and with following history of case. There is no history of consanguinity nor heredity: this is first attack: first symptoms manifested in Spring of 1900; irritable temper: and absent minded. Disease seems increasing: variable: no regular intervals: De-rangement now shown in his physical condition. Patient is not disposed to injure others; has not attempted suicide, but there is a predisposition to suicide; also a disposition to filthy habits: destruction of clothing &c. No. As to previous peculiarities, he was retiring in habits: shunned society: there is no history of intemperance:- nor of any severe disease &c or head-injury: he has not been confined or restrained. Cause of the disease, unknown: Treatment, none. On personal examination, he sits with his head on his chest, lost in thought; indifferent to surroundings:

July 12 On admission, was put on B³ (G. H. N. R. pt. Complexion dark: hair dark brown; eyes gray: condition of skin good: 2 scratches on right hand: is fairly clean: Teeth: 10 gone, upper jaw; 4 gone, lower jaw: Behavior good; Examined by I. F. Blood).

" " Received on ward: no mental development: "Talks about 5 and 7 controlling his case" frequently found laughing to himself. Says "he is crazy". Does not know what he was

31 sent here for. July 31. No change in patient's condition. Augt 1. Wt 174#. Laughs to ~~him~~

Aug 1/12 himself & acts foolishly: has delusions. Aug 12. Visited by father & John Grosse-

29 Visited by wife: Nov 30. No noticeable change. Jany 31/02. No improvement in

1902 Jany 31 patient's condition: no special change. Feb 1/02 Visited by father. Patient is very dull & demented, though not violent or troublesome. May 27. Taken home by father. Could hardly be said to have improved any

Personal and Medical History of

Personal and Medical History of Henry Funk Sr

Whole No. 5875.

Residence, Town of Glasgow, Minn
Became resident of Minnesota abt 1868. Resident of Co. 1868

Date Admission, 16th July 1901.

Admitted by Dr. C. L. Chapple hour, 7 30 P.M.

How Sent, Malcolm Kennedy, Jo P. Wabasha County

Sex, Male Age, 69.

Civil Condition, married

Children, Nine Age Youngest Child, —

Occupation, Farmer

Degree Education, Not educated

Profession of Religion, Catholic

Habits, Not intemperate

Nativity, Germany: Parents also born there

Physicians Committing, M. H. Lincoln and F. Dow

Correspondents, Henry Funk Jr (Son)
Shelmanton, Minn

No. for Year, 238.

Insane Relatives, wife & daughter demented.

Cause Exciting, unknown

Cause Predisposing, previous attacks

Form, senility

Accompanying Bodily Disorder, None mentioned

Suicidal or not, not

Date of this Attack, abut 9 months ago

Duration, abut 9 months

No. of Attack, 3rd (one in 1896: one in 1900)

No. of Admission, 2nd

Age First Attack, 66 years

Time of Leaving, Eloped, May 7-1902

Time in Hospital, this time 9 mos. 21 ds

Result, Unimproved: Dis. Nov 22-1902
By Boff.

Examination on Admission by Dr. E. J. Warner *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, " " Special Subjects, ✓

PERCEPTIVITY, Alert or Dull, Correct or Illusive, —

REASONING POWER, Ordinary Subjects, fair

Special Subjects,

Own Mental State, —

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

DELUSIONS, Systematized, 0 Transitory, Yes

Special Subjects, —

HALLUCINATIONS,

ILLUSIONS, —

SUMMARY,

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Dead

Paternal Relatives, No Insanity

Mother, Dead

Maternal Relatives, No Insanity

Brothers and Sisters, 3 Well
Children 9 — 2 Dead

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

—

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Farmer

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

Yes

Sleep, fair Appetite, fair Bowels, Irregular

Personal and Medical History of Henry Funk Sr

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 5½ PRESENT WEIGHT, 124# USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, left eye hurt: sight lost Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, Clear

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

SIGHT, Impaired

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

HEARING, Good

COORDINATION, Arms, Normal Legs, normal Grasp, Other tests, Steady & firm

TREMORS, Hands, Yes Tongue, Yes Facial Muscles, Yes General,

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, — Slow,

FACIAL EXPRESSION, Sensibility, ✓

HEART, Regularity, Normal

Strength, Sounds, Clear

Size, Normal

Apex Beat, "

Murmurs, None noted

ARTERIES,
Somewhat Tortuous

LUNGS,
Chest symmetry: Sym
Expansion: Fair
Breath Sounds: Fair

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Fair

BOWELS, Present Condition, Constipated

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

The patient has been previously Committed: condition is due to senility: has numerous delusions regarding his family: "thinks they are trying to get his money": "that they are too extravagant &c" —
Physically, fairly well nourished: very gay: easily irritable.

Personal and Medical History of Henry Funk Sr

1901

This patient was brought here by Sheriff G. G. Dickman, in fair physical condition, with following history of case. There is no history of consanguinity, but wife and daughter demented. This is not first attack; (seems the 3rd); others occurred in 1898 – 1900: duration of first, one year: second indefinite; was at Rochester hospital; result, improved. First symptoms of this attack manifested about 9 months ago; wanders away; talkative: disease seems stationary: not variable: no regular intervals. Derangement now shown in that he considers himself misused by his son: thinks the rest of his family insane. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. He always had a violent temper: no history of intemperance: has had injury to head 20 years ago. Has been confined in Asylum two years. Cause of disease unknown: treatment, none, outside of asylum. On personal Examination, there is evidence of violent temper.

July 16 On admission, was put on B3 (G.H.N.R.Pt. Complexion fair: hair gray: eyes blue; condition of skin fair: varicose veins on legs: blind in left eye: eruptions on body: – Is clean. Teeth all gone but one on front lower jaw. Behavior good. I. F. Blood). ——

(N.B. This is 2nd admission – was here before from Nov 10 – 1898 to Dec 16 1899, & discharged July 17 – 1900, as Improved: (See Vol 41 Page 153 No 5172). Previous history stated that first symptoms were then manifested 3 years ago; he caused trouble for about 7 years: always contrary about running farm and other matters: violent towards son, broke son's arm; chased him with an axe, on several occasions; quarreled with wife &c. Case was

" " diagnosed then as Senile Dementia). Received on ward: given bath: seems nervous

31 and much excited: (has had trouble at home): July 31. Patient seems quiet, & mentally

Aug 1 1902 much improved: Wt 134# (Aug 1) – Neat in habits: works very little: health good –

Jany 1/31 Wt 150# Jany 31. No improvement noted. Feb 1/02 150#. Patient behaves well; but is dull and has delusive ideas. May 7/02 Patient eloped. Has not improved any during his stay here.

Personal and Medical History of

Personal and Medical History of Michael Scanlan

Whole No. 5877.
Residence, St Paul, Minn.
Became resident of State 1880: of County 1880.
Date Admission, 19th July 1901.
Admitted by Dr. E. J. Warnous hour, 7 30 P.M.
How Sent, Henry Gallick Court House Ramsey County
Sex, Male Age, 60.
Civil Condition, married
Children, none Age Youngest Child, —
Occupation, Church Sexton
Degree Education, Common School
Profession of Religion, Catholic
Habits, not intemperate
Nativity, Ireland: parents also born there
Physicians Committing, Charles J. Meade and Arthur Sweeney
Correspondents, Has a brother in St Paul address not known

No. for Year, 240.
Insane Relatives, None
Cause Exciting, Unknown
Cause Predisposing, probably age
Form, senile ~~Delusional Insanity~~
Accompanying Bodily Disorder, great weakness.
Suicidal or not, not
Date of this Attack, Six weeks ago
Duration, — six weeks —
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, 60
Time of Leaving, July 23. 1901.
Time in Hospital, — 4 days —
Result, Died 2.55 P.M.: Chr. Int. Nephritis

Examination on Admission by Dr. E. J. Warnous *Date of* July 20/1901

Examination dictated 8 P.M.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused:
MEMORY, Past Events, Impaired (very much)
Recent Events, do do Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, Poor
Special Subjects, " "
Own Mental State, Did not appreciate condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, — Transitory, Yes
Special Subjects, —
HALLUCINATIONS, of hearing
ILLUSIONS, None noted
SUMMARY,

HISTORICAL.

LENGTH INVASION, Gradual
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Nothing of favorable — Knows nothing of family history
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Nothing
HABITS, Drinking and Smoking, — No
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Church Sexton
Detail Date, Duration, and Character of Previous Attack, if any,
None
Sleep, Impaired Appetite, do Bowels, Constipated

Personal and Medical History of Michael Scanlan

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, Poor
WOUNDS, Abnormalities, None noted Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Impaired - wore glasses
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Impaired Deaf in right Ear
COORDINATION, Arms, Poor Legs, " " Grasp, patient cannot stand up.
TREMORS, Hands, None Tongue, None Facial Muscles, General,
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, Hesitating, Yes Slow, Yes
FACIAL EXPRESSION, agitated.
HEART, Regularity, Very rapid 120° regular
Strength, Sounds, weak (very)
Size, normal
Apex Beat, -
Murmurs, None noted
ARTERIES, (Sclerotic) Atheromatous
LUNGS,
Chest-symmetry: Fair
Expansion: Fair
Breath-Sounds: normal

Sensibility,

CRANIAL MEASUREMENTS.

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

EXAMINATION URINE, Quantity, Sp. g. 1024 Reaction, acid Color and Appearance, Yellow, clear
Albumen, (Heat) slight. (nitric acid) Yes Sugar, Fehling's tol: no: Diazo: Yes.
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Impaired — Insomnia

BOWELS, Present Condition, Constipated badly

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

Patient was brought here in weak physical state; much depressed and agitated. Had various delusions regarding his family and property: that everybody had forsaken him": present mental condition due to weak physical condition together with senility. Worries a great deal about people trying to injure him. Has also delusions of persecution. Has been confined in St Joseph's Hospital for 6 weeks. Physically, is weak: is unable to keep around. Condition is one of senile melancholia.

Personal and Medical History of Michael Scanlan

1901

This patient was brought here by Deputy Sheriff Johnson, attended by Chas. Cosgrove, with the following history of case. There is no history of consanguinity nor heredity. This is first attack: first symptoms manifested six weeks ago, by excitement over business. Disease seems stationary, variable & with rational intervals, but these, not regular. Derangement is now shown in that he believes that he has squandered trust funds and sacrificed his own property. Is not disposed to injure others, nor suicidal: propensity not active. No filthy or destructive habits. Has always been very scrupulous. There is no history of intemperance, nor of any severe disease &c or head injury. Has been at St. Joseph's Hospital for six weeks. Cause of the disease unknown: has had nutritive and sedative treatment, without result. On personal examination, patient is agitated, depressed, delusional, and weak: talks freely of his trouble, and constantly bemoans his wickedness.

July 9 On admission, was put on T.W. C.G.H.N.R'lpt. Complexion fair: hair gray: eyes blue: condition of skin fair: small sore on right hip: sore on left knee; and scratches on both legs: is clean. Teeth in very poor condition, several of them out: " " Behavior good: Is very weak. Received on ward: given bath and put to bed.
-30/23 very weak, physically: mentally, much confused. July 20. Is failing — July 21 Shows large
23 quantities of albumen in urine. July 23. Continued to fail rapidly & Died at 2.45 pm.

Died

Personal and Medical History of

Personal and Medical History of Louis Dellafield

Whole No. 5878.
Residence, St Paul, Minn
Resident of State 21 years: of County 21 years
Date Admission, 20th July 1901.
Admitted by Dr. C. L. Chaffee hour, 7:25 P.M.
How Sent, Henry Gallick, Ch. Comm. Ramsey Co.
Sex, Male Age, 26 years
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Clerk
Degree Education, Common School
Profession of Religion, Not a church member
Habits, somewhat bad
Nativity, Indiana: parents born in Germany
Physicians Committing, W. G. Lichem and O. W. Archibald
Correspondents, Henry Dellafield
Co. The Boston" St Paul. Minn

No. for Year, 241.
Insane Relatives, Don't know
Cause Exciting, Masturbation
Cause Predisposing, not stated
Form, acute mania
Accompanying Bodily Disorder, None mentioned
Suicidal or not, Not
Date of this Attack, Two days ago.
Duration, Two days
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, 26
Time of Leaving, October 2 - 1901.
Time in Hospital, 2 Mos 12 Ds.
Result, Recovered. —
Discharged by Superintendent
Feby 7 - 1902

Examination on Admission by Dr. E. J. Manor *Date of* July —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
somewhat sluggish
MEMORY, Past Events, Good
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Correct
REASONING POWER, Ordinary Subjects, good
Special Subjects, ✓
Own Mental State, Thinks he was confused
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Normal

DELUSIONS, Systematized, — Transitory, None obtained
Special Subjects, —

HALLUCINATIONS, ✓
ILLUSIONS, ✓
SUMMARY,

HISTORICAL.

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

Father, Dead
Paternal Relatives, no Insanity
Mother, Dead
Maternal Relatives, no Insanity
Brothers and Sisters, 6 all well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Struck by carrier; occasionally causes some pain —
HABITS, Drinking and Smoking, No
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Clerk
Detail Date, Duration, and Character of Previous Attack, if any,
No
Sleep, good Appetite, fair Bowels, irregular.

Personal and Medical History of Louis Dellafield

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, Fair
WOUNDS, Abnormalities, No Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, Grayish Coating
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, Other tests nearly + strong
TREMORS, Hands, fine Tongue, fine Facial Muscles, — General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, rather Slow,
FACIAL EXPRESSION, Sensibility, normal
HEART, Regularity, Irritable
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, None
ARTERIES,
Flabby
LUNGS,
Chest Symmetry: Fair
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. 1034. Reaction, Alkali Color and Appearance, Dark yellow
Albumen, Heat: No: Nitric acid: No. Sugar, Fehling Sol: No: Sediment Cloudy - Picric - No.
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Irregular

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

The patient admits of being confused when found: thinks condition was due to the intense heat. At present, mind seems somewhat sluggish: The patient is slow in answering Questions. Denies masturbation, which Commitment gives as cause of trouble. Now seems rational in every way.

Personal and Medical History of Louis Dellafield

1901

This patient was brought here by Deputy-Sheriff Emanuel Johnson, attended by M. J. Long, in fair physical condition, and with following history of case. There is no history of consanguinity; don't know as to any heredity; this is first attack: duration two days: first symptoms manifested two days ago; became violent short time: disease seems increasing; variable & with rational intervals, but these not regular. Derangement now shown in that he is irresponsible & there is an inability to direct his thoughts. No disposition to injure others; not suicidal: no filthy nor destructive habits: no previous peculiarities manifested: no history of intemperance: was struck on head with cash-basket, a month ago: he has been two days in County Jail: Supposed cause of the disease is masturbation; treatment, none: On personal examination he shows anxious expression and vacant look. —— " ——

July 10 On admission, was put on T.W. (G.H.N. R'pt. Complexion dark: hair black: eyes dark-blue: condition of skin good: vaccination mark on left arm: small scar on back of neck: small scar on back thumb: is clean: Teeth: 6 front teeth in upper jaw: 7 front teeth in lower jaw: Behavior good: Examined by E. D. Ballard). —— " —— " ——

" " Received on ward: Given bath & put to bed: seems very weak, physically: habits neat and clean.

Aug 3/8 Is delusional: Aug 3. Refused medicine. Aug 8. Given clothes & up on ward.

Sep 30 Dressed: reads considerably: is neat: mental state fairly good. Sep 30. Seems improved

Oct 2 Taken home by brother.

Discharged

Personal and Medical History of

Personal and Medical History of Halvor Hanson

Whole No. 5880.

Residence, Houston. Town

Date Admission, 23rd July 1901.

Admitted by Dr. Arthur J. Killourney hour, 9:30 am.

How Sent, L. Lindahl, Jr. Houston County.

Sex, Male Age, 45

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Farming

Degree Education, Common School

Profession of Religion, not a Church member

Habits, not intemperate

Nativity, Norway: parents also born there.

Physicians Committing, O. P. Fischer and L. K. Ousgard

Family Physician: L. K. Ousgard, Houston, Houston Co. Minn.

Correspondents, Henry Hanson (brother) Houston, Minn

No. for Year, 243.

Insane Relatives, none

Cause Exciting, not known

Cause Predisposing, Chronic & prev. attack

Form, Chr. melancholia

Accompanying Bodily Disorder, (Is quite deaf) -

Suicidal or not, not-

Date of this Attack, 16 Years ago

Duration, 16 years (?)

No. of Attack, 3rd (seemingly).

No. of Admission, 1st

Age First Attack, - 29 -

Time of Leaving, November 9 — 1901

Time in Hospital, 3 mos & 17 DS

Result, Improved: Dism. May 10-1902 (by B of C)

Examination on Admission by Dr. E. J. Manoux *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Good

Recent Events, " Special Subjects, ✓

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull

REASONING POWER, Ordinary Subjects, Fair

Special Subjects, " "

Own Mental State, Think he is sick

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

DELUSIONS, Systematized, — Transitory, Yes

Special Subjects, —

HALLUCINATIONS, ✓

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, —

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

Father, Dead.

Paternal Relatives, No Insanity

Mother, Dead.

Maternal Relatives, No Insanity

Brothers and Sisters, 3 Bro. 2 sists. Died of consumption

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

appendicites: bronchitis: night sweats

HABITS, Drinking and Smoking, Excess.

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Farmer

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

Two previous attacks

Sleep, fair Appetite, fair Bowels, regular

Personal and Medical History of Halvor Hanson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 10 3/4 PRESENT WEIGHT, 147 1/2 # USUAL WEIGHT, NUTRITION, Fair

WOUNDS, Abnormalities, Scar, following operation for appendicitis Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, prompt: slight coating: passive.

PUPILS, Equality, Equal Size, normal Response to Light, Sluggish Accommodation, Slow

SIGHT, Good

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

HEARING, Deaf from Eustachian catarrh

COORDINATION, Arms, ready Steady ~~Legs~~, and firm Grasp, — (by usual tests)

TREMORS, Hands, No — Tongue, No Facial Muscles, General,

PATELLAR REFLEX, normal Other Reflexes,

ARTICULATION, Slurred, ✓ Hesitating, ✓ Slow, Yes

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, Regular

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

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,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good

BOWELS, Present Condition, Irregular

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

The patient is of a low mental grade; is very hypochondriacal and has "spells" when he is very much depressed. worries about himself. Thinks everyone has deserted him": "that he is going to die &c".

Physical condition seems generally sluggish. —

Personal and Medical History of Halvor Hanson

1901

This patient was brought here by N. H. Forsyth, attended by Henry Hanson, in fair physical condition, with following history of case. Order for Committal accompanied the papers.- There is no history of consanguinity, nor of heredity. This is not 1st attack: (16 years ago, first attack; 4 years ago another; duration 2, 3 and 4 months. First symptoms of this attack manifested 16 years ago; fear of death and sense of fatigue. Disease seems stationary: has rational intervals, but no regular intervals. Derangement now shown by attempts to go to bed with women, and runs after girls, in the absence of his brother, with whom he lives (see 2. Sec 17). Not definitely disposed to injure others: not suicidal: not particularly filthy nor destructive in habits: he seems to have abnormal sexual tendencies, at times: at other times, greatly depressed in spirit. There is no history of intemperance. He fell on his head, on the ice, when a boy: was very sick, 16 years ago: probably a month. Has not been restrained or confined. Cause of disease not known. Treatment, none: On personal examination, there is noted blank expression of eyes: otherwise healthy appearance: he appears to be feeble-minded. Commitment of said Halvor Hanson recommended because of reason 2 and 5. Sec. 17 —

July 23 On admission, was put on B3 - (G. H. N. Rpt. Complexion dark: hair brown: eyes gray;- Condition of skin good: Scars: one on right side of abdomen, from operation: is clean: Is quite deaf: Teeth: 8 gone, upper jaw: 3 gone, lower jaw: Behavior good: Ed'ly I. F. Blood)-

" " Received on ward: Given bath: seems very hard of hearing: (totally deaf in left ear)-

29/31 Patient assists with work on ward: seems much better. July 31. Is still improving.

Aug 5/6 Still seems to make improvement. Aug 6. Patient a little deaf: is doing some work.

Oct 31 Wt 151#. Oct 31. Very anxious to go home: restless: Nov 9. Was sent home:

Nov 9 No delusions, in his case, are noted.

Discharged

Personal and Medical History of

Personal and Medical History of Robert Carmichael

Whole No. 5883.

Residence, Hastings, Minn.

Date Admission, 23rd July 1901.

Admitted by Dr. E. J. Wanous hour, 8:30 P.M.

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

Sex, Male Age, 46.

Civil Condition, married

Children, four Age Youngest Child, —

Occupation, Farmer, but has been Supt. of the State Asylum at Hastings, since it was opened.

Degree Education, Common School.

Profession of Religion, not a Church member

Habits, not intemperate

Nativity, Clinton, Mass. Parents born in Scotland

Physicians Committing, Dr. Vanbaffelen and J. C. Fitch

Correspondents, Mrs. Sarah Carmichael

(address of wife) Hastings, Minnesota

No. for Year, 246.

Insane Relatives, none

Cause Exciting, Dont Know

Cause Predisposing, not stated

Form, Melancholia acute.

Accompanying Bodily Disorder, Acute nephritis

Suicidal or not, not - but will injure others.

Date of this Attack, about 4 months ago

Duration, about 4 months -

No. of Attack, 2nd (had nervous prostration 11 yrs ago)

No. of Admission, 1st

Age First Attack, about 35.

Time of Leaving, November 28 - 1901

Time in Hospital, 4 mos 5 Days -

Result, Recovered

Discharged by Superintendent

Feby 7 - 1902

Examination on Admission by Dr. E. J. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, poor

Recent Events, " Special Subjects, "

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects, " "

Own Mental State, Knows he is sick

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

DELUSIONS, Systematized, Transitory, Yes

Special Subjects,

HALLUCINATIONS, ✓

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, 4 months ago

ONSET, Gradual or Sudden, Sudden

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

Father, Dead ✓

Paternal Relatives, no Insanity

Mother, Dead

Maternal Relatives, no Insanity

Brothers and Sisters, all Dead

Children 4 – all well

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

acute Nephritis

HABITS, Drinking and Smoking, Yes

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, ✓

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

Last attack 11 years ago: also one since about 2 years ago —

Sleep, — Appetite, — Bowels, —

Personal and Medical History of Robert Carmichael

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, — NUTRITION, fair

...ies, No Condition of Skin, quite clear

...romptness of Movement, Coated

Strength

Size,

Apex

Murmurs

ARTERIES

LUNGS

Chest

Expansion

Breathing

EXAMINATION OF ABDOMEN

OPERATIONS

BLOOD

SLEEP

BOWELS

invalid

Decided

is

of considerable bowel trouble, which

a great deal. -

MENTALLY UNBALANCED

TRANSFERRED TO ROCHESTER.

Superintendent of Hastings Asylum Taken to Rochester Asylum for Treatment.

Rochester, Minn., Special, July 24.—Robert Carmichael, late superintendent of the insane hospital at Hastings was brought here last night for confinement in the insane hospital. He had been granted a six months' leave of absence from Hastings in the hope that his mental trouble, which was not thought serious, might pass away.

He has lately developed more marked symptoms of insanity and his commitment here became necessary. His condition is said to be caused by the fear that the board of control would appoint some one to supersede him, and this combined with the unremitting care necessary to establish the hospital in Hastings, destroyed his mental balance.

The board of trustees appointed William Yanz to fill the position during the illness of Mr. Carmichael, believing that time and medical care would accomplish his recovery.

Until the board of control assumes jurisdiction over the asylum no regular appointment will be made.

12 THE MINNEAPOL

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IGION AT THE U.

Rev. W. P. McKee Says in the Chicago Standard.

RELIGIOUS LIFE OF STUDENTS

Of 2,000 Young Men in the Collegiate Department Half Are Church Members.

Rev. William P. McKee has contributed a paper to a symposium in the Chicago Standard, which bears on religious life in the University of Minnesota. In the symposium the great universities of the country are represented, and Minnesota stands well in the list. Mr. McKee says:

The University of Minnesota, in Minneapolis, enrolled 3,413 students in the year just closed. Of these about 2,000 men were "daily about the campus," the rest belonging to the school of agriculture and others removed from the campus. Of the 2,000 referred to, it is estimated by the president of the Young Men's Christian Association that about 1,000 are members of evangelical churches. The Young Men's Christian Association has a membership of 385, and the Young Women's Christian Association a membership of 310.

In a residence of ten years under the shadow of the university, it was my privilege to study the religious life there as an outsider, and yet as a sympathetic observer and coworker. During those ten years the impression deepened in my mind that the atmosphere about the university was favorable to the growth of a wholesome religious life. The churches in the neighborhood are largely attended and sustained by students and professors, and the churches are amongst the most vigorous and useful in the city of Minneapolis. By an article in the charter of the university, saloons are prohibited within a mile of the campus. Disorder is practically unknown among the students. The students themselves, in large measure, are actuated by an earnest purpose in attending the university. As a rule, also, they come out of the homes of the plain people of the state, in which a reverent and intelligent faith is a thing which has been cultivated from youth. The population of Minnesota, made up as it is, so largely, of Puritan and Scandinavian stock, with a large admixture of the progressive Catholic elements, is largely a religious population. The predilections of the students, therefore, when they reach the university, coming as they do, largely, from Minnesota, are favorable to religious faith and life.

It would be difficult to say too strongly, however, that the influence of the university itself, through its president, Cyrus Northrop, and professors, is positively religious. The same is true of the regents of the university, though they come less closely into contact with the student body. The chapel service is largely attended, though the attendance is voluntary. One who is present at that exercise is apt to remember it for the reverential demeanor of the students, the heartiness of the singing, and the simple earnestness of the leader, whether it be the president or a professor. President Northrop, though not a clergyman, is often called upon to fill evangelical pulpits, which [illegible]

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Fifth Avenue—Morning, "Lessons from the Lakeside"; no evening service.

Open Door—Morning, Rev. Ernest E. Day, "The Successors of Pilate"; evening, Rev. Charles Scanlon; union service.

Plymouth—Morning, Dr. Albert Bushnell, of Kansas City, "The Prophets and Christ"; evening, no preaching service; Christian Endeavor at 6:50 p. m.

Lowry Hill—Morning, Rev. Henry B. Beard; evening, Christian Endeavor, 6:30; no preaching service.

First—Morning, Dr. George R. Merrill will preach; no evening service.

Presbyterian.

Westminster—Rev. Wm. H. Roberts, D. D., of Philadelphia, morning and evening.

Stewart Memorial—Rev. R. K. Porter, morning and evening.

Bethlehem—Rev. A. W. Wright; morning, "The Lily Among the Thorns." Evening service in charge of the Y. P. S. C. E.

Welsh—Morning, Rev. R. E. Williams, a memorial sermon to late ex-Alderman J. H. Parry. Evening, Rev. Joshua T. Evans, of

STORY OF PROHIBITION IN NORTH D

Embedded in the Constitution, the Law Is Likely to It Works—Progress in Enforcement—Place in

North Dakota, of all the states which have experimented with a statute prohibiting the sale of intoxicating liquors, has been the most successful in the enforcement of the law. One thing that has favored this result is the fact that there are no large cities in North Dakota and the rural communities as a rule take more kindly to the prohibition than do the larger centers of population.

The "blind pig" still flourishes in spots in North Dakota, after a decade of prohibition. On the surface enforcement of the law seems to be an easier proposition, especially in the eastern and central part of the state, each year. The friends of the law have made a vigorous fight for enforcement. They claim to have made much progress within the past two years, including a change of heart among the people of the western part of the state where prohibition until recently was considered something of a legislative joke.

It's in the Constitution.

When A. C. Rankin, the "moulder oration," who will be remembmered more recently as the temporary manager of Carrie Nation's Chicago tour, decided to locate in North Dakota, he predicted that the day would come when North Dakota's greatest fame would be based on her reputation as the first state that made a success of statutory prohibition. Rankin's faith in North Dakota as a prohibition state was founded on the fact that prohibition was imbedded in her constitution and reinforced by a good statute, with a big farming community to do the voting. When the friends of the principle succeeded in making it a part of the state constitution they did a great deal toward making it a permanent feature of the state government. Amending the North Dakota constitution is a long story. Before it can be accomplished there is plenty of opportunity for agitation and a general rally of the clans.

Prohibition was made a part of the North Dakota constitution by a small majority in the popular vote in 1889. Out of a total vote of 35,345, the margin in favor of prohibition was 1,159. The law prescribing means for its enforcement and penalty for violation was passed at the first session of the state legislature. Although threats have been made to alter or nullify the "penalty clause" and thereby make prohibition as ineffective as in Kansas, none of these attempts has been successful. The legislature of '97 passed a bill making some changes in the penalty clause, but it was vetoed by Governor Briggs. The last session failed to produce either threats or attempts against the law.

The Problem of Enforcement.

As far as enforcement goes the prohibition law has been gauntlet of public senti munity. Its enforceme be juggled in the elect would be likely to d of the statute. If th it, the officers elected ready in apprehending "blind pigger." If th friendly the "blind pi gathered in by state a to quit by pressure f on the outside.

The eastern part of disposition to comply the open saloon was in in the cow counties. progress was beset wit authorities would driv out of business and fin ectors. Another three see the pigs again in for the sheriff's visit low. These intermitte a feature of the counti icial district until C the father of the pro elected judge. The firs to appear before him w and then fined and ja took but a few doses of cine to start a reign "blind piggers" in the it is claimed that the in those counties has to a minimum. It is section of the state as goes.

For several years f ment of the law, sev eastern part of the gain a revenue from t ectors of "billiard par saloons" and other pl names were either req tain amount monthly jury or brought before fined. This arrange right as far as the ci concerned, but now a or state authorities into the pasture, gra gers" and grief wou would be instances w would "feel it in their run for cover before them. This is a freq some sections of Nor Owners of buildings sold are made to res injunction closing the

Work of the Enfo

Failure of the regul law to run down lle brought the Enforcem istence years ago. Thi whose purpose is the

MINNEAPOLIS JOURNAL

Personal and Medical History of Robert Carmichael

Whole No. 5883

Residence, Hastings, Minn

Date Admission,

Admitted by D

How Sent, Ho

Sex, Male

Civil Condition,

Children, C

Occupation, Farm at Hastings

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HALLUCINATIONS

ILLUSIONS, ✓

SUMMARY,

No. for Year, 246.

Insane Relatives, none

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

Short attack 11 years ago: also one since about 2 years ago

Sleep, — Appetite, — Bowels, —

Personal and Medical History of Robert Carmichael

MENTALLY UNBALANCED

TRANSFERRED TO ROCHESTER.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, — USUAL WEIGHT, — NUTRITION, fair

of Skin, quite clear

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earance, light yellow clear

bable cause, the degree of

s big flesh is

fears every thing is going to the bad". Last attack began with acute dyspepsia: complained also of intractable bowel trouble, which has, in part, caused him to worry a great deal. -

always. Now he has no bowels. Eat food is injurious to him.

PART II AND JOURNAL JUNIOR

THE MINNEAPOLIS JOURNAL.

PART II AND JOURNAL JUNIOR

SATURDAY EVENING, AUGUST 17, 1901.

How Darkness Fell Upon Good "Bob" Carmichael

A Faithful Keeper of Insane Patients Becomes Insane Himself---In Endeavoring to Quicken the Clouded Intellects of His Charges His Own Mind Gave Way

OF all the phenomena of existence from the cradle to the grave, none, save death alone, is in its nature so baffling, and in its mystery so terrible as insanity—the blighting scourge that lays its devastation on the imperial mind of man—the death in life that numbs those vital faculties which make man really man. To behold man—"how noble in reason, how infinite in faculty, in action how like an angel, in apprehension how like God," and then to see "that noble and most soveregn reason like sweet bells jangled, out of tune and harsh" is indeed to wonder how in one being can exist the elements both of his glory and his wreckage. Philosophy delving amid the ruins of empires reads the history of a race; but before the wreck of a mind it is impotent, and pauses baffled, at the border-lands of being. Vague and indistinct the dividing line between sanity and madness; shadowy as the boundary between life and death. To know wholly the mystery of the one were to make of the other no mystery, but to hold the key to the inner recesses of divinity and to have map and diagram of immortality. But here we walk in darkness; all the divine lights in the living temple are dimmed, and it is as much an undiscovered country as if from its realms "no traveller returned" for those who return bring with them no argonautic tales of their journeyings.

Small wonder that all its tradition is horror. Not death itself is invested with such paralysis of terror. That the sovereign mind of man—the God in him—in whose behalf all the powers of the universe conspire and from whom the skies can hold no secret—should suddenly be shrouded in gloom, dismantled of its glory, bereft of its power, and dumb to every natural instinct become a mere bit of animated dust—if this be not awful—what spectacles can inspire awe!

From what unforseen depths sprang these fiends to people the imagination with relentless hate, distort the features into a hideous mockery of humanity! What unknown past reached through the years to exact so terrible a penance!

And science answers that it was a conspiracy of two great facts of evolution—heredity and environment. Heredity, by which nature maintains her identity—the ancient trade-mark on new forms by which the workers of the past still claim a part in the progress of the present. Environment which not only molds man's physical form to his needs and life,but which gives also to his thought the color of the sky beneath which he toils.

But still is it a mystery as much as in the days when Saul's reason was restored by the music of David's harp—after all the thought of centuries from the earliest studies of Arettaeus and Galen down through the speculations of Liebnitz, Staht, Heinroth, Nasse, Friedreich, Pinel, Cullen and the moderns; and all the explantations of science and the placid phrases of philosophy have not robbed insanity of its gruesome terror and awful sadness, a sadness more bitter than that which weeps over the untenanted domain of man's soul.

A Sad, Strange Case.

The very fact of its mystery lends to insanity a certain fascinating interest even to the common mind, and makes of it in many cases a subject for contemplation and study. One of the most peculiar recent cases, and one widely discussed has been the sad case of Robert Carmichael, former superintendent of the Minnesota state asylum at Hastings. The spectacle of a keeper of the insane becoming insane himself is not a common thing, and suggests anew that there may be far graver responsibilities in accepting such a position than the average man takes into account.

The sad case of Mr. Carmichael is one of surpassing strangeness. If ever a man seemed safeguarded against the invasion of such a foe Robert Carmichael did. His life was one which would seem to be in itself an insurance against this dread malady. A man of great physical strength, spending much of his life in the open air, active at all times, there was no suggestion in him of bodily weakness. To this was added a healthy mentality and a lively interest in diversified things. Naturally a man of well-balanced intelligence, he constantly added to his mental store by reading and observation. He loved music and art and was at home in a library. He was even more distinguished on his social side. He was known for years as the jolliest man in the country.

He was the impersonation of "Good Cheer," and his conversation was a very gospel of sunshine. He was the most genial of companions, and gave himself to joyous friendship with utter abandon. So marked was this quality of cheerfulness and jollity that among many his more sterling intellectual qualities were not acknowledged. Being so equipped physically, mentally and spiritually, with all his abilities apparently well-proportioned, and with no outward appearances of any inward conflict, it is not to be wondered at that the sudden announcement of his dire misfortune should fall at first upon incredulous ears. That "Bob" Carmichael should be insane, of all impossible things this seemed the limit. But it was only too true, and through weeks of anxiety his friends awaited the final verdict, hoping against hope, and only half believing. His final entrance into the hospital at Rochester, where he now is, put upon all previous conjecture the stamp of truth, and added another sad case to the long list of mental tragedies.

Nerves and Worry.

How can this strange thing be accounted for? Robert Carmichael brought with him to his work at the Hastings asylum, along with all these qualities which made him so popular, two insidious weaknesses which under the strain of his new environment were to wreak vengeance upon him—a nervous temperament and a disposition to worry. These, aided and abetted by an inordinate ambition to accomplish things, to work hard without thought of reward, undoubtedly were the elements which finally undermined him.

Into all work Carmichael always threw himself entire, and thought of no reserve strength. He gave all of himself to his every task. When he came to take up his work at the Hastings asylum, he found nothing but work before him. He not only had to assume charge of the asylum, but he had to give to its upbuilding his energy and wisdom. It was a most formidable task for any man. It was a new institution, very largely on trial. Carmichael took up the task with the feeling that it was absolutely necessary to establish the institution on a firm basis the first year. He was inordinately ambitious to make a good record, and especially to make as fine a showing at the end of the year as the new asylum at Anoka made. So he plunged in head first to accomplish an almost Herculean task. He was urged again and again to take his work easier, but he became more and more absorbed in it, and every day found him working harder. He not only performed all the tasks which he might have been properly expected to perform, but he did a hundred things which no other superintendent ever did or would do. He worked as hard as any man on the place. Visitors at the asylum would find him with his overcoat off plastering the cellar, or in the field pitching grain like a Trojan; doing work which should have been done by others. From the moment he entered the institution as superintendent he seemed possessed of the idea that its success depended upon his personal effort, and to the very day he was finally stricken he did not let up in this headlong rush to physical exhaustion. And all the time he kept his eye on every feature of the asylum work.

Then the little, insidious enemy, Worry, began to get in its fearful work. Whenever anything went wrong he worried and took it to heart and grieved deeply over it. If the crop was poor he worried as much as if he had been personally to blame for it, and the more he worried the harder he worked and the harder he worked the more he worried. At one time John Coleman, the Anoka superintendent, visited the asylum, he was amazed to see Carmichael doing the ordinary chores about the place. He cautioned him not to do it.

"Bob," said Coleman, "you will never get any credit for this work. Take it easy, don't work so hard. Don't make a martyr of yourself for the glory of the state. Don't do it, Bob; it won't pay."

But Carmichael worked on and on, rejoicing if he thought his labor was pushing things toward the goal of his ambition, and grieving when things seemed to him to be going adversely. It was this constant worry, which finally became so aggravated as to be in reality an hallucination, which first told his companions that his mind was slowly giving away.

He Studied His Patients.

Then, again, he took an excessive personal interest in the patients committed to his care. Being by nature sympathetic and kind, he felt deeply for the poor unfortunates around him. In one especially sad case Mr. Carmichael gave weeks of his time in finding a way to the patient's dimmed intelligence. By personal attention and kindness and encouragement he brought a young man who had not spoken to or looked at any one for years, around to the point where he would talk and observe things and people; and in time this patient improved perceptibly and was taken into Carmichael's own room frequently, and finally helped to write a letter to his mother. One could see the cloud slowly but surely rise from this poor boy's mind as he was led to take an interest in things. It was a triumph of kindness when finally he was able to enjoy a visit from his mother and to talk to her in a fairly intelligent manner.

In speaking of his case, Carmichael's face would light up like the sun and tears would run down his cheeks. This same gentleness and kindness was extended to more than one; and often and often did this man's sympathy lead him to enter the very inner life of the patients.

It is a long-known fact that one becomes gradually like his associates, and slowly but surely one's surroundings leave their impress upon heart and mind. And it is certainly true that as Robert Carmichael walked daily down the corridors of darkness, his heart touched at the sadness and pain before him, and his mind dwelling upon individual cases, he was gradually giving to these patients of his own life and strength, and taking from them their long-borne burden of the night.

Dread Symptoms Displayed.

It is seldom that insanity breaks upon the mind suddenly, it is a gradual process that, like "the little rift within the lute," will slowly silence all the harmony of the mind. In Mr. Carmichael's case forerunning symptoms were observed by those with whom he was most intimately in contact for some months before the final breakdown came. An abnormal tendency to worry was the first suspicious fact noted. And as this gradually increased there was a gradual loss of purpose. Sudden changes of intention, sudden lapses of memory, peculiar resolutions which had been entirely foreign to him, a disposition to brood over the slightest trouble, an increased activity, but without apparent direction, the sudden countermanding of orders given, changes of disposition toward those about him—these were the tokens of coming tragedy. The two or three clerks and attendants most with him noticed these symptoms some four months before it was generally known, and they observed that he gradually became worse, and his peculiar symptoms more and more marked. He himself felt the change came over him, and partially understood its portent. This is the most terrible feature of insanity. Impending madness is generally known to the victim long before others suspect its presence. Such consciousness is indeed "the horrors come alive," and no sympathy or insight can give to another even a partial understanding of the terrible struggle against a foe, with the end certain defeat. The day is disturbed by voices, and the night by visions, and every moment of calmness but intensifies the suffering of him who contemplates the return of the fiends that shall cast him in a hell of torment. Persecution from within which he cannot guess drives him into wild ecstacy or sombre sullenness, till finally he is chained, Pometheus-like, to a rock, and his imprisonment becomes absolute.

Hallucination Masters the Mind.

When the final break-down, which was caused by the death of a team of horses over which he grieved his heart to breaking, Mr. Carmichael became suddenly possessed of the one idea that people were attempting to poison him. This has been the constant form of his malady and it has made his case what it is. It was thought that proper rest which would build him up physically would restore his mind. But it was impossible to get him to rest or to eat. The fear of poison made him refuse to eat. It has been a struggle to get him to eat enough to keep him alive. When removed to his home he insisted that he was being kept a prisoner so that the asylum might go to wreck in his absence. He begged to be allowed to return to the asylum. The burden of his heart and mind in health was also the burden of his rambling talk. All effort to restore his health failed and it was finally thought best to place him in a hospital where all faces would be strange to him. He has been at Rochester for nearly a month now, and Dr. Kilbourne reports favorable progress in his case and great hopes for his ultimate recovery. This is devoutly to be wished, for few men ever deserved as well as Robert Carmichael. It is a strange thing that insanity creates so little sympathy. The interest generally taken is mostly curiosity, and yet where could sympathy find fitter place for its manifestation. And in the case of Robert Carmichael, true gentleman and true friend, there is no place for vulgar curiosity. It is pitiable in its sadness—a veritable tragedy, without compensation, if there be no hope in the future. And to that hope his friends will cling—the hope that health may come to him again and clothe him with all his old powers and make him the man he always was,—his very faults, faults of generosity and kindness.

Personal and Medical History of Robert Carmichael

Personal and Medical History of Robert Carmichael

Whole No. 5883

Residence, Hastings, Minn

No. for Year, 246.

Insane Relatives, none

Cause Exciting, Dont Know

Date Admission,

Admitted by

How Sent,

Sex, Male

Civil Condition,

Children,

Occupation, Farmer at Hastings

Degree Education

Profession of Reli

Habits,

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Physicians Comm

Correspondents, (address of wife)

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PRESENT WEIGHT, USUAL WEIGHT, NUTRITION, fair

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other tests -

waying: steady

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robable cause, the degree of

its big flesh is " fears every thing

Complained also

Shot attack 11 years ago: also one since about 2 years ago

Sleep, Appetite, Bowels,

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12 THE MINNEAPOLIS JOURNAL. SATURDAY EVENING, AUGUST 17, 1901.

Pulpit and Pew

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What Rev. W. P. McKee Says in the Chicago Standard.

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The University of Minnesota, in Minneapolis, enrolled 3,413 students in the year just closed. Of these about 2,000 men were "daily about the campus," the rest belonging to the school of agriculture and others removed from the campus. Of the 2,000 referred to, it is estimated by the president of the Young Men's Christian Association that about 1,000 are members of evangelical churches. The Young Men's Christian Association has a membership of 385, and the Young Women's Christian Association a membership of 310.

In a residence of ten years under the shadow of the university, it was my privilege to study the religious life there as an outsider, and yet as a sympathetic observer and coworker. During those ten years the impression deepened in my mind that the atmosphere about the university was favorable to the growth of a wholesome religious life. The churches in the neighborhood are largely attended and sustained by students and professors, and the churches are amongst the most vigorous and useful in the city of Minneapolis. By an article in the charter of the university, saloons are prohibited within a mile of the campus. Disorder is practically unknown among the students. The students themselves, in large measure, are actuated by an earnest purpose in attending the university. As a rule, also, they come out of the homes of the plain people of the state, in which a reverent and intelligent faith is a thing which has been cultivated from youth. The population of Minnesota, made up as it is, so largely, of Puritan and Scandinavian stock, with a large admixture of the progressive Catholic elements, is largely a religious population. The predilections of the students, therefore, when they reach the university, coming as they do, largely, from Minnesota, are favorable to religious faith and life.

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STORY OF PROHIBITION IN NORTH DAKOTA

Embedded in the Constitution, the Law Is Likely to Endure—How It Works—Progress in Enforcement—Place in Politics.

North Dakota, of all the states which have experimented with a statute prohibiting the sale of intoxicating liquors, has been the most successful in the enforcement of the law. One thing that has favored this result is the fact that there are no large cities in North Dakota and the rural communities as a rule take more kindly to the prohibition than do the larger centers of population.

The "blind pig" still flourishes in spots in North Dakota, after a decade of prohibition. On the surface enforcement of the law seems to be an easier proposition, especially in the eastern and central part of the state, each year. The friends of the law have made a vigorous fight for enforcement. They claim to have made much progress within the past two years, including a change of heart among the people of the western part of the state where prohibition until recently was considered something of a legislative joke.

It's in the Constitution.

When A. C. Rankin, the "moulder oracator," who will be remembmered more recently as the temporary manager of Carrie Nation's Chicago tour, decided to locate in North Dakota, he predicted that the day would come when North Dakota's greatest fame would be based on her reputation as the first state that made a success of statutory prohibition. Rankin's faith in North Dakota as a prohibition state was founded on the fact that prohibition was imbedded in her constitution and reinforced by a good statute, with a big farming community to do the voting. When the friends of the principle succeeded in making it a part of the state constitution they did a great deal toward making it a permanent feature of the state government. Amending the North Dakota constitution is a long story. Before it can be accomplished there is plenty of opportunity for agitation and a general rally of the clans.

Prohibition was made a part of the North Dakota constitution by a small majority in the popular vote in 1889. Out of a total vote of 35,945, the margin in favor of prohibition was 1,159. The law prescribing means for its enforcement and penalty for violation was passed at the first session of the state legislature. Although threats have been made to alter or nullify the "penalty clause" and thereby make prohibition as ineffective as in Kansas, none of these attempts has been successful. The legislature of '97 passed a bill making some changes in the penalty clause, but it was vetoed by Governor Briggs. The last session failed to produce either threats or attempts against the law.

The Problem of Enforcement.

As far as enforcement goes the prohibition law has been forced to run the gauntlet of public sentiment in every community. Its enforcement was an issue to be juggled in the election of officers who would be likely to deal with violators of the statute. If the majority favored it, the officers elected were likely to be ready in apprehending and punishing the "blind pigger." If the people were unfriendly the "blind pig" flourished until gathered in by state authorities or forced to quit by pressure from Prohibitionists on the outside.

The eastern part of the state showed a disposition to comply with the law, while the open saloon was in practical operation in the cow counties. But even this early progress was beset with difficulties. The authorities would drive the "blind pigs" out of business and fine or jail the proprietors. Another three or six months might see the pigs again in operation waiting for the sheriff's visit and the fine to follow. These intermittent liquor fines were a feature of the counties of the third judicial district until Charles A. Pollock, the father of the prohibition law, was elected judge. The first batch of violators to appear before him were given a lecture and then fined and jailed the limit. It took but a few doses of this kind of medicine to start a reign of terror among "blind piggers" in the third district. Now it is claimed that the violation of the law in those counties has been ground down to a minimum. It is held up as the model section of the state as far as prohibition goes.

For several years following the enactment of the law, several towns in the eastern part of the state continued to gain a revenue from the traffic. Proprietors of "billiard parlors," "temperance saloons" and other places with innocent names were either required to pay a certain amount monthly into the city treasury or brought before a magistrate and fined. This arrangement worked all right as far as the city authorities were concerned, but now and then the county or state authorities would make a run into the pasture, grab all of the "piggers" and grief would follow. There would be instances where the "piggers" would "feel it in their bones" and make a run for cover before the officers reached them. This is a frequent occurrence in some sections of North Dakota to-day. Owners of buildings in which liquor is sold are made to respect the law by an injunction closing the building.

Work of the Enforcement League.

Failure of the regular machinery of the law to run down illegal liquor vendors brought the Enforcement League into existence years ago. This is an organization whose purpose is the punishment of all violators of the law. It's active officer is the secretary who is assisted by a detective force in gathering evidence. These detectives rarely stay any length of time in the service. Some of them could tell some lively experiences. In one instance two "league" detectives doing secret service duty among the "blind piggers" on the Missouri slope were forced to make a run from a delegation of citizens whose leader carried a rope. But the Enforcement League has done very effective work in several sections, and while the "blind pig detective" has been given a hard chase at times in some of the western districts he has on the whole been instrumental in securing many convictions.

The Prosperous Drug Store.

The drug store has usually been a prosperous mercantile enterprise in North Dakota since the disappearance of the saloon. The idea of prohibition is to prohibit the sale of liquor as a beverage. As a medicine it goes. The drug store can supply liquor to persons making an affidavit that they require it as a medicine, the affidavit to contain the name of the particular ailment for which it is required. These affidavits are filed with the county authorities.

It is but fair to say that many of the drug store proprietors deprecate the prominence which liquor has attained in that traffic. The North Dakota Druggists' Association at its meeting last year passed resolutions favoring the repeal of the law. But the fact that the drug store is made the only lawful liquor dispensary has made drug store proprietors of many who would not be in the business were it not for that traffic. Towns that under the saloon system would have one or possibly two good drug stores have twice that number and all are usually prosperous. The only danger is the possible refusal of the county judge to grant them a liquor permit on the objection of a certain number of taxpayers in that community.

The affidavit books for many towns tell a woful story. The death rate may be low, but the amount of "sickness" is staggering. The number of ills for which common rye whisky is considered a cure, is interesting. "Stomach trouble," "kidney trouble," and similar terms appear often. Now and then some town will have a run of "severe cold" that requires a comparatively large amount of treatment. The Enforcement League has gone into the drug store records in some instances and made some progress toward restricting the consumption for "medicinal purposes."

There are various opinions as to the success of the prohibition law. On the surface, it would appear that sentiment in its favor is increasing. The recent utterances of Secretary M. H. Jewell of the republican state committee through his Bismarck Tribune, urging enforcement of the law in that section is taken as a mark of progress. Prohibitionists claim that all the law needs to make it strong in every section is a fair chance. The Tribune has always been regarded a resubmission paper, and the section in which it is published has until recently paid little attention to the law.

Whether North Dakota would vote prohibition out of the constitution if given the opportunity is a question which the politicians of that state are discussing to some extent. There is an element for and against the law in each political party. Republicans through their state convention are on record as favoring no backward step in the enforcement of the law. There are many democrats, some of them prominent in party councils, who are warm advocates of prohibition. At the present time people in counties west of the Missouri river are signing petitions for the repeal of the law. There are also many democrats who want their party to make it an issue in the next campaign by declaring in favor of resubmitting the question to the people.

Guy C. H. Corliss, ex-justice of the supreme court, says that he does not expect to see prohibition an issue in North Dakota for several years. When some of the North Dakota cities reach a population of 20,000 he believes that the experience of other states will be repeated and the pressure for a change to the license system will be strong.

President Griffith's Argument.

R. B. Griffith of Grand Forks, president of the Enforcement League, and one of the leading business men of the state, is in politics a republican. He discusses the law from the standpoint of a business man. He says:

Prohibition is beneficial to the business interests of North Dakota for the following reasons:

First—It puts a large sum of money in legitimate trade which would otherwise have been spent in the saloon. If we had been under license for the past ten years, we would have had over 500 saloons in operation each year and their liquor sales would have been, it is safe to say, $7,000 each per annum, a total of $3,500,000 per annum, or $35,000,000 for ten years, which would have been spent by our citizens under license. It is true that prohibition has not entirely stopped the liquor sales. A fair estimate places the consumption of liquor at 70 per cent or 75 per cent less, under prohibition, than it would be under license. This means that during the past ten years $25,000,000, which would have been spent in the saloon, have gone into other channels. The people have bought more fruit, a better grade of groceries and more

Blatz

TRADE MARK

MILWAUKEE.

"A BEER OF QUALITY"

The Choicest Hops and Barley Malt, brewed under the immediate supervision of the most skilled masters of the brewers' art, by the original and celebrated Blatz method, are the unvarying means employed in producing Blatz Beers—Brews that are unequaled in this country to-day.

BLATZ MALT-VIVINE

(NON-INTOXICANT)

TONIO FOR WEAK NERVES AND WEAK BODIES.

DRUGGISTS OR DIRECT.

VAL. BLATZ BREWING CO., MILWAUKEE.

Minneapolis Branch, 1816 SIXTH ST. S. Telephone, 206

MINNEAPOLIS JOURNAL NEWSBOYS' BAND

Personal and Medical History of Robert Carmichael

Whole No. 5883. No. for Year, 246.

VIC'S PICTURE IN THE GARRET
CONSULTANT'S FORTRAIT FAILS TO
Her Present Ma
a Famous P
Is Thought

12 THE MINNEAPOL

Pulpit and Pew

RELIGION AT THE U.

What Rev. W. P. McKee Says in the Chicago Standard.

RELIGIOUS LIFE OF STUDENTS

Of 2,000 Young Men in the Collegiate Department Half Are Church Members.

Rev. William P. McKee has contributed a paper to a symposium in the Chicago Standard, which bears on religious life in the University of Minnesota. In the symposium the great universities of the country are represented, and Minnesota stands well in the list. Mr. McKee says:

The University of Minnesota, in Minneapolis, enrolled 3,413 students in the year just closed. Of these about 2,000 men were "daily about the campus," the rest belonging to the school of agriculture and others removed from the campus. Of the 2,000 referred to, it is estimated by the president of the Young Men's Christian Association that about 1,000 are members of evangelical churches. The Young Men's Christian Association has a membership of 385, and the Young Women's Christian Association a membership of 310.

In a residence of ten years under the shadow of the university, it was my privilege to study the religious life there as an outsider, and yet as a sympathetic observer and coworker. During those ten years the impression deepened in my mind that the atmosphere about the university was favorable to the growth of a wholesome religious life. The churches in the neighborhood are largely attended and sustained by students and professors, and the churches are amongst the most vigorous and useful in the city of Minneapolis. By an article in the charter of the university, saloons are prohibited within a mile of the campus. Disorder is practically unknown among the students. The students themselves, in large measure, are actuated by an earnest purpose in attending the university. As a rule, also, they come out of the homes of the plain people of the state, in which a reverent and intelligent faith is a thing which has been cultivated from youth. The population of Minnesota, made up as it is, so largely, of Puritan and Scandinavian stock, with a large admixture of the progressive Catholic elements, is largely a religious population. The predilections of the students, therefore, when they reach the university, coming as they do, largely, from Minnesota, are favorable to religious faith and life.

It would be difficult to say too strongly, however, that the influence of the university itself, through its president, Cyrus Northrop, and professors, is positively religious. The same is true of the regents of the university, though they come less closely into contact with the student body. The chapel service is largely attended, though the attendance is voluntary. One who is present at that exercise is apt to remember it for the reverential demeanor of the students, the heartiness of the singing, and the simple earnestness of the leader, whether it be the president or a professor. President Northrop, though not a clergyman, is often called upon to fill evangelical pulpits, which he does ...

Morning, "The Hidden Manna"; evening, "The Man That Built His Own Gallows."

Fowler—Rev. A. R. Lambert, D. D. Morning, "The Trial of Abraham's Faith." No evening service.

Franklin Avenue—Rev. J. G. Morrison. Morning and evening.

Forest Heights—Rev. G. R. Greer. Morning, "Gladness in Service"; evening, "The Career of Four Godly Cadets in Godless City."

Western Avenue—Morning, Rev. D. McKenzie; evening, Miss R. Noth; young people's service.

Richfield—Morning, Rev. W. Burns, Ph. D., "Two Years in Rome." No evening service.

St. Louis Park—Evening, Rev. W. Burns, Ph. D., "Paul's Work at Rome."

Hennepin Avenue—Morning, "An Anchor Which Grapples; evening, "Is Your Heart in the Right Place?"

First—Rev. William Love, Ph. D. Morning, "The Beginning and the End"; evening, union services in the Andrew Presbyterian church.

Bloomington Avenue—Rev. Charles Fox Davis. Morning, "Baptized with Fire"; evening, "Scenes from the Drama of Job."

Central German—Rev. C. L. Lehnert. Morning, "An Illumnate Life"; evening, "What Shall Your Answer Be?"

Foss—Rev. J. H. Dewart, Morning, "How to Make a New World"; evening, "The Necessity for an influx of Power from Above."

North—Morning, Rev. W. A. Shannon, "Glorying in the Cross"; evening, Rev. William Love.

Broadway—Rev. Donald McKenzie. Morning, Professor Bean of the North Side High School; evening, union service at the Open Door Congregational church.

Wesley—Professor A. W. Patten. Morning, "The Highest Attainment"; evening, "The City of the Ages."

Lake Street—Rev. W. M. Pickard. Morning, "The Gospel Trumpet"; evening, "My Trip to the Golden Gate."

Simpson—Rev. R. N. McKaig; morning, "Walking With God"; evening, "Measure for Measure."

Congregational.

Forest Heights—Adam Murrman; morning, "Your Manner of Life"; evening, "Six Unworthy Things."

Lyndale—Rev. H. B. Harrison, of Fairmont, Minn., morning and evening.

Union (St. Louis Park)—Regular preaching service at 11 o'clock; no evening service.

Vine—John S. Rood; morning, "A Pure Heart"; evening, "Why Unite with the Church?"

Oak Park—Morning, Walter A. Snow, "Abraham; a Study of Obedience"; 7 p. m., Y. P. S. C. E.; no other service.

Park Avenue—Morning, Professor R. Watson Cooper, "The Image of God"; no evening service.

Bethany—Morning, Rev. Charles B. Fellows, state evangelist; evening meeting conducted by the Christian Endeavor Society.

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The eastern part of ... disposition to comply ... the open saloon was in ... in the cow counties. ... progress was beset wit... authorities would driv... out of business and fine... etors. Another three o... see the pigs again in ... for the sheriff's visit ... low. These intermitte... a feature of the counti... dicial district until C... the father of the pr... elected judge. The firs... to appear before him w... and then fined and ja... took but a few doses of ... cine to start a reign ... "blind piggers" in the ... it is claimed that the ... in those counties has ... to a minimum. It is h... section of the state a... goes.

For several years fr... ment of the law, sev... eastern part of the ... gain a revenue from ... etors of "billiard par... saloons" and other pl... names were either req... tain amount monthly ... ury or brought before ... fined. This arrange... right as far as the cl... concerned, but now a... or state authorities ... into the pasture, gra... gers" and grief wou... would be instances w... would "feel it in their ... run for cover before t... them. This is a freq... some sections of Nor... Owners of buildings ... sold are made to res... injunction closing the ...

Work of the Enfo...

Failure of the regul... law to run down ille... brought the Enforceme... istence years ago. Thi... whose purpose is the ...

MINNEAPOLIS JOURNAL ...

HALLUCINATIONS, ✓

ILLUSIONS, ✓

SUMMARY,

OCCUPATION, Healthy or not, ✓

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

Last attack 11 years ago: also one since about 2 years ago.

Sleep, — Appetite, — Bowels, —

...ical History of Robert Carmichael

PHYSICAL CHARACTERISTICS.

HEIGHT, PRESENT WEIGHT, USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, No Condition of Skin, quite clear

TONGUE, Coatings, Promptness of Movement, Coated

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

SIGHT, Good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, No

HEARING, Good by watch tests -

COORDINATION, Arms, Normal Legs, Normal Grasp, Rosswayuig: Steady

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

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, Slow, —

FACIAL EXPRESSION, Sensibility, ✓

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES, Normal

LUNGS, Chest symmetry: Sym... 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. 1016 Reaction, acid Color and Appearance, light yellow clear

Albumen, (Heat) No: (Nitric acid) No Sugar, Fehling Sol: no. —

Casts and Crystals, Passed & Examined (no casts found).

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Constipated

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

The patient appears confused and agitated over himself: thinks his flesh is decayed: that he has no bowels: that food is injurious to him: - fears every thing is going to the bad: - Last attack began with acute nephritis: Complained also of considerable bowel trouble, which has, in part, caused him to worry a great deal. -

Personal and Medical History of Robert Carmichael

1901

This patient was brought here by Peter Nelson, attended by J. A. Jelly, in fair physical condition, with following history of case. There is no history of consanguinity nor heredity. This is not the first attack; he had nervous prostration eleven years ago; duration a short while; was not sent to Hospital. First symptoms of this attack manifested about 4 months ago: had an attack of acute nephritis, and his mind was unbalanced. Disease seems stationary: variable and with rational intervals, but has had only 3 or 4 rational intervals since beginning. Derangement now shown in that he believes people want to poison, in giving him bad food and poisoned water: has shown disposition to injure others, especially with his children and his wife; is not suicidal: no filthy or destructive habits. Was of a very sympathetic nature, but had a very violent temper. No history of intemperance. Is subject to acute nephritis. He has been confined at a sanitarium at Hudson, Wis, for one month or more the past spring. Cause of the disease, dont know. What treatment has been pursued, dont know, except that he was in the care of a physician; A. M. Adsit attended him. On personal examination, he is unwilling to talk; taciturn: melancholic; complaining "that his friends want to poison him".

July 23 On admission, was put on T.W. (G. H. N. R'pt. Complexion sandy: hair sandy: eyes blue: condition of skin good: large joint at base of left big toe & large joint at base of right big toe: vaccination scars on left arm: small scar on left knee. Is clean: teeth all gone, except 5 front, in lower jaw. Behavior good: Examined by E. W. Gallard).

" " Received on Ward: Given bath & put to bed: seems depressed: says "his flesh is rotten": put on
27 treatment: July 27. Patient very restless: somewhat quarrelsome: seems much depressed –
Aug 3/7 Wt 151#. Aug 7. Given clothes and got up on ward: Condition remains about the same.
10/18 Is rather stubborn, at times, and inclined to fight: breaks plants &c, on the ward. Aug 18. Patient
Sept 1 quite resistive & inclined to fight. Sept 1. Wt 165#: has been restless: fought, a good
19 many times: has been in seclusion, at times. Sep 19. Still inclined to attack nurses
Oct 1/9 & others, on little or no provocation. Oct 1. Wt 158#. Oct 9. Went out to camp at Oronoco:
Nov 2 Returned from the Lake: appetite rather poor. Is rather stubborn, but not so violent.
6/28 Visited by wife – Nov 28. Taken home by his wife.

Discharged

Personal and Medical History of

Personal and Medical History of William Walsh

Whole No. 5884.
Residence, Lake City, Minn.
Resident of State since birth 30 yrs ago: of County – 30 yrs ago
Date Admission, 25th July 1901.
Admitted by Dr. C. L. Chapple hour, 1.30 P.M.
How Sent, Malcolm Kennedy, Jol P. Wabasha County
Sex, Male Age, 30.
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Common School
Profession of Religion, Roman Catholic
Habits, probably not good
Nativity, Lake City, Wabasha Co. Minn: father's Ireland: mothers N.Y.
Physicians Committing, J. C. Adams and A. C. Duckstader
Correspondents, Wm Sullivan (uncle)
Lake City, Minn
(2 miles out)

No. for Year, 247.
Insane Relatives, one brother in Asylum for Insane
Cause Exciting, Heredity
Cause Predisposing, " & previous attack.
Form, ~~Pubescent~~
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not –
Date of this Attack, 22nd July 1901
Duration, – 3 days –
No. of Attack, 2nd (one occurred 2½ yrs ago).
No. of Admission, 1st here (was in Montana Asylum)
Age First Attack, about 27.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. J. Wanous. *Date of* July —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
sluggish
MEMORY, Past Events, fair
Recent Events, " " Special Subjects, regarding mother, confused
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, regarding his mother Transitory,
Special Subjects, —
HALLUCINATIONS, "of hearing"
ILLUSIONS, —
SUMMARY,

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
—
Father, Living
Paternal Relatives, no Insanity
Mother, Dead
Maternal Relatives, no Insanity
Brothers and Sisters, brother Insane
children — no.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
no
HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
2½ years ago
Sleep, good Appetite, Good Bowels, regular

Personal and Medical History of William Walsh

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6½ PRESENT WEIGHT, 140# USUAL WEIGHT, NUTRITION, well
WOUNDS, Abnormalities, no Condition of Skin, bronzed
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, Arms, normal Legs, normal ~~Grasp,~~ other tests, readily & steadily
TREMORS, Hands, no Tongue, — Facial Muscles, — General, —
PATELLAR REFLEX, sluggish Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, — Slow, yes
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, disturbed rythm
Strength, Sounds, indistinct
Size, normal
Apex Beat, "
Murmurs, none noted
ARTERIES,
Flabby
LUNGS,
Chest symmetry: some depression in right apex —
Expansion: fair
Breath sounds: roughened breathing 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,

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

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

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

The patient seems mentally sluggish & depressed: "thinks his mother is living": says "he talked with her, since he had a letter from his father, telling him she is dead". On other subjects, seems quite rational. –
Brother is here, in hospital: Condition probably hereditary. –

Personal and Medical History of William Walsh

1901

This patient was brought here by Marshall James McCarty, attended by Peter Gludt, in apparently good physical condition, with following history of case. There is no history of consanguinity; has one brother in Asylum for Insane: This is not 1st attack; one occurred about 2½ years ago: dont know duration, because confined in Montana Asylum: dont know result of treatment. First symptoms of this attack manifested July 22d/01, by petty larceny. Disease seems increasing; if variable or with rational intervals, cant say. Derangement now shown in that he believes that mother is alive, and in Montana, although she was murdered three years ago. We believe he is not disposed to injure others: not suicidal: no filthy nor destructive habits. No previous peculiarities that we know of: no history of intemperance, nor of any severe disease &c or head-injury. "William Walsh says that, during thirteen months, he was in Asylum about 3 months". Supposed cause of the disease is heredity. Dont know treatment - On personal examination, he persists in the statement that his mother is yet living

July 25 in Montana —— On admission, was put on B³ (G. H. N. Kpt. Complexion dark: hair black: eyes gray: condition of skin good: scars on first finger of left hand: scar on left knee: teeth in fair condition: behavior good: Examined by I. F. Blood) -

" " Received on ward: given bath: is delusional: has idea his mother is alive: says he saw her

Aug 7 1902 in "Dakota". Aug 7. Patient shows no improvement. Gup, dressed and about ward.

Jany 1 Is in fair physical condition. Wt 140#. Jany 1. Wt 151#. Jany 31. Talks in a fairly

31 rational way: works some. Is inclined to be rather indifferent. Feb 1/02 Wt. 154#

Patient is indifferent & listless; talks to self. Can answer many questions quite well. Oct. 6/02 Patient seemed to be inclined to be violent. Was moved to W.

Jan 31/03 Continues the same - somewhat silly - Slightly demented; but intelligent enough to answer ordinary questions.

Personal and Medical History of

Personal and Medical History of Charles Olson #3
or Charles E. Olson

Whole No. 5885.
Residence, Lake City, Minn
Resident of State 5m past 29 years: of County, past 29 yrs.
Date Admission, 25th July 1901.
Admitted by Dr. C. L. Chapple hour, 1:30 PM
How Sent, Malcolm Kennedy, Jof P. Wabasha County
Sex, Male Age, 30.
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Laborer
Degree Education, Common School
Profession of Religion, not a church-member
Habits, not good. Intemperate
Nativity, Sweden (Wisconsin?) parents born in Sweden
Physicians Committing, W. J. Cochrane & W. F. Wilson
Correspondents, Mrs Mary Olson (mother)
Lake City, Minn

No. for Year, 248
Insane Relatives, none
Cause Exciting, Sexual perversion
Cause Predisposing, previous attacks
Form, ~~Moral Insanity~~ Periodic
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not
Date of this Attack, 4 days ago
Duration, — 4 Days —
No. of Attack, Second (probably) for past 8 years.
No. of Admission, 1st
Age First Attack, about 22.
Time of Leaving, November 5 — 1901
Time in Hospital, 3 mos — 11 ds
Result, Recovered — Dgd. May 13 — 1902
(by Supt)

Examination on Admission by Dr. E. J. Hanson *Date of* July —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
rather sluggish
MEMORY, Past Events, Good
Recent Events, " " Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert
REASONING POWER, Ordinary Subjects, Fair
Special Subjects, —
Own Mental State, Does not appreciate condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed

DELUSIONS, Systematized, ✓ Transitory, ✓
Special Subjects, ✓

HALLUCINATIONS, ✓
ILLUSIONS, ✓
SUMMARY,

HISTORICAL.

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

✓

Father, Dead
Paternal Relatives, No history of Insanity
Mother, Living
Maternal Relatives, no history of Insanity
Brothers and Sisters, —

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
when young, was very sick: trouble not known. -
HABITS, Drinking and Smoking, Excess.
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
has had previous attacks.
Sleep, Good Appetite, Good Bowels, regular.

Personal and Medical History of Charles Olson #3

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 3/4 PRESENT WEIGHT, 163 # USUAL WEIGHT, NUTRITION, Well-nourished
WOUNDS, Abnormalities, Small scar on left frontal eminence Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, Coated — Sluggish
PUPILS, Equality, Equal Size, Normal Response to Light, Yes Accommodation, Yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, Arms, Normal Legs, Normal Grasp, Other tests nearly obtained
TREMORS, Hands, Yes Tongue, Yes Facial Muscles, Yes General, —
PATELLAR REFLEX, Normal Other Reflexes, —
ARTICULATION, Slurred, Normal Hesitating, — Slow, —
FACIAL EXPRESSION, —
HEART, Regularity, Irritable
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES,
Normal
LUNGS,
Chest symmetry: Gym
Expansion: Fair
Breath Sounds: Normal

Sensibility, —

CRANIAL MEASUREMENTS.

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

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

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

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

The patient has been a masturbator; also, has been exposing himself before women: says "he only did it when drunk."
Case is one of low mental grade and a sexual pervert.
Physically, well nourished, but of a neurasthenic tendency.

Personal and Medical History of Charles Olson #3

1901

This patient was brought here by Marshall James McCarty, attended by Peter Gludt, in apparently good physical condition, & with following history of case. Parents & grandparents no relation. This is not first attack; others occurred at variable periods, for past 8 years: no definite duration: was not sent to hospital. First symptoms of this attack manifested four days ago: indecent exposure of person in presence of little girls. Disease seems increasing; variable at times no manifestations: no regular intervals. Derangement now shown by looking in windows of houses; indecent exposure of person in presence of females; chasing girls and ladies after dark & making indecent proposals to them. Is disposed to injure others, as above stated: not suicidal: has been seen masturbating: no insane relatives: for some time, has been morose; seems to have no fear of punishment. Patient has been intoxicated; father probably drank, to some extent. Had severe illness, when about 10 years old: dont know just what: no Epilepsy, as far as known. Was confined in County Jail 30 days, one year ago. - Supposed cause of the disease is sexual perversion: has been threatened with punishment, remonstrated with, and put in jail. On personal examination, patient is very morose and taciturn; dont deny charges, but claims to have been drunk, at times of offenses. Examiners find & certify that said Charles. G. Olson is insane, to extent of sexual pervert. ——— " ——— " —

July 5 On admission, was put on B³ (G. H. N. R'pt. Complexion fair: hair brown: eyes gray: condition of skin good: 2 marks on right thigh: scars on right side of pre-head: is clean: Teeth: 3 gone, upper jaw: 1, lower jaw: behavior good: ¼ ly I. F. Blood) -

" " Received onward: given bath: seems quite rational: (condition probably due to drinking)

29/30 Seems much improved - July 30 - Is working onward. Aug 7. Seems entirely recovered.

Aug 7/8 Habits neat & clean: assists with work. Aug 8. Wt 168#. Aug 31. Is rather cheerful.

31 Answers rationally: quite neat in habits. Nov 5. Taken home by uncle, today.

Nov 5 Talked quite rationally & was in good condition.

Discharged

Personal and Medical History of

Personal and Medical History of William Schwede

Whole No. 5886

Residence, St. Paul, Minn

Became resident of State 19 years ago: of County, Ramsey

Date Admission, 26th July 1901.

Admitted by Dr. C. L. Chapple hour, 7 20 P.M.

How Sent, Henry Gallick, Court Commr. Ramsey County

Sex, Male Age, 56.

Civil Condition, Married

Children, Three Age Youngest Child, —

Occupation, Laborer

Degree Education, not educated

Profession of Religion, Lutheran (?)

Habits, Do not know if intemperate or not

Nativity, Germany: parents also born there.

Physicians Committing, H. T. Nippert and John B. Darling

Correspondents, Robert Schwede (Son)

on Blair St. bet. McQuibon (?) & Arundel Sts St Paul Minn

No. for Year, 249.

Insane Relatives, Do not know

Cause Exciting, Do not know

Cause Predisposing, previous attack

Form, Acute mania

Accompanying Bodily Disorder, Now mentioned

Suicidal or not, not: attempted to shoot neighbor.

Date of this Attack, 2 weeks ago

Duration, — 2 weeks —

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

No. of Admission, 1st

Age First Attack, 55 past

Time of Leaving, November 4 — 1901

Time in Hospital, 3 mos 9 ds

Result, Improved: Disctd — May 10/1902 by Bof C.

Examination on Admission by Dr. E. J. Wanous *Date of* July —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good

Recent Events, " " Special Subjects, " "

PERCEPTIVITY, Alert or Dull, Correct or Illusive, rather alert

REASONING POWER, Ordinary Subjects, fair

Special Subjects, " "

Own Mental State, Does not appreciate Condition

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

DELUSIONS, Systematized, Yes Transitory, —

Special Subjects, —

HALLUCINATIONS, Yes. "of hearing"

ILLUSIONS, —

SUMMARY, —

HISTORICAL.

LENGTH INVASION, —

ONSET, Gradual or Sudden, —

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

Father, Dead: Consumption

Paternal Relatives, no Insanity

Mother, Dead:

Maternal Relatives, No Insanity

Brothers and Sisters, All well

Children 3 - well

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

La Grippe — 8 years ago

HABITS, Drinking and Smoking, to excess

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Laborer

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

Sleep, good Appetite, Good Bowels, Regular

Personal and Medical History of William Schwede

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6½ PRESENT WEIGHT, 147# USUAL WEIGHT, NUTRITION, well

WOUNDS, Abnormalities, No Condition of Skin, brown

TONGUE, Coatings, Promptness of Movement, Prompt: clear

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

SIGHT, Impaired

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

HEARING, Good

COORDINATION, Arms, normal Legs, normal Grasp, Finger to nose, eyes shut, readily standing on one foot, some swaying standing, eyes shut, unsteady.

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

PATELLAR REFLEX, — Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES, Normal

LUNGS,

Chest symmetry: Sym

Expansion: Good

Breath Sounds: Slight bronchitis

Passed 10/18/1901: Exd. at 3 30 P.M.

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, alkali Color and Appearance, yellow, cloudy

Albumen, Heat, no: Nitric acid: no Sugar, Fehling's Sol: no: Diazo no

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, normal

BOWELS, Present Condition, regular

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

The patient is quite rational on most subjects, but has had trouble with his wife: "thinks she is untrue to him: that other men came to see her: hears them about, nights, although has never caught them".

Case is one of senile paranoia.

Personal and Medical History of William Schwede

1901

This patient was brought here by Deputy-Sheriff Emanuel Johnson, in apparently good physical condition, with following history of case. As to any consanguinity or insane relatives, do not know. This is not first attack; one occurred six months ago; do not know duration; was not sent to hospital. First symptoms of this attack manifested two weeks ago attempted to shoot neighbor. Derangement now shown by attempted homicide. Disease seems increasing; variable & with rational intervals, but these, at no regular intervals. Is disposed to injure others, but not suicidal: is disposed to filthy and destructive habits. As to any previous peculiarities, do not know. If patient or parents were ever addicted to intemperance, do not know. There is no history of any severe disease &c or head-injury: he has not been restrained or confined. Do not know cause of disease. Treatment, none. Facts learned on personal examination, none. —— " ——

July 26 On admission, was put on B3. (G. H. N. R'pt. Complexion dark: hair brown: eyes brown: condition of skin good: small bunch on right arm: is clean: teeth: 3 gone, lower jaw: 2 gone, upper jaw. Behavior good: Examined by I. F. Blood.) ——

" " Received on ward: given bath: said "that he had been drinking hard and that his wife got

Aug 8 him into trouble". Aug 8. Thinks he could get along at home: seems quite rational.

9/31 Wt 149". Aug 31. Physical State good. Nov 4. Patient taken home on trial: at

Nov 4 time of going, however, is noted as talking rationally & behaving in a trustworthy manner.

Discharged

Personal and Medical History of

Personal and Medical History of Ole A. Paulson

Whole No. 5888.
Residence, Hayfield, Minn.

Date Admission, 31st July 1901.
Admitted by Dr. E. J. Wanous hour, 4:23 P.M.
How Sent, Samuel J. Jones, Ct. Commr. in & for Dodge Co.
Sex, Male Age, 40
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Laborer
Degree Education, Common
Profession of Religion, Lutheran
Habits, Intemperate
Nativity, Norway: Parents also born there.
Physicians Committing, J. Bedient and A. L. Baker
Correspondents, none given in papers

No. for Year, 251.
Insane Relatives, None
Cause Exciting, Intemperance
Cause Predisposing, " + 2 previous attacks
Form, Mania à Potu
Accompanying Bodily Disorder, None mentioned.
Suicidal or not, Not
Date of this Attack, June 15th 1901.
Duration, 2 months
No. of Attack, Not 1st (probably Several) —
No. of Admission, 3rd
Age First Attack, 35 years
Time of Leaving, October 28 — 1901
Time in Hospital, 2 mos 27 DS
Result, Recovered: Dism May 13 — 1902 (By Supt.)

Examination on Admission by Dr. E. J. Wanous *Date of* July

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Clear
MEMORY, Past Events, Good
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Correct
REASONING POWER, Ordinary Subjects, Fair
Special Subjects, —
Own Mental State, appreciates Condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Indifferent
DELUSIONS, Systematized, Erroneous Transitory, —
Special Subjects, —
HALLUCINATIONS, ✓
ILLUSIONS, ✓
SUMMARY,

HISTORICAL.
LENGTH INVASION, —
ONSET, Gradual or Sudden, —
(Question concerning Insanity, Consanguinity, Epilepsy, HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead
Paternal Relatives, 1 Cousin insane
Mother, Dead
Maternal Relatives, No Insanity
Brothers and Sisters, 1 Dead: Consumption
(especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).
Chr. Masturbator
HABITS, Drinking and Smoking, Excess
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
Two previous attacks
Sleep, Poor Appetite, Poor Bowels, irregular

Personal and Medical History of Ole A. Paulson

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 9½ PRESENT WEIGHT, 144# USUAL WEIGHT, NUTRITION, Fair
WOUNDS, Abnormalities, No Condition of Skin, Clear
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, No
HEARING, good
COORDINATION, Arms, Normal Legs, Normal Grasp, —
TREMORS, Hands, No Tongue, — Facial Muscles, — General,
PATELLAR REFLEX, Normal Other Reflexes,
ARTICULATION, Slurred, — Hesitating, — Slow,
FACIAL EXPRESSION, — Sensibility, —
HEART, Regularity, Normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, Normal
ARTERIES, —
LUNGS,
Chest symmetry: Symm
Expansion: Good
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,

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

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

The patient is of a low mental development: is a chronic alcoholic: has been Masturbating for 26 years: frequently goes out on "Sprees," during which times he is troubled with Insomnia, and is a menace about town, frightening women &c. In good physical condition: complains of cardiac trouble — nothing noted: says "he was once overcome by heat" —

Personal and Medical History of Ole. A. Paulson

Personal and Medical History of

1901

This patient was brought here by Joel Tucker, attended by John Stuberud, in fair physical condition, with following history of case. There is no history of consanguinity, nor of heredity. This is not 1st attack; others occurred July 1900; duration 3 months: was sent to Rochester Hospital; received temporary relief. First symptoms of this attack manifested June 1st 1901. Disease seems stationary: is variable: natural intervals irregular. Derangement now shown by insomnia: restless, especially nights. Is not disposed to injure others, nor suicidal: no filthy or destructive habits: no previous peculiarities noted: there is a history of intemperance: no severe disease or head injury: has been confined in Rochester Asylum. Supposed cause of the disease is intemperance: has been treated at the Rochester Asylum. On personal examination, nothing further noted. Commitment of said Ole. A. Paulson recommended because of insomnia & restlessness.

July 31 On admission, was put on B.3 (G.H.R.1'01. Complexion light: hair light: eyes blue: condition of skin good: 2 scars on left side of chest: is clean: Teeth: 12 gone, upper jaw: 3 gone lower jaw. Behavior good: Examined by S. F. Wood)—

N.B. 3rd admission: Here before 1st time from Jan 20/96 to Apl 3/96. Vol 33 p 37 No 4305: and again here " " 2nd " " July 5/1900 to Oct 12/1900 Vol 47 - 61 - 5613

" " Diagnosis, Acute alcoholism: ——— Received on Ward: seems in good physical condition: (has been on protracted spree): no special mental defects manifested.—

Aug 9 says "he gets wild when drinking." Is working in Centre-Dining-room. Aug 13. Patient
13 shows some improvement.— Sep 30. Patient has continued to make improvement.
Oct 31 Quiet: neat & clean in habits. Behaves well. Oct 31. Was visited by a friend, & day & taken home.

Discharged

Personal and Medical History of George Smith #3

Whole No. 5889.
Residence, Ramsey Co. —
Resident of State 12 yrs: of County 12 yrs.
Date Admission, 1st August 1901.
Admitted by Dr. C. L. Chapple hour, 7 30 P.M.
How Sent, Henry Gallick, Ct Commr Ramsey Co.
Sex, Male Age, 39
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Barber
Degree Education, Common School
Profession of Religion, Baptist
Habits, Patient has used liquor —
Nativity, Minnesota: parents born in Canada.
Physicians Committing, John T. Rogers and H. G. Richeson
Correspondents, Sarah Smith (mother)
423. E. 7th Street
St Paul

No. for Year, 1.
Insane Relatives, None
Cause Exciting, Alcohol
Cause Predisposing, probably drink habits
Form, ~~[illegible]~~ à Potu
Accompanying Bodily Disorder, Nervousness?
Suicidal or not, not
Date of this Attack, 3 days ago
Duration, — 3 days —
No. of Attack, 1st —
No. of Admission, 1st here (was in County Jail)
Age First Attack, — 39 —
Time of Leaving, September 6 — 1901
Time in Hospital, 1 mos 5 Ds
Result, Recovered. —
Discharged by Superintendent
April 9 — 1902

Examination on Admission by Dr. E. J. Wanous *Date of* Aug. —

MENTAL CHARACTERISTICS.

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

HISTORICAL.

LENGTH INVASION, 1 week
ONSET, Gradual or Sudden, Sudden
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead: pneumonia
Paternal Relatives, nothing known
Mother, Living: good health
Maternal Relatives, no Insanity
Brothers and Sisters, 1 Dead
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Gonorrhoea: acute attack.
HABITS, Drinking and Smoking, to excess.
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Barber
Detail Date, Duration, and Character of Previous Attack, if any,
No
Sleep, poor Appetite, poor Bowels, regular

Personal and Medical History of George Smith #3

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 PRESENT WEIGHT, 134# USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, Scars on left elbow, from dog-bite Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, Dry: coated
PUPILS, Equality, equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, No
HEARING, Good
COORDINATION, Arms, Normal Legs, normal Grasp, Finger to nose, eyes shut yes. Standing on one foot, unsteady Standing, eyes shut, some swaying.
TREMORS, Hands, Coarse Tongue, — Facial Muscles, — General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, Somewhat Slow,
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES,
Normal
LUNGS,
Chest symmetry: Sym
Expansion: Good
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,

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

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

The patient appears very nervous: is somewhat confused in speech: says "people have been after him, trying to get him into trouble, because he had had trouble with the "Barber's Union"."

Has been on a protracted "Spree", which is the cause of present trouble. Physically, fairly good condition: has acute attack of gonorrhoea.

Personal and Medical History of George Smith #3

1901

This patient was brought here by Emanuel Johnson, in fair physical condition, with following history of case. There is no history of consanguinity nor of heredity. This is the first attack: first symptoms manifested three days ago; nervous: disease seems increasing: variable & with rational intervals: derangement now shewn by delusions: high state nervousness: is not disposed to injure others nor suicidal: no filthy or destructive habits. As to any previous peculiarities, unknown: Patient has used liquor: no history of any severe disease &c or head-injury: he has been confined in County Jail. Supposed cause of the disease is alcohol. No treatment. On personal examination, facts stated above.

Aug 1 On admission, was put on B3 (G.H.N. R'pt. Complexion dark: hair brown: eyes gray: condition of skin fair: a few old scars on left arm: bruises on back of legs: Teeth: 3 gone in upper jaw: 2 gone, lower jaw. Behavior good: very nervous & excited: " " afraid of a mob. Examined by I. F. Blood). — Received on Ward: given
6 bath & change of clothes: is confused & has hallucinations. Aug 6. Shows some improve-
15 -ment: Aug 15. (14-Day record up): patient talks rationally: is agreeable: Physical condi-
Sep 6 -tion good. Sep 6. Patient sent home.

Discharged

Personal and Medical History of

Personal and Medical History of John Ensch

Whole No. 3890.

Residence, Caledonia 2p.

Date Admission, 2nd August 1901.

Admitted by Dr. C. L. Chaffee / hour, 4th P.M.

How Sent, L. Dudall, Jo. P. Houston County

Sex, Male Age, 52+

Civil Condition, Married.

Children, 7 Age Youngest Child, —

Occupation, Stone - mason

Degree Education, Slightly educated: can sign name

Profession of Religion, Roman Catholic

Habits, Not intemperate

Nativity, Luxemburg: parents also born there.

Physicians Committing, W. E. Browning and D. C. Rheiner
Family Physician W. E. Browning

Correspondents,

Susan Ensch (wife) Caledonia Minn (in Country)

No. for Year, 2.

Insane Relatives, Brother & sister: grandfather suicided

Cause Exciting, Hereditary

Cause Predisposing, Heredity

Form, Mania à Potu

Accompanying Bodily Disorder, none mentioned

Suicidal or not, Threatened Suicide

Date of this Attack, Monday, July 29th

Duration, 4 — 5 Days.

No. of Attack, Not 1st (probably many for 10 years)

No. of Admission, 1st

Age First Attack, Not stated (37?)

Time of Leaving, November 25 — 1901

Time in Hospital, 3 mos 23 ds

Result, Recovered: Discharged May 13/1902 (by Supt.)

Examination on Admission by Dr. E. J. Wanous *Date of* Aug 4 —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Somewhat Confused

MEMORY, Past Events, Good

Recent Events, " Special Subjects, "

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Correct

REASONING POWER, Ordinary Subjects, Good

Special Subjects, " "

Own Mental State, —

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, Dead

Paternal Relatives, father committed suicide

Mother, Dead

Maternal Relatives, no Insanity

Brothers and Sisters, 4 1 2 1 bro. 1 sister insane
Children - 4 - well. / -

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

No

HABITS, Drinking and Smoking, Excess

HEADACHES, VERTIGO, OR CONVULSIONS, —

OCCUPATION, Healthy or not, Stone - mason & farming

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

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of John Ensch

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 5½ PRESENT WEIGHT, 142 lbs USUAL WEIGHT, NUTRITION, well nourished

WOUNDS, Abnormalities, Hernia Condition of Skin, Normal

TONGUE, Coatings, Promptness of Movement, Coated - Sluggish

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

SIGHT, Good

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

HEARING, Good

COORDINATION, Arms, normal Legs, normal Grasp, Other tests, ready & steady

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

PATELLAR REFLEX, — Other Reflexes, —

ARTICULATION, Slurred, — Hesitating, — Slow, —

FACIAL EXPRESSION, — Sensibility, —

HEART, Regularity, normal

Strength, Sounds, normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES,

Normal

LUNGS,

Chest Symmetry: Symm

Expansion: Good

Breath Sounds: Normal

Pulse 10/9/1901: 48 Rm. 80 10/9/1904 at 11 00

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 Color and Appearance, Dark yellow

Albumen, Heat: No — nitric acid no Sugar, Fehling's Sol.: No Trace no — Glucose

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, —

BOWELS, Present Condition, —

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

The patient seems quite normal mentally: says "he cannot get along with his wife, because she does not treat the children well". Case is a chronic alcoholic: frequently gets intoxicated, which has been the source of most of his trouble: has small umbilical hernia.

Personal and Medical History of John Ensch

1901

This patient was brought here by Sheriff F. H. Evans, attended by Louis Helm, in fairly good physical condition, with following history of case. There is no history of consanguinity but there are relatives insane: brother and sister: grandfather suicided: this is not 1st attack: others occurred occasionally for 15 years: duration variable: first symptoms of this attack manifested Monday, July 29th - by ungovernable temper. Disease seems increasing: variable & with rational intervals, but these not regular. Derangement now shown by abuse of family and neighbors: is disposed to injure others: has not attempted suicide, but has threatened: no filthy or destructive habits. He previously showed an ungovernable temper; sullen habits. There is no history of intemperance, nor of any severe disease or a head-injury: has been confined: was arrested for assault and battery. Supposed cause of the disease is hereditary. Treatment, none: On personal examination, facts learned repeating story. - Commitment recommended because of Section 17 - 2. 5. -

Aug 2 On admission, was put on B3 (G. H. N. P'pt. Complexion dark: hair gray: eyes blue; condition of skin good: discoloration of right eye; and left ear: warts on side of face: is clean. Teeth: four gone, in upper jaw: behavior good: Exd by I. F. Blood).

" " Received on Ward: given bath: shows no special mental defects. (has been a drinker) -

11 says "he is not insane". Aug 11. Says "he had trouble with his wife, while drunk." -

15 Patient seems much improved. (14 day period completed). Is in fair condition -

Oct 30 Works some: health good. Oct 30. Patient continues to make improvement -

Nov 25 Patient sent home, on trial: Mental state fairly good.

Discharged

Personal and Medical History of

Personal and Medical History of Thomas Mallay

Whole No. 5892

Residence, Penn.

Became resident of State: May 1901: of County: June 1901.

Date Admission, 2nd August 1901.

Admitted by Dr. C. L. Chapple hour, 8.00 P.M.

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

Sex, Male Age, 53.

Civil Condition, Single

Children, — Age Youngest Child, ✓

Occupation, Laborer

Degree Education, Common School.

Profession of Religion, Catholic

Habits, Not intemperate

Nativity, Ireland: parents also born there.

Physicians Committing, H.W. Davis and W.G. Richeson

Correspondents, None given in papers —

No. for Year, 4.

Insane Relatives, None

Cause Exciting, Don't Know

Cause Predisposing, not stated

Form, Acute ~~Maniacal~~

Accompanying Bodily Disorder, None mentioned

Suicidal or not, Not.

Date of this Attack, 2 weeks ago

Duration, 2 weeks

No. of Attack, 1st —

No. of Admission, 1st here (County Jail - 1 day).

Age First Attack, 53.

Time of Leaving,

Time in Hospital,

Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* Aug. —

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, Impaired

Recent Events, " " Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Correct

REASONING POWER, Ordinary Subjects, poor

Special Subjects, —

Own Mental State, —

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

DELUSIONS, Systematized, of persecution Transitory, ✓

Special Subjects, ✓

HALLUCINATIONS, "of hearing"

ILLUSIONS, ✓

SUMMARY, —

HISTORICAL.

LENGTH INVASION, ✓

ONSET, Gradual or Sudden, ✓

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

Father, Dead: accidental

Paternal Relatives, No Insanity

Mother, Dead: Oscitis

Maternal Relatives, No insanity

Brothers and Sisters, 4 - Condition not known.

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

Pneumonia: malaria: measles caused blindness

HABITS, Drinking and Smoking, periodic drinker

HEADACHES, VERTIGO, OR CONVULSIONS, ✓

OCCUPATION, Healthy or not, Laborer

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

Left hospital in Philadelphia April 13 - 1900.

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of Thomas Mallay

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, blind on right eye. Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, Coated

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

SIGHT, —

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, some opacity of left eye: is partly blind

HEARING, good

COORDINATION, Arms, Normal Legs, Normal Grasp, other tests, normal

TREMORS, Hands, No Tongue, No Facial Muscles, General,

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, — Slow,

FACIAL EXPRESSION, Sensibility, Normal

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES, 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,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Constipated

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

The patient is suffering from acute mania, with delusions of persecution: "thinks people are after him with blood-hounds": "can hear them talking about him & arranging to kill him".

Has had operation for relief of opacity of left eye, without success: right lost during attack of measles.

Personal and Medical History of Thomas Mallay

1901

This patient was brought here by Emanuel Johnson, in fair physical condition, with the following history of case. There is no history of consanguinity; no insane relatives: this is the first attack; first symptoms manifested 2 weeks ago, by delusions of persecution: Disease seems increasing: not variable: no rational intervals. Derangement now shown in the way of "persecution". Is not disposed to injure others, nor suicidal: no filthy nor destructive habits. No previous peculiarities noted: no history of intemperance nor of any severe disease &c nor head-injury: he has been confined in County Jail, 1 day. Dont know cause of the disease: treatment, none. On personal examination, nothing mentioned

Aug 2 On admission, was put on T.W. (G.H.N.R.pt. Complexion dark: hair brown & gray: eyes brown: Condition of skin good: varicose veins: is blind in right eye, and cataract in left eye: mole on forehead and mole on right side: scars on left side of neck: scars on right side of chin: scar on right shin: is dirty. Teeth: 9 gone, upper jaw: 8, lower jaw. Behavior

" " good: Examined by Vankirk & Clausen) - Received on ward: given bath: has

5/12 delusions of persecution: very much agitated. Aug 5. Is very restless. Aug 12. Seems

14 somewhat improved: works on ward. Aug 14. Patient continues to improve. -

15/ Wt 148#. Aug 31. Is neat & clean: eyesight poor: well behaved. Talks intelligently -

Jany 31 Has continued the same, since coming: Is noted, at one time, as "thinking some one was going to kill him", but has manifested no specially peculiar mental state, except that of mild dementia. Feb. 1/02 158#. Mar. 30/02 Always quiet. has parole; occasionally talks to himself.

Jany 31/03 Has vague delusions; but these are not at all prominent. Always behaves well & quietly.

Personal and Medical History of

Personal and Medical History of Nils Johnson #5

Whole No. 5894

Residence, Redwing, Minn

Date Admission, 8th August 1901

Admitted by Dr. E. J. Wanous hour, 7:30 PM

How Sent, Axel Haller, Jolf. Goodhue County

Sex, Male Age, 29.

Civil Condition, Married

Children, 2 Age Youngest Child, —

Occupation, Setter in Saw-mill

Degree Education, Common School

Profession of Religion, Lutheran

Habits, Not intemperate.

Nativity, Sweden; Parents also born there.

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

Correspondents, Mrs Mary Johnson (wife) 123 E. 5th Street. Redwing

No. for Year, 6.

Insane Relatives, yes: one sister

Cause Exciting, overcome by heat, 2 or 3 days before attack

Cause Predisposing, possibly heredity.

Form, acute confusional

Accompanying Bodily Disorder, none mentioned — Fract injury of head 4 years ago —

Suicidal or not, not

Date of this Attack, July 31st 1901

Duration, — 18 Days —

No. of Attack, 1st —

No. of Admission, 1st —

Age First Attack, — 29 —

Time of Leaving, August 22 - 1901.

Time in Hospital, — 14 dd —

Result, Improved —

Discharged by Board of Control. — July 26 - 1902

Examination on Admission by Dr. E. J. Wanous *Date of* Aug —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Somewhat Sluggish

MEMORY, Past Events, good

Recent Events, " " Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, poor

Special Subjects, " "

Own Mental State, —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

Depressed

DELUSIONS, Systematized, of persecution Transitory, —

Special Subjects, —

HALLUCINATIONS, "of hearing" —

ILLUSIONS, —

SUMMARY,

HISTORICAL.

LENGTH INVASION, 1 month

ONSET, Gradual or Sudden, Sudden

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

Father, Dead: Cause not known

Paternal Relatives, No Insanity

Mother, Living

Maternal Relatives, No Insanity

Brothers and Sisters, Children 4 — 2 children Dead

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

Typhoid, 6 years ago: sunstroke about 4 weeks ago: struck on temporal region 4 years ago: no fracture.

HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Laborer

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

No

Sleep, poor Appetite, poor Bowels, Irregular

Personal and Medical History of Nils Johnson #5

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft ½ in PRESENT WEIGHT, 187 lb USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, —

Condition of Skin, sluggish

TONGUE, Coatings, Promptness of Movement, clear

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

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, no

HEARING, good

COORDINATION, Arms, normal Legs, normal Grasp, other tech, ready & steady

TREMORS, Hands, no Tongue, — Facial Muscles, — General,

PATELLAR REFLEX, delayed & sluggish Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, — Slow,

FACIAL EXPRESSION,

Sensibility, —

HEART, Regularity, irritable

Strength, Sounds, Distinct

Size, normal

Apex Beat, "

Murmurs, none noted

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,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Insomnia

BOWELS, Present Condition, Costive

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

The patient appears somewhat depressed & sluggish: about 4 weeks ago was overcome by heat: was unable to work for several days since, has been confused. Says "people come around his house, night and annoyed him": "think they are persecuting him" —

Physical condition good: except heart which is very irritable.

Personal and Medical History of Nils Johnson #5

1901

This patient was brought here by Sheriff P. J. Lundquist, in fair physical condition, with following history of case. There is no history of consanguinity: insane relatives, yes: one sister. This is first attack: first symptoms manifested July 21st 1901: imagined that people were after him to do him harm: disease seems stationary: not variable: no rational intervals: Derangement now shown as above stated: Is not disposed to injure others, nor suicidal: no filthy or destructive habits: No previous peculiarities noted. No history of intemperance: no severe disease &c, except an injury to head, 4 years ago. He has not been restrained or confined. Supposed cause of the disease is that he was overcome by heat 2 or 3 days, before attack: Treatment has been sedatives; usual effects. On personal examination, pulse is rapid: tremulous: coated tongue: he appears downcast and anxious.

Aug 8 On admission, was put on B3 (G. H. N. R'pt. Complexion dark: hair brown: eyes light-brown; condition of skin good: marks: 1 on left ankle: 1 on left foot: one scar on left leg: is clean. Teeth: 3 gone, on each side of lower jaw: Behavior good: Ex'ly S. F. Blood)

" 11/13 Received on ward: has delusions of persecution: (poisoning). Aug 13. Still talks about being poisoned: Aug 19. Asks for something to do. Aug 21. Seems very much improved:

19/21 22 Eloped, while out walking.

Discharged.

Personal and Medical History of

Personal and Medical History of Ole Rikhim

Whole No. 5895.
Residence, Moscow.
Date Admission, 12th August 1901.
Admitted by Dr. C. L. Chapple hour, 8.00 P.M.
How Sent, Hernan Blackmer, Jos P. Freeborn Co.
Sex, Male Age, 35
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Common School
Profession of Religion, not a church member
Habits, Said formerly to have been intemperate
Nativity, Norway: parents also born there.
Physicians Committing, Oscar O. Burton and G. W. Barck
Correspondents, Nels Rikhim (bro) Oakland, Minn.

No. for Year, 7.
Insane Relatives, one cousin
Cause Exciting, mind dwelling on his condition
Cause Predisposing, possibly habits & heredity
Form, Chronic Melancholia
Accompanying Bodily Disorder, "results of masturbation"
Suicidal or not, — not —
Date of this Attack, May 1901
Duration, about 3 months
No. of Attack, Not 1st: Daily, since May.
No. of Admission, 1st
Age First Attack, about 35.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. J. Evanow *Date of* Aug —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Clear
MEMORY, Past Events, Good
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Correct
REASONING POWER, Ordinary Subjects, good
Special Subjects, " "
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Normal
DELUSIONS, Systematized, None Transitory, at present
Special Subjects,
HALLUCINATIONS, ✓
ILLUSIONS, ✓
SUMMARY, ✓

HISTORICAL.

LENGTH INVASION, ✓
ONSET, Gradual or Sudden, ✓
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead
Paternal Relatives, No Insanity
Mother, Living
Maternal Relatives, no Insanity
Brothers and Sisters, 1 6 1 sister Dead
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Masturbator: gonorrhoea: night emissions —
HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any, no
Sleep, fair Appetite, fair Bowels, irregular

Personal and Medical History of Ole Rikhim

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 10½ PRESENT WEIGHT, 147# USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, no Condition of Skin, sluggish
TONGUE, Coatings, Promptness of Movement, grayish coated
PUPILS, Equality, equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, ✓
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, other tests, normal
TREMORS, Hands, no Tongue, — Facial Muscles, General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, ✓ Slow,
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none
ARTERIES, Normal
LUNGS,
Chest symmetry: Sym
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,

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

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

The patient has been a chronic masturbator and has been troubled with emissions. Says "he is constantly troubled with "body heat", which would make him mad, and he would swear & talk about it, to himself." His brother heard him & thought he was crazy.

Physically seems generally sluggish.

Personal and Medical History of Ole Rikhim

1901

This patient was brought here by C. M. Wilkinson, attended by I. L. Ingbritsen, in fair physical condition & with following history of case. As to consanguinity, unknown: insane relatives, one cousin. This is not 1st attack: others occurred daily since May: duration, few hours: was not sent to hospital: first symptoms of this attack manifested in May 1901: disease seems increasing: variable & with rational intervals & these at regular intervals. Derangement now shown by brooding over sexual condition and talking to himself in irrational manner. Is not disposed to injure others, nor suicidal — No filthy or destructive habits. He previously showed peculiarities: sometimes would burst out laughing, after a quiet interval. Formerly, patient was said to have been intemperate. No history of any severe disease &c, or head-injury. He has not been restrained or confined. Supposed cause of the disease is keeping his mind dwelling on his condition. Treatment, none. On personal examination it is found that in former years he practiced masturbation (moderately) and for 3 last years has had involuntary ejaculation nightly, and sometimes diurnal. There is hypertrophy of heart. — — — —

Aug 12 On admission, was put on T.W. (G. H. N. R'pt. Complexion dark: hair brown: eyes blue: condition of skin fair: 2 moles, on left side: large wart in palm of left hand: vaccination scars, on left arm: scar on left knee: scar on right knee: scar on left hip. Is dirty: teeth: one gone, upper right jaw. Behavior good: examined by E. W. Ballard) —

" 11/15 Received on ward: given bath: is a sexual hypochondriac: put on treatment: Aug 15 — Shows

25 some improvement: Aug 25. Continues to improve, both mentally & physically. —

26/31 Transferred to B3. Aug 31. Health good: quiet & well-behaved: Oct 1. Wt 161#

Nov 1 Wt 164#. Dec 1. Wt 164#. Very little change. Jany 25/02. To B2. Jany 31. Has improved

1902 Jany 31 some mentally: worked well, on ward: habits tidy.

Feb. 1/02 Wt. 157#; May 1 Habits & appearance neat; works well on ward; fairly rational. July 8. Has been at work on lawn. Went to camp today at Oronoco. Aug. 13 Returned from camp. Aug. 14 Works on lawn. Oct 1. Quit work on lawn; but works some on ward. Dec. 3 Trans. to I.W.E. Complains of headache; has nose bleed; eats little; No fever; Dec. 22 Up on ward: Improved. Jan. 31 Patient is indolent & listless; sits quietly about; walks out with others; says little. (Dr. O.C.)

Personal and Medical History of

Personal and Medical History of Charles Behnke

Whole No. 5898.
Residence, Carmona —
Date Admission, 17th August 1901.
Admitted by Dr E. J. Wanous hour, 1:30 P.M.
How Sent, E. V. Farrington, Jof P. Fillmore County
Sex, Male Age, 30
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Common School
Profession of Religion, German Evangelical
Habits, not intemperate
Nativity, Canada: Parents born in Germany
Physicians Committing, J. Phillips and W. B. Grinnell
Correspondents, Frank Behnke (father) Carmona, Minn

No. for Year, 10.
Insane Relatives, None
Cause Exciting, Dont know
Cause Predisposing, not stated
Form, Acute melancholia
Accompanying Bodily Disorder, None mentioned
Suicidal or not, not
Date of this Attack, about 5 weeks ago
Duration, — about 5 weeks —
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, — 30 —
Time of Leaving, November 25 — 1901
Time in Hospital, 3 mos — 8 ds.
Result, Improved: Dsgd. May 10 — 1902 by Bd of C

Examination on Admission by Dr. E. J. Wanous *Date of* Aug —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused.
MEMORY, Past Events, Good
Recent Events, " " Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, Poor
Special Subjects, " "
Own Mental State, Does not appreciate Condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, — Transitory, Yes
Special Subjects, property
HALLUCINATIONS,
ILLUSIONS,
SUMMARY,

HISTORICAL.

LENGTH INVASION,
ONSET, Gradual or Sudden,
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living
Paternal Relatives, No Insanity
Mother, Living
Maternal Relatives, No Insanity
Brothers and Sisters, 1 bro. 3 sisters dead: all died young.
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
No
Masturbator
HABITS, Drinking and Smoking, Yes
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Farming
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, poor Appetite, fair Bowels, Irregular

Personal and Medical History of Charles Behnke

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11½ PRESENT WEIGHT, 196 lbs USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, No Condition of Skin, Rough: sluggish
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, Arms, Normal Legs, normal Grasp, Sluggish brows, eyes shut, scarcely Romberg, arms out, feet, inclined — Romberg, eyes shut, some swaying
TREMORS, Hands, No Tongue, — Facial Muscles, — General,
PATELLAR REFLEX, normal Other Reflexes, —
ARTICULATION, Slurred, — Hesitating, Yes Slow, Yes
FACIAL EXPRESSION, — Sensibility, Normal
HEART, Regularity, Irritable
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES,
Normal
LUNGS,
Chestpmmetry: 4 pm
Expansion: Good
Breath Sounds: normal

CRANIAL MEASUREMENTS.

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

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

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

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

The patient is somewhat confused; depressed: very much agitated. Thinks he has done wrong: that he has robbed his father of his property and that he will have to suffer for it.
Patient has been a frequent masturbator.

Personal and Medical History of Charles Behnke

1901

This patient was brought here by E. K. Blexrud, attended by Geo. Hopp, in fair physical condition with following history of case. There is no history of consanguinity nor of heredity. This is 1st attack: first symptoms manifested about 5 weeks ago; became depressed and melancholic: disease seems increasing: not variable: no rational intervals: derangement now shown in that he has delusions in regard to his property: is very melancholic and depressed. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. No previous peculiarities noted:- no history of intemperance, nor of any severe disease &c, or head-injury. He has not been restrained or confined. Dont know cause of the disease. He has been treated by several physicians, but with no result. On personal examination, patient is depressed, melancholic; is restless: has delusions &c. Commitment recommended because his disease is of such a nature, and in such a state, as to require regular aid & assistance while under legal restraint. His dangerous to himself & others to have him at large.— He is now, and has been a resident of Fillmore County for last 27 years past.—

Aug 17 On admission, was put on B3 (G.H.N.R.Pt. Complexion dark: hair light brown: eyes gray: Condition of skin fair: wart on right cheek: scars on right thigh: scar on right hand. Eruptions on abdomen: is dirty: teeth: 4 gone upper jaw. Behavior good. Ex. by Howe & J. F. Blood)

" 1/18 Received Onward: Given bath: seems very nervous & unsteady: Aug 18. Transferred to TW:

20 put to bed: is very stubborn: has idea "Some one is trying to poison him". Aug 20. Refuses

23/30 medicine: Aug 23. Patient somewhat improved. Aug 30 — 14-day record completed —

Oct 25 Rational in talk: Worries a good deal: is nervous. Oct 25. Visited by sister —

Nov 1/25 Wt 216# (Last Sept 1 - 195#) - Nov 25. Went home, on trial, with sister: patient's condition showed somewhat of dementia: answered hesitatingly: memory not very good: talks, at times, to himself. —

Discharged

Personal and Medical History of

Personal and Medical History of Isaac Liddle

Whole No. 5901

Residence, Hastings. Minn

Date Admission, 19th August 1901.

Admitted by Dr. E. J. Wanous hour, 7 30 PM

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

Sex, Male Age, 74

Civil Condition, Widowed.

Children, 6 Age Youngest Child, —

Occupation, Ex-Farmer

Degree Education, Common School

Profession of Religion, Methodist

Habits, Not intemperate

Nativity, Dearborn Co. Indiana: Parents born in England.

Physicians Committing, J. C. Fitch and H. VanBeck

Correspondents, C. M. Liddle

(address of Son) Hastings, Dakota Co. Minn

No. for Year, 13.

Insane Relatives, he had a sister, who was insane

Cause Exciting, Loss of Son & LaGrippe

Cause Predisposing, probably heredity & age

Form, Senility

Accompanying Bodily Disorder, Stomach trouble for several years

Suicidal or not, Not, but threatens injury to others.

Date of this Attack, In Winter of 1901.

Duration, Some 9 months

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, 73+

Time of Leaving, September 20 – 1901

Time in Hospital, 1 mo. 1 day

Result, Died: Organic heart disease

Examination on Admission by Dr. E. J. Wanous *Date of* Aug. —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused

MEMORY, Past Events, Poor

Recent Events, " Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Dull

REASONING POWER, Ordinary Subjects, Poor

Special Subjects, Thinks he owns "C M & St P Road"

Own Mental State, Does not appreciate Condition

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

rather indifferent

DELUSIONS, Systematized, Yes Transitory, Yes

Special Subjects, —

HALLUCINATIONS, "of hearing"

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, No Insanity

Mother, Dead

Maternal Relatives, No Insanity

Brothers and Sisters, 3 4 1 Sister Insane: has all dead: children – 9 – 2 Dead (especially Typhoid Fever, Sunstroke,

PROMINENT DISEASES, Head Injuries and Surgical Operations).

LaGrippe

HABITS, Drinking and Smoking, No

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Nothing of late

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

Sleep, fair Appetite, fair Bowels, regular

Personal and Medical History of Isaac Liddle

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 11 PRESENT WEIGHT, 111½ lbs USUAL WEIGHT, NUTRITION, Poor

WOUNDS, Abnormalities, No Condition of Skin, Sluggish

TONGUE, Coatings, Promptness of Movement, Coated

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

SIGHT, Impaired

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

HEARING, Impaired

COORDINATION, Arms, normal Legs, normal Grasp, other tests, very unsteady & uncertain

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

PATELLAR REFLEX, Sluggish Other Reflexes,

ARTICULATION, Slurred, — Hesitating, — Slow, Yes

FACIAL EXPRESSION, Sensibility, normal

HEART, Regularity, very irregular

Strength, Sounds, Distinct

Size, normal

Apex Beat, "

Murmurs, none noted

ARTERIES,

Sclerotic

LUNGS,

Chest symmetry: Sym

Expansion: Poor

Breath Sounds: harsh

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

BOWELS, Present Condition, Costive

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

The patient seems confused, forgetful & very irritable: has various delusions regarding possession of property, wealth &c: has hallucination of hearing: "hears people talking to him, at a great distance" –

Condition came on with an attack of LaGrippe last Winter. has a chronic bronchitis.

Personal and Medical History of Isaac Liddle

1901

This patient was brought here by N. J. Stefen, attended by Joseph Lourence, in poor physical condition, with following history of case. Dont think that parents or grand parents were related. — He had a sister who was insane. This is 1st attack; was never sent to hospital: first symptoms of this attack manifested in Winter of 1901: imagined he heard sounds from distance & hearing voices of persons dead or living miles away. Disease seems increasing: variable & with rational intervals, but these not regular. Derangement now shown in that he imagines he hears voices from his dead wife & son, and also of persons living at a long distance. And imagines he condemns persons to death. He threatens to injure them (others): not suicidal: no filthy or destructive habits. No previous peculiarities noted: no history of intemperance: he had La Grippe in 1901: has had more or less stomach trouble for several years. He has not been restrained or confined. Supposed cause of the disease is Loss of son and La Grippe. Treatment has been only for general condition. On personal Examination, tongue tremulous, pulse remittent and irregular: claims that unjust claims are made against him: — believes he hears the voice of his dead son; easily aroused to anger. — . — . —

Aug 19 On admission, was put on T.W. (G.H.N. Rpt. Complexion fair: hair gray: eyes gray: Condition of skin fair: large mole on back, between shoulders: mole on back of thumb of right hand small mole on front of neck: wart on spine: is clean: teeth all gone: behavior is good: Examined by E. Ballard). — . — . —

" " 20/22 Received on Ward: given bath & put to bed. Aug 20. Expresses "grandiose" ideas. Aug 22. Seems

Sep 1/2 feeble. Sep 1. Patient is failing physically. Sep 2. Patient up and dressed, today. Physical state seems rather poor. "Thinks he owns the R.R." fainted today. Wt 106#

16/17 Has continued to be very weak. Today, Put to bed. Sep 17. Patient's Temperature

18 has been above normal & patient seems quite weak. Sep. 18. Is failing steadily —

20 Died at 9 15 am —

— Died —

Personal and Medical History of

Personal and Medical History of Max Schultz

Whole No. 5902.
Residence, Granger
Is now & has been a resident of Fillmore Co for 22 yrs past
Date Admission, 19th August 1901.
Admitted by Dr. C. L. Chapple hour, 8 45 P.M.
How Sent, E. V. Farrington, Jo P. Fillmore County
Sex, Male Age, 22
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farmer
Degree Education, Common School
Profession of Religion, Lutheran
Habits, Not intemperate
Nativity, Minnesota: parents born in Germany.
Physicians Committing, J. H. Phillips and Geo. A. Love
Correspondents, Hiram Schultz (father) Granger. Minn

No. for Year, 14.
Insane Relatives, None
Cause Exciting, Dont Know
Cause Predisposing, not stated
Form, Imbecility & Adolescence.
Accompanying Bodily Disorder, None mentioned
Suicidal or not, Not, but threatens to injure others.
Date of this Attack, about one month ago
Duration, about one month
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, - 22 -
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. J. Wanous *Date of* Aug —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Confused
MEMORY, Past Events, Impaired
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull
REASONING POWER, Ordinary Subjects, Poor
Special Subjects, " "
Own Mental State, Does not appreciate Condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Exalted
DELUSIONS, Systematized, — Transitory, Yes
Special Subjects,
HALLUCINATIONS, "of hearing" —
ILLUSIONS, —
SUMMARY, —

HISTORICAL.
LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living
Paternal Relatives, Nothing obtainable
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Got hurt in a run-away
HABITS, Drinking and Smoking, No
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Farming
Detail Date, Duration, and Character of Previous Attack, if any, No
Sleep, Appetite, Bowels,
— Dont Know —

Personal and Medical History of Max Schultz

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 6 in PRESENT WEIGHT, 120 lbs USUAL WEIGHT, NUTRITION, Fair
WOUNDS, Abnormalities, old fracture of left Clavicle Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, Coated
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, —
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, —
COORDINATION, Arms, not obtainable Legs, Grasp,
TREMORS, Hands, — Tongue, — Facial Muscles, — General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, Slow,
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, irritable
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES, 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,

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

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

The patient is of a low mental development: shows several signs of degeneracy: at present, is incoherent & delusional: very talkative and exalted. "Thinks he can communicate with departed people", and, at intervals, listens attentively, whispering to himself. When asked - What he is doing", says "he is talking to Ennis" —

Personal and Medical History of Max Schultz

1901

This patient was brought here by Sheriff E. K. Blexrud, in fairly good physical condition, with following history of case. There is no history of consanguinity nor of heredity. This is the 1st attack; first symptoms manifested about one month ago: talked incoherently and a great deal: sometimes, all night: runs away from home. Disease seems increasing: Not variable: no rational intervals: Derangement now shown by general mania: sometimes depressed and melancholic & then very excited and passionate; disposed to injure others, only by threats: not suicidal: no filthy or destructive habits: no previous peculiarities, but was dull and not able to learn like other boys: there is no history of intemperance, nor of any severe disease &c or head-injury. He has not been restrained or confined. Dont know cause of the disease: no treatment mentioned. On personal examination, has all the appearances of chronic mania: Commitment recommended because it is dangerous to himself and others to have him at large. His disease is of such a nature and in such a state as to require regular aid and assistance while under legal restraint. He is now & has been a resident of Fillmore County for last 22 years past. — .. — .. —

Aug 19 On admission, was put on B3 (G. H. N. R'pt. Complexion dark: hair black: eyes brown; Condition of skin good: is clean: teeth: 3 gone, upper jaw: one, lower jaw: behavior good)

" " Received on ward: given bath: was restless, all night. Patient has Temp 100° P 96.

26/28 Is noisy & very incoherent, at times. Aug 28. Put on Electrical treatment —

29 Is extremely filthy. Sept 1. no improvement in condition. Still noisy, restless and

Sept 1 incoherent, at times. Rather confused: talks little: foolish in behavior. Wt. 121# —

30 Has become extremely filthy & troublesome. Oct 1. Wt 125# — Dec 27. Had severe

Dec 27 "Choking spell", at supper table, but food was removed by nurses — Jany 1/02. 139#

Jany 31 Remains about same: very silly & demented. Feb 1/02 Wt. 142#. Mar 20/02

Is rather dull, somewhat untidy. Quite demented & indifferent. Talks to himself — occasionally inclined to be violent. May 7/02 No change in condition.

Aug 1 Wt. 146# Fairly tidy — does nothing; indifferent; Oct. 15 Trans. to Annex. Nov. 3

03 Visited by father & mother.

Jan. 31 Habits cleanly; works little on ward; did work on farm; silly & mischievous; health good, except for considerable Acne. (C.L.C.)

Personal and Medical History of

Personal and Medical History of Leonard Halfen

Whole No. 5903.
Residence, Dakota County, Minn
Date Admission, 20th August 1911.
Admitted by Dr. E. J. Hanous hour, 7:30 P.M.
How Sent, Thos. P. Moran, Jo. P. Dakota County
Sex, Male Age, 35 years
Civil Condition, married
Children, Five Age Youngest Child, —
Occupation, Farmer
Degree Education, Common school
Profession of Religion, Catholic
Habits, Not intemperate
Nativity, Germany: Parents also born there.
Physicians Committing, J.C. Fitch and D. Van Cappellen M.D.
Correspondents, Angela Halfen
(address of wife) Farmington, Dakota Co. Minn

No. for Year, 15.
Insane Relatives, Dont Know
Cause Exciting, Dont Know
Cause Predisposing, Previous attack possibly
Form, Stuporous melancholia
Accompanying Bodily Disorder, None mentioned
Suicidal or not, — not —
Date of this Attack, Thursday last
Duration, — 6 days —
No. of Attack, 2nd (one, about 3 months since)
No. of Admission, 1st here (was at Fergus Falls)
Age First Attack, 35 (about) —
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. J. Hanous *Date of* Aug —

MENTAL CHARACTERISTICS.

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

HISTORICAL.

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

Father, Dead
Paternal Relatives, No insanity
Mother, Dead
Maternal Relatives, no insanity
Brothers and Sisters, 3 √ all well
Children √ — all well — (especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
no

HABITS, Drinking and Smoking, In Excess
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Farming
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, Poor Appetite, Poor Bowels, Constipated

Personal and Medical History of Leonard Halfen

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, Good
WOUNDS, Abnormalities, no Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, badly coated
PUPILS, Equality, Equal Size, Normal Response to Light, Slow Accommodation, Slow
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, other fair, steady & steadily
TREMORS, Hands, No Tongue, — Facial Muscles, — General,
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, Slow,
FACIAL EXPRESSION, —
HEART, Regularity, normal
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES,
Normal
LUNGS,
Chest symmetry: Ogm
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,

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).

The patient seems quite rational, at intervals: when excited, becomes confused, maniacal & very noisy — (Caused by hallucination) Physical condition good.

Personal and Medical History of Leonard Halfen

1901

This patient was brought here by W. J. Steffen, attended by J. M. Laurence in fair physical condition, with following history of case. As to any consanguinity, or any insane relatives, dont know. This is not first attack: one occurred about 3 months since; duration a few days:- was sent to hospital at Fergus Falls: (we are informed that he was released from there, on a bond)- First symptoms of this attack manifested last Thursday: began talking insanely about religion. Disease seems increasing: not variable: no rational intervals. Derangement is now shown upon religious subjects. Is not disposed to injure others, nor suicidal. No filthy or destructive habits: no previous peculiarities noted: no history of intemperance, nor of any severe disease &c or head-injury. If restraint or confinement has been employed, not stated. Dont know cause of the disease: no treatment mentioned.- On personal examination, he insists upon wearing a crucifix & cross, and other religious emblems; saying "it is the Will of God, that he should do so." ——

Aug 20 On admission, was put on I.W. (G.H.N. R'pt. Complexion dark: hair dark-brown: eyes blue: condition of skin good: several small moles on back: scars on right side about 3 inches long, ½ inch wide: scar on right hip: scar on left arm, below shoulder: scar on left hip: scar on left thumb: is clean: teeth good, except on an upper jaw. Behavior good: Examined by Clausen). —— " ——

N.B. See letter 8/23/01 from Geo. O. Welch, Supt. Fergus Falls State Hospital which states "Leonard Halfen was admitted to this hospital June 8-1901: was picked up on streets of Fergus Falls, greatly afraid that some one would kill him & had applied to the Police for protection. While in hospital, expressed the idea that certain people wished to harm him: that they came around his house, at night, & knocked on the doors, windows &c - This ap was corroborated by his wife & son, who also said that they heard people about the house. Patient remained in bed quietly & gave no trouble until the 16th Inst, when he was permitted to be up & about the hall. At this time, he became greatly excited, his respirations rapid, and superficial and he said "That he was surely going to die." He remained noisy & hysterical the greater part of the night. On the 17th, he was visited by his wife and brother-in-law, who took him from the Hospital under $500 Bonds. He was discharged from the hospital July 29-1901.

Aug 20/21 Received on ward; Aug 21. T 100 8/10. Inclined to be violent. Put in restraint Sheet.
23 T. remains 100° & over. "Thinks some one is going to kill his wife". Sep 1. Inclined
Sep 1/2 to refuse food: very stubborn. Sep 2. Is cataleptic as regards portion of his limbs.
16 Has been under electrical treatment & cold shower-baths. T- is now about normal.
Oct 1 Behavior somewhat quieter. Oct 1. Bodily state has been about normal & he has
5/12 been more quiet. Oct 5. Up, dressed & on ward. Oct 12. Transferred to B2 -
Nov 1 Has been receiving Static Electricity & cold showers. Nov 1. Wt 159#. Dec 13. Visited
Dec 13/1902 16 by friends. Dec 26. By wife. Jany 31/02. Made some improvement, for a time.
Jany 31 Became more talkative & worked well on ward; but, during past month, has fallen back considerably. Is very depressed & quiet.

Personal and Medical History of

Feb 1 Wt. 166#. Aug. 1 Wt. 143#. Works some on ward, is very depressed: has nothing to say; Oct. 1. Visited by brother-in-law; would not speak to him. Dec. 16 Has swollen knee; transferred to I.W.E. Has not been well physically of last; some fever; purpuric discoloration on leg. Jan 4/03 Up on ward; Improved. Jan 5. Trans. B2.
Jan 13/31 Condition about same. Sits quietly Works a little on ward. (C.L.C.)

Personal and Medical History of John Boyle

Whole No. 5904.
Residence, St Paul, Minn
Date Admission, 20th August 1901.
Admitted by Dr E. Z. Wanous hour, 7.30 P.M.
How Sent, E. W. Bazille, Jos P. Ramsey County
Sex, Male Age, 56
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Mail-Carrier
Degree Education, Common School
Profession of Religion, Catholic
Habits, not intemperate (?)
Nativity, Pennsylvania; father's, Ireland: Mother's, Pennsylvania
Physicians Committing, W. G. Richeson and Philemon Roy
Correspondents, Daniel Boyle
St. Anthony Hill Sub-Station St. Paul

No. for Year, 16.
Insane Relatives, None
Cause Exciting, Don't Know
Cause Predisposing, not stated
Form, Alcoholic Dementia
Accompanying Bodily Disorder, None mentioned
Suicidal or not, — not —
Date of this Attack, July 13th/01.
Duration, 5 to 6 weeks
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, 56.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. Z. Wanous *Date of* Aug —

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, fair
Special Subjects, —
Own Mental State, —
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Depressed
DELUSIONS, Systematized, — Transitory, —
Special Subjects, —
HALLUCINATIONS,
ILLUSIONS, —
SUMMARY,

HISTORICAL.
LENGTH INVASION, 1½ months
ONSET, Gradual or Sudden, Sudden
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead
Paternal Relatives, no Insanity
Mother, Dead
Maternal Relatives, no Insanity
Brothers and Sisters, —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations). Pneumonia
HABITS, Drinking and Smoking, yes: has taken "cure" —
HEADACHES, VERTIGO, OR CONVULSIONS, No
OCCUPATION, Healthy or not, Mail-carrier
Detail Date, Duration, and Character of Previous Attack, if any, No
Sleep, poor Appetite, poor Bowels, Irregular

Personal and Medical History of John Boyle

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7 in PRESENT WEIGHT, 100 lbs USUAL WEIGHT, NUTRITION, fair
WOUNDS, Abnormalities, no Condition of Skin, sluggish
TONGUE, Coatings, Promptness of Movement, Dry coated
PUPILS, Equality, equal Size, small Response to Light, slow Accommodation, slow
SIGHT, impaired
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, Arms, normal Legs, normal Grasp, other tests, unsteady
TREMORS, Hands, yes Tongue, — Facial Muscles, — General,
PATELLAR REFLEX, sluggish Other Reflexes, —
ARTICULATION, Slurred, Hesitating, yes Slow, yes
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, normal
Strength, Sounds, Normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES, Normal
LUNGS,
Chest symmetry: Sym
Expansion: fair
Breath Sounds: normal
Passed 10/19/1901 at 5.00 am: Ex. 10/19/1901 at 11.00 am

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 a sediment
Albumen, Heat: no Nitric acid no Sugar, Fehling's Sol no — Diazo no
Casts and Crystals,

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

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

The patient seems very dull, depressed & forgetful: has taken the "Liquor-habit cure": has been losing in weight, very much. —
Condition is one of beginning Dementia.

Personal and Medical History of John Boyle

1901

This patient was brought here by Henry Lang in good physical condition, with following history of case. There is no history of consanguinity nor of heredity. This is 1st attack: first symptoms manifested July 13th/01, by delusions: melancholia: Disease seems stationary - variable & with rational intervals. Derangement now shown by melancholia. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. No previous peculiarities noted. No history of intemperance, nor of any severe disease &c or head - injury. Has been confined in County Jail 24 hours. Don't know cause of disease. Treatment none. On personal examination, nothing further mentioned.—

Aug 20 On admission, was put on B3 (G.H.N.R'pt. Complexion light: hair gray: eyes gray: - condition of skin fair: is dirty: teeth all gone, in lower jaw: 2 in upper jaw: behavior good: examined by Harry Poapst).—

Sep 1 1/24 Received on Ward: patient lies quietly in bed Aug 24: Has, today, become very restless and confused. T- is about normal. Sep 1 - Wt 105#: condition remains about same.

Oct 1 3/5 Is up & dressed: is quite: is quite neat & well-behaved: much more quiet. Sep 5. To B3 Wt 118#. Nov 1. Wt 125#. Reads considerably: works some and talks quite rationally -

1902 Jan 31 Has become quite quiet & rational. (Wt 130#) -

Jan 31/03 During this period, no notable change occured. Weight 130# at the beginning & at end of period - No sickness - Works steadily in kitchen - Quiet - Well behaved.

Personal and Medical History of

Personal and Medical History of Everet McGee

Whole No. 5906. Became resident of Minn: 27 yrs ago
Residence, Oakwood, Minn — " Wabasha Co 27 yrs ago.

Date Admission, 22nd August 1901.
Admitted by Dr. E. J. Wanous hour, 10.30 Am
How Sent, Malcolm Kennedy, Jof P. Wabasha County
Sex, Male Age, 27.
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Farming; father's, mason & farming
Degree Education, Common school
Profession of Religion, not a church member
Habits, not intemperate.
Nativity, Wabasha Co. Minn: father's, Penn: Mother's Wis
Oakwood
Physicians Committing, J. P. Waste and N. S. Tefft
Correspondents, James McGee
(father) Plainview, Minn
lives six miles N. W. of town.

No. for Year, 18.
Insane Relatives, None
Cause Exciting, obscure
Cause Predisposing, "chronic"
Form, ~~Pubescent~~ Atten
Accompanying Bodily Disorder, Lupus of both lips
Suicidal or not, not
Date of this Attack, One year ago
Duration, — One year —
No. of Attack, Not 1st (others in 1900) Continuous
No. of Admission, 1st
Age First Attack, 26
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. J. Wanous *Date of* Augt —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Sluggish
MEMORY, Past Events, Impaired
Recent Events, " " Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, poor
Special Subjects, —
Own Mental State, Does not appreciate it
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, Transitory,
Special Subjects, ✓
HALLUCINATIONS,
ILLUSIONS, ✓
SUMMARY,

HISTORICAL.

LENGTH INVASION, 1½ Years
ONSET, Gradual or Sudden, Gradual
(Question concerning Insanity, Consanguinity, Epilepsy,
HEREDITY, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).

Father, Living — well
Paternal Relatives, no Insanity
Mother, Dead: cause not known
Maternal Relatives, no Insanity
Brothers and Sisters, 4 1 2 Bros. 1 Sister Dead
Cause, Consumption — (especially Typhoid Fever, Sunstroke,
PROMINENT DISEASES, Head Injuries and Surgical Operations).
8 years ago received head-injury.
Causing fracture of skull.
HABITS, Drinking and Smoking, yes
HEADACHES, VERTIGO, OR CONVULSIONS, no —
OCCUPATION, Healthy or not, Farming
Detail Date, Duration, and Character of Previous Attack, if any,
no
Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of Everet McGee

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, NUTRITION, poor
WOUNDS, Abnormalities, Lupus labialis Condition of Skin, anaemic
TONGUE, Coatings, Promptness of Movement, coated: breath foul
PUPILS, Equality, equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, no
HEARING, good
COORDINATION, Arms, normal Legs, normal Grasp, other tests yes, quite steady.
TREMORS, Hands, no Tongue, no Facial Muscles, — General,
PATELLAR REFLEX, exaggerated Other Reflexes,
ARTICULATION, Slurred, — Hesitating, yes Slow, yes
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, irritable
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, none noted
ARTERIES,
normal
LUNGS,
Chest symmetry: sym
Expansion: good
Breath Sounds: normal

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

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

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

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

The patient seems dull, depressed; attention fixed: rather demented: has been worrying about his wrong-doing — "thinks he got some women into trouble" — is a Chronic Masturbator; cannot control himself — Patient has "labial lupus": also an old fracture of the skull. —

1901

This patient was brought here by R. W. Carpenter, attended by E. M. McCullough, with following history of case - There is no history of consanguinity, nor heredity. This is not first attack: others occurred in 1900; duration continuous: was not sent to hospital: First symptoms of this attack manifested one year ago: hid in garret: expressed fear: disease seems increasing: rational at intervals, but not regular. Derangement now shown in that he seemed to dwell on his sore lips, and threats of Dr. Muir. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. No previous peculiarities noted: no history of intemperance; received kick on head, eight years ago: has not been restrained or confined. Cause of the disease is obscure. Treatment none - On personal examination, there is found Lupus of both lips. —

Aug 22 On Admission, was put on T.W. (G.H.N. R'pt. Complexion fair: hair brown: eyes gray: small scar over right ear; small scar, back of head, slightly to right, between ears: — 5 small scars on back, (look like boil-marks): small scar on right great toe: no vermin but is dirty: teeth: one gone on upper right: one gone, on lower right: one gone, on lower left: one stub, lower left. Behavior good: E. D. Ballard examined). —

" 23 Received on Ward: Aug 23. T— has been about normal; says "he has been living
Sep 1 a fast life": has sexual troubles & is gloomy & despondent. Sep 1. Lies quietly in bed.
4 no special change. Sep 4. Visited by father: talks little or none. Is melancholy.
Oct 15 Patient Eloped: brought back by a farmer. Dec 24. Visited by father. Jan 31/02 I
1902 Jan 31 rather childish & foolish: habits somewhat untidy: trying to elope, at times, and, at times, very much confused.

May 31/02 Childish; silly; despondent; restless; confused.
Nov. 1. Wt. 143#. Dec. 25 Visited by father.

Jan. 31 Has been in fair physical health; works little on ward; occasionally goes off ward to work. Rather careless in habits; listless; talks & laughs sillily; on the whole quite demented. (C.L.C.)

Personal and Medical History of Alfred Mayer

Whole No. 5907

Residence, St Paul, Minn

Became resident of State? 23 yrs in State: of County, 9 yrs

Date Admission, 26th August 1901.

Admitted by Dr. E. J. Wanous hour, 7 30 P.M.

How Sent, E. W. Bazille, Jos P. Ramsey Co.

Sex, Male Age, 23 years

Civil Condition, Single

Children, — Age Youngest Child, —

Occupation, Cigar - maker

Degree Education, Common School

Profession of Religion, Catholic

Habits, not intemperate

Nativity, Jordan, Minn: Father's Germany: Mother's, Chicago

Physicians Committing, F. A. Xanten and G. Stamm

Correspondents, Joseph Gernschid (Uncle) 571 Rice St. St Paul

No. for Year, 19.

Insane Relatives, Aunt & great grandmother were insane

Cause Exciting, Hereditary

Cause Predisposing, Heredity

Form, Epilepsy

Accompanying Bodily Disorder, Epilepsy

Suicidal or not, not

Date of this Attack, when he was 9 years old

Duration, Since that time

No. of Attack, Many, since 9 years old.

No. of Admission, 1st

Age First Attack, 14 years.

Time of Leaving, September 27 - 1901

Time in Hospital, 1 mo. 1 day —

Result, Improved —

Discharged by Board of Control April 14 - 1902 —

Examination on Admission by Dr. E. J. Wanous *Date of* Aug 27/1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events, good

Recent Events, " " Special Subjects, " "

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Correct

REASONING POWER, Ordinary Subjects, Good

Special Subjects, " "

Own Mental State, ——

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

DELUSIONS, Systematized, No Transitory, No

Special Subjects, No —

HALLUCINATIONS, No

ILLUSIONS, No

SUMMARY,

HISTORICAL.

LENGTH INVASION, Since 9 years old

ONSET, Gradual or Sudden,

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

Father, Living

Paternal Relatives, Sister in St Peter

Mother, Living

Maternal Relatives, no Insanity

Brothers and Sisters, 3 1 1 bro. sick

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

HABITS, Drinking and Smoking, yes

HEADACHES, VERTIGO, OR CONVULSIONS, ——

OCCUPATION, Healthy or not, nothing, at present

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

Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of Alfred Mayer

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7½ PRESENT WEIGHT, 153 lbs USUAL WEIGHT, NUTRITION, fair

WOUNDS, Abnormalities, Lost right arm, by accident. Condition of Skin, Clear

TONGUE, Coatings, Promptness of Movement, Clear

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

SIGHT, good

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, no (?)

HEARING, good

COORDINATION, Arms, Normal Legs, — Grasp, Other tests, normal

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

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, Normal Hesitating, — Slow,

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, Normal

Strength, Sounds, Normal

Size, "

Apex Beat, "

Murmurs, None noted

ARTERIES, Normal

LUNGS,

Chest Symmetry: Sym

Expansion: Normal

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,

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).

The patient has been suffering with Epileptic fits since 9 years old. "Come on mostly at night, about once a week". After "Spells" is confused generally for a day or two: has destroyed clothing, in these "Spells". Lost his arm, by upsetting a lamp, while in a "Spell", 3 years ago.

Personal and Medical History of Alfred Mayer

Personal and Medical History of

1901

This patient was brought here by Joseph Gerusched, attended by Dr. F.A. Xauten, in fair physical condition, with following history of case. There is no history of consanguinity, but of heredity. Yes: aunt and great-grandmother were insane: this is not 1st attack: they have occurred many times, since 9 years old: duration short. First symptoms of this attack manifested when he was 9 years old: with epileptic fits: disease seems increasing: variable: with rational intervals, but these, not regular. Derangement now shown in that he is subject to Epileptic fits, with uncontrollable temper. Is not disposed to injure others, nor suicidal: Is destructive of clothing: was always irritable: no history of intemperance. Is subject to Epilepsy: has not been restrained or confined. Supposed cause of the disease is hereditary: has been given Constn treatment. On personal examination, we learn of loss of right arm, caused by falling into a burning lamp: stupid expression. —

Aug 26 On admission, was put on B3 (G.H.N.R)pt. Complexion fair: hair brown: eyes brown: condition of skin good: One arm gone: is clean. Teeth: one gone in lower jaw: —

" " Behavior good. Examined by Blood) — Received on ward: Given bath. Aug 27 —

" Patient has convulsions, generally, at night. Is on electrical treatment: Sep 3: Says

Sep 3 "he is not insane". Sep 8. no special change to report, in patient's condition. Habits are cleanly. (at time of coming, was nervous & excited: "thought he was going to die"). Wt 162 lbs.

9 Subject to Epileptic convulsions. Mental state is probably result of effects of these fits.

" Taken home by father. Seemed somewhat improved.

Discharged

Personal and Medical History of John Devine

Whole No. 5910.
Residence, (Legal settlement) St. Paul
Because resident of State 9 years ago: of County 9 yrs ago
Date Admission, 30th August 1901.
Admitted by Dr O. C. Heyerdale hour, 7 45 P.M.
How Sent, E. W. Bazille, J of P. Ramsey Co.
Sex, Male Age, 33.
Civil Condition, single
Children, — Age Youngest Child, —
Occupation, Laborer
Degree Education, Common school
Profession of Religion, Catholic
Habits, Unknown
Nativity, Ireland: parents also born there.
Physicians Committing, Arthur Sweeney & O. W. Archibald
Correspondents, Dennis Devine
Father } 760 East Sixth Street St Paul

No. for Year, 22.
Insane Relatives, None —
Cause Exciting, Unknown
Cause Predisposing, " chronic "
Form, Agitated Melancholia
Accompanying Bodily Disorder, none mentioned
Suicidal or not, not
Date of this Attack, 3 years ago
Duration, — 3 years —
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, about 30.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. E. J. Wanous *Date of* Aug. —

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused
MEMORY, Past Events, Impaired
Recent Events, " " Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull
REASONING POWER, Ordinary Subjects, poor
Special Subjects, " "
Own Mental State, appreciates condition
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Depressed
DELUSIONS, Systematized, on religious ~~Transitory,~~ subjects
Special Subjects,
HALLUCINATIONS, —
ILLUSIONS,
SUMMARY, —

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Living — well
Paternal Relatives, 1 Bro. very nervous (?)
Mother, Living — well
Maternal Relatives, sister insane
Brothers and Sisters, 4 2 1 Bro. consumptive
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
sick with pneumonia (?) when a boy
HABITS, Drinking and Smoking, to excess
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
no
Sleep, poor Appetite, poor Bowels, irregular

Personal and Medical History of John Devine

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft 2½ PRESENT WEIGHT, 162# USUAL WEIGHT, 215# NUTRITION, well
WOUNDS, Abnormalities, Index & middle fingers amputated at first joint Condition of Skin, anaemic
TONGUE, Coatings, Promptness of Movement, —
PUPILS, Equality, Equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, good
COORDINATION, Arms, normal Legs, normal Grasp, other tests, normal
TREMORS, Hands, no Tongue, — Facial Muscles, — General,
PATELLAR REFLEX, sluggish Other Reflexes, —
ARTICULATION, Slurred, normal Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, normal
Strength, Sounds, 1st sound harsh
Size, normal
Apex Beat, "
Murmurs, mitral
ARTERIES,
normal
LUNGS,
Chest Symmetry: sym
Expansion: good
Breath Sounds: normal

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

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

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

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

The patient appears depressed, confused and has an idea "people are after him". By spells, is found crying and praying, asking forgiveness for his wrong-doings.
Physically is in pretty good general condition.

Personal and Medical History of John Devine

1901

This patient was brought here by Emanuel Johnson, Attended by E. A. Ladow, in fair physical condition, with following history of case. There is no history of consanguinity, nor heredity:- This is first attack: first symptoms manifested 3 years ago: had delusions & suspected people of a desire to harm him. Disease seems increasing: variable & with rational intervals, but these not regular. Derangement now shown in that he believes that he has been hypnotized, and that people are watching and talking about him: is not disposed to injure others, nor suicidal: propensity not active; no filthy or destructive habits: no previous peculiarities noted: as to any history of intemperance, unknown: had an injury to the head, when 9 years old. Has not been restrained or confined. — Supposed cause of the disease is unknown: treatment, none. On personal examination it is found he believes that the Detectives followed him to California: is sleepless: and talks freely of his delusions. ——— . — ———

Aug 30 On admission, was put on T.W. (G. H. N. R'pt. Complexion dark: hair dark brown: eyes blue: Condition of skin good: vaccination marks on left arm: eruptions on feet and legs: is clean: teeth in poor condition: 5 gone, in upper jaw: 2 gone, in lower jaw: Behavior good: Examined by W. C. Bernard). ——— . ———

" 1/31 Received on Ward: Aug 31. Is nervous & excited: "Thinks he is going to die". ——

Sep 8/14 Wants to make a sacrifice": "Wants to burn his body, to save his soul" Sep 14. Up &

Oct 12/30 transferred to B3. Oct 12. Eloped, this afternoon, but was brought back. Oct 30. Visited

Dec 19 by father & mother. Dec 19. Restless, confused & excited. Is stubborn: hard to manage.

24 Transferred to TW. Dec 24. Patients' Temperature was elevated, at time of coming. Temperature has quieted down to normal & he is in better condition: Is up & dressed

1902 Jan 21 today. Jany 21/02. Patient has been rather melancholy. Is sullen: Easily

31 excitable. Jany 31. About as last described. Aug. 1/02 Weight 179#. Jan. 1/03 181#.

03 Jan 31 Inclined to be untidy and careless.- occasionally rather quarrelsome; altho noisy is rarely violent. Indifferent; incoherent & full of delusions.

Personal and Medical History of

Personal and Medical History of William K. Wager

Whole No. 5913.
Residence, Alma City Minn
Became resident of Minnesota about 1863. of County abt 1863.
Date Admission, 7th September 1901.
Admitted by Dr. C. L. Chapple hour, 5 P.M.
How Sent, Geo. A Wilson, Supt. Waseca County
Sex, Male Age, 80.
Civil Condition, Married
Children, One Age Youngest Child, —
Occupation, Farmer
Degree Education, Common School.
Profession of Religion, Methodist
Habits, not intemperate
Nativity, New York State: Parents also born there:
Physicians Committing, F. A. Swartwood and M. J. Taylor
Correspondents, Mrs Esther Wager (wife) Alma City, Minn (½ mile out)

No. for Year, 25.
Insane Relatives, none
Cause Exciting, Senility
Cause Predisposing, probably age
Form, Senile Dem.
Accompanying Bodily Disorder, weakness —
Suicidal or not, Not, but will injure others.
Date of this Attack, October 1900.
Duration, 11 months
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, 79
Time of Leaving, November 14 — 1901
Time in Hospital, 2 mos 7 ds.
Result, Improved: Discd May 1 of 1901 — by Bd C.

Examination on Admission by Dr. E. J. Ranous *Date of* Sept 9 - 1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish, Sluggish
MEMORY, Past Events, Impaired
Recent Events, " " Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive, Dull
REASONING POWER, Ordinary Subjects, Fair
Special Subjects, " "
Own Mental State, ——
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Exalted, by spells —
DELUSIONS, Systematized, ✓ Transitory,
Special Subjects, ✓
HALLUCINATIONS,
ILLUSIONS, ✓
SUMMARY,

HISTORICAL.

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

Father, Dead — fever
Paternal Relatives, No Insanity
Mother, Dead
Maternal Relatives, No Insanity
Brothers and Sisters, 7 4 1 Bro. killed — 2 sisters Dead.
Children 1 —
(especially Typhoid Fever, Sunstroke, PROMINENT DISEASES, Head Injuries and Surgical Operations).
Chronic bronchitis — scrofula

HABITS, Drinking and ~~Smoking~~ chews, Yes —
HEADACHES, ~~VERTIGO, OR CONVULSIONS~~, Yes
OCCUPATION, Healthy or not, Farming
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, poor Appetite, poor Bowels, Constipated.

Personal and Medical History of William K. Wager

PHYSICAL CHARACTERISTICS.

HEIGHT, Not taken PRESENT WEIGHT, Not taken USUAL WEIGHT, NUTRITION, Poor
WOUNDS, Abnormalities, Oblique inguinal hernia Condition of Skin, Sluggish
TONGUE, Coatings, Promptness of Movement, Clean
PUPILS, Equality, equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Impaired
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, Cannot see out of right eye
HEARING, Impaired
COORDINATION, Arms, Yes Legs, Yes Grasp, patient seems quite unsteady reflex —
TREMORS, Hands, Coarse Tongue, Yes Facial Muscles, Yes General,
PATELLAR REFLEX, Sluggish Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, — Slow,
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, Irregular
Strength, Sounds, normal
Size, "
Apex Beat, "
Murmurs, None noted
ARTERIES, Sclerosed
LUNGS,
Chest dynamics: Yes
Expansion: poor
Breath Sounds: Bronchitis

CRANIAL MEASUREMENTS.

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

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

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

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

The patient seems quite rational, by spells; at times, confused: wanders away from home: cannot get along with family: at times, becomes very much excited over religious topics. —
Emotion due to senility. —
Physically, has a very irregular pulse: also a left inguinal hernia.

Personal and Medical History of William K. Wager

1901

This patient was brought here by Frank Collins, attended by Esther Wager, in apparently fair physical condition, with following history of case. There is no history of consanguinity, nor of heredity: This is 1st attack: first symptoms manifested in October 1900, by religious excitement. The disease seems increasing: variable with rational periods, but these not regular: at times talks quite rational. Derangement now shown in attempt to run away & religious excitement. Has shown disposition to injure others: not suicidal: propensity not active: no filthy or destructive habits. No previous peculiarities noted: No history of intemperance nor of any severe disease &c or head-injury: Has been under home-restraint: Supposed cause of the disease is senility: treatment, sedatives: On personal examination, it is found that patient imagines he is a Preacher and delivers sermons: at other times, sits, with eyes fixed on nothing: unmovable: Committment recommended because we think restraint at home, is dangerous, and because hospital treatment will be more conducive to his recovery.

Sept 7 On admission, was put on T.W. (G.H.N. Rft. Complexion light: hair gray: eyes blue: condition of skin fair: sores on both hands: bruises on both arms: is clean: Teeth: 6 gone, upper jaw: 5 gone, lower jaw: Behavior is good).—

Sept. 20/02 Has been confused; restless; health fairly good. Sept. 26 Visited by wife. Nov. 14 Taken home. Has gradually improved in mental state.

Personal and Medical History of

Personal and Medical History of Charles R. Shosten

Whole No. 5914

Residence, Scandia, Minn
— always resident —

Date Admission, 14th September 1901

Admitted by Dr. C. L. Chapple hour, 7 30 PM

How Sent, Frank T. Wilson, J of P. Washington Co.

Sex, Male Age, 21

Civil Condition, Single

Children, ✓ Age Youngest Child, ✓

Occupation, Farming

Degree Education, Common School

Profession of Religion, Lutheran

Habits, Not intemperate —

Nativity, Scandia, Wash Co. Minn: parents' Sweden

Physicians Committing, E. B. Freligh and F. G. Landeen

Correspondents, A. W. Shosten (brother) Eldred, Minn
Ed Holcomb (bro-in-law) Scandia Minn

No. for Year, 26

Insane Relatives, mother deranged prior to death.

Cause Exciting, mother's sister died in asylum. — unknown —

Cause Predisposing, Heredity

Form, adolescent insanity

Accompanying Bodily Disorder, pains in forehead

Suicidal or not, unknown.

Date of this Attack, last year & a half (?)

Duration, Year and a half (?)

No. of Attack, Not 1st —

No. of Admission, 1st —

Age First Attack, 19+ (?)

Time of Leaving, November 20 — 1901

Time in Hospital, 2 mos 6 ds

Result, Recovered: Disgd. May 13 - 1902 (by Supt)

Examination on Admission by Dr. C. L. Chapple *Date of* Sept 16 - 1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Fairly clear and quick

MEMORY, Past Events, seems good

Recent Events, good Special Subjects, —

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert — Correct

REASONING POWER, Ordinary Subjects, fair

Special Subjects, —

Own Mental State, says "he is all right" —

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
apparently rather indifferent

DELUSIONS, Systematized, " Transitory, "

Special Subjects, None observed

HALLUCINATIONS, ✓

ILLUSIONS, ✓

SUMMARY,

HISTORICAL.

LENGTH INVASION, probably some time

ONSET, Gradual or Sudden, slow

HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
None that he knows —

Father, Dead — Stomach trouble

Paternal Relatives, —

Mother, Dead

Maternal Relatives,

Brothers and Sisters, 4 1 —

Children —

PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Kicked by horse when 8 years — Thinks he was overheated, a year ago

HABITS, Drinking and Smoking, Smokes some: does not drink

HEADACHES, VERTIGO, OR CONVULSIONS, Sometimes

OCCUPATION, Healthy or not, Farming

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

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of Charles R. Shosten

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8½ PRESENT WEIGHT, 161 lbs USUAL WEIGHT, NUTRITION, good

WOUNDS, Abnormalities, scar on forehead 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, —

HEARING, Good

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

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

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, — Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, good

Size, normal

Apex Beat, 5

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,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, sound.

BOWELS, Present Condition, regular

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

Appears of low mental grade: though not an imbecile. Physical condition quite good. History of kick from horse, when 6 years old, followed by mental peculiarities, a possible cause — (See Commitment for hereditary tendency) — says he has always been a good boy — never did anyone wrong. Denies statement that he was addicted to stealing — says "he practices masturbation some when a boy" — will not admit it now but probably does —

Insanity of adolescent type, with probable ethical failure. —

Personal and Medical History of Charles. R. Shosten

1901

This patient was brought here by Ignatius Fazendin, attended by A. W. Shosten, in apparently good physical condition, with following history of case. There is no history of consanguinity but mother was deranged, prior to death and mother's sister died in Asylum. This is not 1st attack: was peculiar, at 8 years of age; also last summer. First symptoms of this attack manifested by tendency to steal, without object: radical change from former habits; all within last year and a half. Disease seems increasing: Derangement now shown (see ninth question in papers) as above & he wanders about, exposing himself to weather: Is not disposed to injure others: if suicidal, unknown. No filthy or destructive habits. Nothing noted as to any previous peculiarities &c. No history of intemperance. Was kicked by a colt in forehead, when 6 years old; since which time, has had pain in forehead; worse in summer; better in winter: Has not been restrained or confined: Supposed cause of disease is unknown: Treatment, none. On personal examination, nothing special brought out.-

Sep 14 On admission, was put on B3 (G. H. N. Dpt. Complexion fair: hair brown: eyes gray: Condition of skin good: small sore on right leg: scars on forehead: is clean. Teeth: 11 in upper jaw: 9 in lower jaw: behavior good: Examined by Harry (Pabst)-

Sept 17/01 Stubborn: quiet: trying to pick locks. Sept. 27 Mischievous; troublesome. Oct 1 Wt. 171#. Rather stubborn; ugly. Nov. 20/01. Home on trial; improved some in mental state.

Personal and Medical History of

Personal and Medical History of Frederick Müller

Whole No. 5916.
Residence, St. Paul, Minn
Became resident of State 3 months ago: of County 3 mos ago
Date Admission, 18th September 1901.
Admitted by Dr. O. C. Heyerdale hour, 7 45 P.M.
How Sent, Henry Gallick, Ct. Commr. Ramsey County
Sex, Male Age, 48
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Laborer
Degree Education, limited: can read & write
Profession of Religion, Lutheran
Habits, unknown
Nativity, Switzerland: parents also born there
Physicians Committing, W. G. Richeson and Arthur Sweeney
Correspondents, no correspondent obtainable

No. for Year, 28.
Insane Relatives, none
Cause Exciting, unknown
Cause Predisposing, previous attack
Form, ~~Chronic Maniacal~~
Accompanying Bodily Disorder, none mentioned
Suicidal or not, unknown
Date of this Attack, was arrested Sept 16th
Duration, — 2 Days — (?)
No. of Attack, 2nd (had one in 1896) —
No. of Admission, 1st here (was at Independence, Iowa)
Age First Attack, about 43.
Time of Leaving, 4th September 1902
Time in Hospital, 11 Mos 17 Ds
Result, Improved: Dizd. Jany 15/03 (had Elapsed) P. of C.

Examination on Admission by Dr. C. L. Chapple *Date of* Sept 19-1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused: Quick
MEMORY, Past Events, fairly good apparently
Recent Events, " " Special Subjects, — "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Talks very broken English — appears illusive
REASONING POWER, Ordinary Subjects,
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).
No history obtainable
Father, Dead
Paternal Relatives, —
Mother, Dead
Maternal Relatives, —
Brothers and Sisters, —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).

HABITS, Drinking and Smoking, both: says not to excess
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
In Independence, Iowa —
Sleep, good Appetite, good Bowels, regular

Personal and Medical History of Frederick Müller

SENT TO ROCHESTER—Frederick Muller, forty-eight years old, who Tuesday laid cordwood across the street car tracks on the West side, was yesterday committed to the insane asylum at Rochester.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 154# USUAL WEIGHT, NUTRITION, good
WOUNDS, Abnormalities, old scar on left hip — cut — left femoral hernia Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, slight coat — 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, All good Legs, " " Grasp, —
TREMORS, Hands, none Tongue, " " Facial Muscles, " " General, —
PATELLAR REFLEX, normal Other Reflexes, —
ARTICULATION, Slurred, normal Hesitating, — Slow,
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity,
Strength, Sounds,
Size,
Apex Beat,
Murmurs, ✓
ARTERIES,

LUNGS,
Chest Symmetry:
Expansion:
Breath Sounds: ✓
Passed 10/17/01 8 am: Ex.d 10/17/01. 2 o'clock

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

EXAMINATION URINE, Quantity, — Sp. g. 1020 Reaction, neutral Color and Appearance, yellow cloudy
Albumen, Heat: no Nitric acid: no Sugar, Fehling's Sol: no — Diazo no —
Casts and Crystals,

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

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

Patient says he was in Hospital at Independence, Iowa — Discharged in 1896. Has been in Oregon — Was swindled in St. Paul — Appears confused — talks irrationally and irrelevantly — Mental calibre rather low — Speaks little English — Type Delusional insanity.

Personal and Medical History of Frederick Müller

Whole No. 5916.
Residence, St. Paul, Minn
Became resident of State 3 months ago: of County 3 mos ago
Date Admission, 18th September 1901.
Admitted by Dr. O. C. Heyerdale hour, 7 45 P.M.
How Sent, Henry Gallick, Ct. Commr. Ramsey County
Sex, Male Age, 48
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Laborer
Degree Education, limited: can read & write
Profession of Religion, Lutheran
Habits, unknown
Nativity, Switzerland: parents also born there
Physicians Committing, W. G. Richeson and Arthur Sweeney
Correspondents, no correspondent obtainable

No. for Year, 28.
Insane Relatives, none
Cause Exciting, unknown
Cause Predisposing, previous attack
Form, ~~Chronic Maniacal~~
Accompanying Bodily Disorder, none mentioned
Suicidal or not, unknown
Date of this Attack, was arrested Sept 16th
Duration, — 2 Days — (?)
No. of Attack, 2nd (had one in 1896) —
No. of Admission, 1st here (was at Independence, Iowa)
Age First Attack, about 43.
Time of Leaving, 4th September 1902
Time in Hospital, 11 Mos 17 Ds
Result, Improved: Dig'd. Jany 15/03 (had Elapsed) By Bof C.

Examination on Admission by Dr. C. L. Chapple *Date of* Sept 19-1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused: Quick
MEMORY, Past Events, fairly good apparently
Recent Events, " " Special Subjects, " "
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Talks very broken English — appears illusive
REASONING POWER, Ordinary Subjects,
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).
No history obtainable
Father, Dead
Paternal Relatives, —
Mother, Dead
Maternal Relatives, —
Brothers and Sisters, —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
HABITS, Drinking and Smoking, both: says not to excess
HEADACHES, VERTIGO, OR CONVULSIONS, no
OCCUPATION, Healthy or not, Laborer
Detail Date, Duration, and Character of Previous Attack, if any,
In Independence, Iowa —
Sleep, Good Appetite, good Bowels, regular

Personal and Medical History of Frederick Müller

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 8 in PRESENT WEIGHT, 154 # USUAL WEIGHT, NUTRITION, good
WOUNDS, Abnormalities, old scar on left hip — cut — left femoral hernia Condition of Skin, normal
TONGUE, Coatings, Promptness of Movement, slight coat — 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, All good Legs, " " Grasp, —
TREMORS, Hands, none Tongue, " " Facial Muscles, " " General, —
PATELLAR REFLEX, normal Other Reflexes, —
ARTICULATION, Slurred, normal Hesitating, — Slow,
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity,
Strength, Sounds, ✓
Size,
Apex Beat,
Murmurs,
ARTERIES,
LUNGS,
Chest Symmetry:
Expansion:
Breath Sounds: ✓
Passed 10/17/01 8 00 am: Ex'd 10/17/01. 2 00 pm.

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

EXAMINATION URINE, Quantity, — Sp. g. 1020 Reaction, Neutral Color and Appearance, Yellow Cloudy
Albumen, Heat: no Nitric acid: no Sugar, Fehling's Sol: no — Diazo no —
Casts and Crystals,

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

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

Patient says he was in Hospital at Independence, Iowa — Discharged in 1896. Has been in Oregon — Was swindled in St. Paul — Appears confused — talks irrationally and irrelevantly — Mental calibre rather low — Speaks little English — Type Delusional insanity.

1901

This patient was brought here by Deputy E. Johnson, in fair physical condition, with the following history of case. There is no history of consanguinity nor heredity. This is not the first attack: one occurred in 1896; duration unknown: was in hospital, Independence Iowa; result of treatment unknown: he was arrested Sept 16th, for obstructing tracks on Street Railway, because some one swindled him three months ago. Status of disease, unknown: if variable or rational intervals, unknown. Derangement now shown in that he believes he is under the sway of the "Black Art" and that the Devil persecutes him: If disposed to injure others, if suicidal or of filthy or destructive habits, unknown. No previous peculiarities noted. As to any history of intemperance, severe disease or head-injury, unknown. Has been at County Jail, 24 hours. Cause of disease, unknown: treatment, none. On personal examination, patient answers questions irrelatively; talks of the "Black Art", and of the Devil and says "he is persecuted by them". — — — — — — — — — —

Sep 18 On admission, was put on B3 (G.H.N. D'pt. Complexion dark: hair brown: eyes blue: condition of skin good: scars on left leg: hernia on left side: is clean. Teeth: 11 in upper jaw: 12 in lower jaw: behavior good: Examined by H. E. Poapst). — — — —

" " Received on Ward: Oct 1. (14-day record up): T. P. & R. have been normal. Is on regular

Oct 1 diet & has good appetite: bowels & urine regular: has been quiet: talks rationally, but poor English: Has been depressed and discouraged. Denies that he obstructed the Street-Cars: (Sep 20: asked for medicine, to kill himself).

May 8/02 Weight 162#. Patient is somewhat intelligent but is always cranky and suspicious. 7/31/02. Was gotten ready to go home but refused to go.

Sept. 4/02 Patient eloped today.

Personal and Medical History of Leroy E. Joslyn

Whole No. 5917.
Residence, Northfield, Minn
No. for Year, 29.

Date Admission, 18th September 1901.
Admitted by Dr. O. G. Heywood hour, 8.00 P.M.
How Sent, James Hunter. Jail. Rice County
Sex, Male Age, 52.
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Fireman & Engineer (father, Merchant)
Degree Education, Common school
Profession of Religion, Episcopal
Habits, Drank some years ago —
Nativity, Illinois; parents born in New York
Physicians Committing, C. E. Brubaker and G. R. Matchan
Correspondents, L. H. Dousmann — (Bro-in law)
(previous address) Station Agent Northfield Minn

Insane Relatives, none
Cause Exciting, Injury in Railway accident
Cause Predisposing, previous attacks.
Form, ~~Insanity~~ Intervention.
Accompanying Bodily Disorder, Epilepsy (?)
Suicidal or not, not, but will injure others.
Date of this Attack, Injury in 1881
Duration, some 20 years — at intervals —
No. of Attack, several —
No. of Admission, 2nd here
Age First Attack, 42 years (?)
Time of Leaving, January 3 - 1902
Time in Hospital, 3 mos 16 ds. (this time)
Result, Improved — — —
Discharged Jany 8 - 1902 - by Bd of C.
(Transferred to School at Faribault)

Examination on Admission by Dr. C. L. Chapple *Date of* Sept 20-1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Clear — Quick
MEMORY, Past Events, partially obscured (absent?)
Recent Events, apparently good Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Alert — Correct
REASONING POWER, Ordinary Subjects, fair
Special Subjects,
Own Mental State, "Thinks he is alright"
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory,
Special Subjects, none observed

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, Chews
HEADACHES, VERTIGO, OR CONVULSIONS, —
OCCUPATION, Healthy or not, Laborer since 14 yrs old
Detail Date, Duration, and Character of Previous Attack, if any,

Sleep, good Appetite, good Bowels, regular

Personal and Medical History of Leroy E. Joslyn

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 4½ PRESENT WEIGHT, 147 lbs USUAL WEIGHT, NUTRITION, Good
WOUNDS, Abnormalities, — Condition of Skin, —
TONGUE, Coatings, Promptness of Movement, some fur — prompt
PUPILS, Equality, Equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, wears glasses for reading —
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, slight impairment Finger touch, eyes shut, prompt, accurate
COORDINATION, Arms, Good Legs, Good Grasp, standing on one foot & steady. standing — eyes shut — steady.
TREMORS, Hands, none Tongue, none Facial Muscles, " General, "
PATELLAR REFLEX, Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, — Slow,
FACIAL EXPRESSION, Sensibility,
HEART, Regularity, regular
Strength, Sounds, normal
Size, normal
Apex Beat, 5
Murmurs, normal
ARTERIES, normal
LUNGS, normal
Chest symmetry: symm
Expansion: good
Breath Sounds: normal
Passed 10/18/1901 at 9¼ am: Eyes at 3 30 pm

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. 1025 Reaction, acid Color and Appearance, yellow - clear
Albumen, Heat: no - Nitric acid no Sugar, Fehling's Sol. no — Diazo no —
Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin, Sphincteris incapacity
SLEEP, Present Amount and Character, sound
BOWELS, Present Condition, some looseness

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).

In fairly good physical condition. Is very talkative: says all his trouble on others; says "they wish to get rid of him because he stands up for his mother." Denies having threatened, but says "his very quick tempered — wants an immediate opinion as to his case."

Condition probably no more than lack of control of violent temper and general irritability.

Personal and Medical History of Leroy. E. Joslyn

1901

This patient was brought here by Dep. W. E. Hibbard, attended by Roy Mosher, in fair physical condition, with following history of case. There is no history of consanguinity, nor of heredity. This is not 1st attack: they have occurred at intervals, since 1881: duration about a week. Has been in this (Rochester) hospital, May 1900: no apparent effect from treatment.— First symptoms of this attack manifested from injury in 1881: Epileptic fits & blank memory for about 12 years. Disease seems increasing: variable & with rational intervals, but these, at irregular intervals. Derangement now shown by his abusive language: threatens to assault his mother and sister. Dont recollect those fits of anger. Only treatens to injure others. Is not suicidal: no filthy or destructive habits. Peculiarities manifested only as before stated. The patient drank some years ago. Has had injury to head, and epilepsy, but not for the last few years. Has been confined in Asylum, for some time, as before stated. Supposed cause of the disease is injury in Railway accident. Has received treatment for Epilepsy, and fistula operation. On personal examination, it is learned he has just passed through one of the "Spells", but is now some better.

N.B. 2nd admission here. Was here before, from May 8-1900, to Oct 25-1900 and discharged May 1-1901. as improved. Diagnosis, on examination here. Confusional insanity: but the subsequent one was Epileptic Traumatic dementia. No of attacks, several - Age 1st attack 42 years. Epilepsy followed by mental aberration. (See vol 45 page 337 No. 5563)—

Sep 18 On admission, was put on B3 - (G.H.N. Rft. Complexion fair: hair gray: eyes blue: condition of skin good: scars on back of neck: one in rectum from fistula: Is clean.- Teeth all gone, except one on left upper jaw. Behavior good. Ex'ly H. E. Poapst)—

" " Received on Ward: Oct 1 (1x Day record up): patient has shown little change: on ordinary

Oct 1 subjects, talks quite rationally, but is very fretful, fault finding: thinks he is imposed on, by every one. Continually asking for things, which other patients have not. "Thinks he is not treated as other patients are". Physical condition quite robust— Eats & sleeps well: goes out for exercise.

Personal and Medical History of

Personal and Medical History of Gotfried Schustag

Whole No. 5921

Residence, Faribault County

Date Admission, 21st September 1901.

Admitted by Dr. C. L. Chapple hour, 7:30 P.M.

How Sent, John W. Vance, Supt. Faribault County

Sex, Male Age, 67.

Civil Condition, married

Children, 9 Age Youngest Child, —

Occupation, Farmer & Miller

Degree Education, Common School

Profession of Religion, Lutheran

Habits, not intemperate

Nativity, Prussia: Parents also born there

Physicians Committing, Alex. Corfron and W. S. Fullerton

Correspondents, Mrs Theresa Schustag (wife) Minnesota Lake, Minn

No. for Year, 33.

Insane Relatives, none

Cause Exciting, not known: (fall from horse?)

Cause Predisposing, "Chronic"

Form, Paranoia Querulosa

Accompanying Bodily Disorder, not mentioned

Suicidal or not, not —

Date of this Attack, about 25 years ago

Duration, — Continuous —

No. of Attack, 1st (Continuous for about 25 yrs)

No. of Admission, 1st —

Age First Attack, about 42 Years

Time of Leaving, November 23 - 1901

Time in Hospital, 2 mos 2 Ds.

Result, Improved: Disch. May 10-1902 by Supt

Examination on Admission by Dr. C. L. Chapple *Date of* Sept 21-1901.

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear — quick

MEMORY, Past Events, apparently good

Recent Events, good 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,

—

DELUSIONS, Systematized, Transitory,

Special Subjects, /

HALLUCINATIONS,

ILLUSIONS, /

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden, /

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

Father, Dead - old age

Paternal Relatives, —

Mother, Living - well

Maternal Relatives,

Brothers and Sisters, 4 3 living

Children — 9

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

always been well

HABITS, Drinking and Smoking, not to excess

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Miller

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

—

Sleep, Sound Appetite, good Bowels, regular

Personal and Medical History of Gotfried Schustag

PHYSICAL CHARACTERISTICS.

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

WOUNDS, Abnormalities, — Condition of Skin, normal

TONGUE, Coatings, Promptness of Movement, clean; prompt

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

SIGHT, Impaired

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

HEARING, good

COORDINATION, Arms, all good Legs, " " Grasp, " "

TREMORS, Hands, very slight Tongue, no Facial Muscles, no General, no

PATELLAR REFLEX, normal (?) Other Reflexes, —

ARTICULATION, Slurred, normal Hesitating, — Slow, —

FACIAL EXPRESSION, Sensibility, —

HEART, Regularity, Slight irregularity

Strength, Sounds, good

Size, normal

Apex Beat, ✓

Murmurs, normal

ARTERIES,

Good for his age

LUNGS,

Chest Symmetry: Symm

Expansion: fair

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good before coming here — not so good here —

BOWELS, Present Condition, regular

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

Physical condition seems good for age — Is somewhat senile in appearance — says he is well — Is bright — fairly intelligent — speaks but little English — Is deeply, of a religious & superstitious nature — Talks sensibly: gives an account of his land deal and thinks he has not had his rights — Also has delusions in regard to the devil and his mill. Condition is probably Chronic, dating many years: due to superstition and a false idea of his legal rights.

Personal and Medical History of Gotfried Schustag

1901

This patient was brought here by G. N. Greer in fair physical condition, with following history of case. There is no history of consanguinity, nor of heredity: this is first attack & continuous for about 25 years: with exacerbations; this being, perhaps, his worst: was not sent to hospital. First symptoms of this attack manifested about 25 years ago. Disease seems increasing. Is rational on all points except two — one, referring to a mill, owned by him, being under the influence of the Devil: the other, referring to the ownership of certain land, to which he has no right, nor ever has had. Derangement now shown in considering himself and his mill under the ban of the Devil, and in trying to take possession of another man's property, as a homestead. Is not disposed to injure others: nor suicidal: no filthy nor destructive habits. Peculiarities none, except certain peculiar ideas concerning certain Books of Moses, in the Scriptures. There is no history of intemperance; he had an apparently slight injury to head, caused by a fall from a horse, 25 years ago: has not been restrained or confined. Cause of the disease not known. Treatment, none: On personal examination, he appears perfectly healthy, physically: converses rationally on all points, except those above mentioned: is not excitable. ——— " ———

Sep 21 On admission, was put on T.W (G. H. N. R'pt. Complexion fair: hair gray: eyes blue: Condition of skin, fair: Scars on left arm between elbow & shoulder: number of pimples on lower part of legs: is divity: teeth all gone, except 4 in front in upper, and 4 old snags in lower front jaws. Behavior good. Examined by E. Ballard). ——— " ———

Oct. 4/1901. Patient has various delusions; thinks "Devil" is after him; works some; physical condition fair.

Nov. 23 Improving a good deal. Today sent home.

Personal and Medical History of

Personal and Medical History of Patrick W. Morrissey

Whole No. 5922.
Residence, St Paul, Minn
Became resident of state, at birth: of County, at birth.
Date Admission, 23rd September 1901.
Admitted by Dr. C. L. Chapple hour, 7.30 P.M.
How Sent, E. W. Bazille. Jo P. Ramsey County
Sex, Male Age, 38
Civil Condition, Single
Children, — Age Youngest Child, —
Occupation, Locomotive Engineer.
Degree Education, Common School
Profession of Religion, Ro. Catholic
Habits, no history of intemperance
Nativity, Minnesota: parents born in Ireland.
Physicians Committing, E. J. Abbott and A. Schwyzer
Correspondents, John Morrissey (brother)
245 Goodhue St.
St Paul. Minn

No. for Year, 34.
Insane Relatives, — None —
Cause Exciting, Syphilis
Cause Predisposing, not stated
Form, Paresis
Accompanying Bodily Disorder, Syphilis of cord -
Suicidal or not, ? - not -
Date of this Attack (2 yrs) One week ago
Duration, — one week —
No. of Attack, 1st —
No. of Admission, 1st —
Age First Attack, — 38 —
Time of Leaving, 28th October 1901.
Time in Hospital, 1 mo. 5 Days.
Result, ~~Recovered~~ Discharged Nov 30/1901
Unimp ?

Examination on Admission by Dr. C. L. Chapple *Date of* Sept 20 - 1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused — Sluggish
MEMORY, Past Events, poor
Recent Events, poor Special Subjects, very incoherent
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull — Illusive
REASONING POWER, Ordinary Subjects, none
Special Subjects, Inaccurate - irrational
Own Mental State, Says "he feels well"
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,
Exalted
DELUSIONS, Systematized, Transitory, Yes: Grandiose
Special Subjects, great wealth: own abilities &c &c
HALLUCINATIONS,
ILLUSIONS, Doesn't appreciate his surroundings
SUMMARY,

HISTORICAL.
LENGTH INVASION, one or 2 years (Commitment)
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Patient unable to give any history.
Father,
Paternal Relatives,
Mother,
Maternal Relatives,
Brothers and Sisters,
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Brother stated he has had syphilis
HABITS, Drinking and Smoking, not now
HEADACHES, VERTIGO, OR CONVULSIONS, Says not
OCCUPATION, Healthy or not, Fire Dept. St P. Locomotive Engineer
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, — Appetite, — Bowels, —

Personal and Medical History of Patrick W. Morrissey

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, NUTRITION, much impaired
WOUNDS, Abnormalities, — Condition of Skin, somewhat anaemic
TONGUE, Coatings, Promptness of Movement, fairly clean - slow.
PUPILS, Equality, unequal Size, normal. Response to Light, slow Accommodation, slow
SIGHT, says "good" —
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, says "good" — Finger to nose, eyes shut, hesitation
COORDINATION, Arms, poor Legs, poor Standing on one foot, cannot stand
TREMORS, Hands, yes Tongue, yes Facial Muscles, yes General, yes
Standing eyes shut unsteady — sways —
PATELLAR REFLEX, exaggerated Other Reflexes,
ARTICULATION, Slurred, yes Hesitating, — Slow,
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity, regular
Strength, Sounds, normal
Size, normal
Apex Beat, ✓
Murmurs, normal
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,

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

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

Patient probably of fair mentality - Physical condition poor - Is emaciated: anaemic - tremulous speech scanning: paretic expression: vacant: filthy habits: memory very poor: very illusive & irrelevant in speech - Transitory delusions - "has millions of money" - numerous children & relatives: says "he weighs 288 lbs - is very strong - the finest engineer &c". Doesn't realize his condition. Brother states history of syphilis, some years ago - Diagnosis: Paresis.

Personal and Medical History of Patrick W. Morrissey.

1901

This patient was brought here by Emanuel Johnson, attended by John Morrissey, in poor physical condition, with following history of case. There is no history of consanguinity nor heredity. This is first attack: first symptoms manifested one week ago:- became delirious and incoherent. Disease seems increasing; not variable: no rational intervals. Derangement now shown by flightiness of thought. Is not disposed to injure others: not suicidal: no filthy nor destructive habits. No previous peculiarities noted: no history of intemperance: has syphilis of cord: no restraint or confinement. Supposed cause of the disease is Syphilis: Treatment, mercury & Iodides. On Personal Examination, there are noted Constant muttering, stupidity, no conception of his surroundings. Disease of cord has been steadily increasing for past 2 years.

Sep 23 On admission, was put on T.W. (G.H.N. Rpt. Complexion fair: hair gray: eyes blue: Condition of skin good: vaccination marks on left arm: 3 small scars on back of neck: 2 small scars on nose: scars on front and right side of right knee: bruises on left arm, between elbow & shoulder: several small abrasions of skin on both lower legs: vermin none, though he is very dirty. Teeth. one gone, on upper left: one gone, on lower right: otherwise in good condition. Behavior good. Is very nervous.).

" "/24 Received on Ward 8.00 P.M.: Bath: put to bed: Sep 24. Very violent: attacked night-nurse.
25 Evening Temperature 100 2/10. Sep 25. Very pugnacious & restless: put in protection sheet.
26/27 Still in protection sheet: when taken up, for bath, was very violent: Sep 27. Is weaker-
28 Still kept in protection-sheet: violent: Sep 28. Taken out of protection-sheet: has retention
29 of urine: catheterized: Sep 29. Still very restless: noisy: throwing bed-clothes off-
30 Examination of urine: negative result. Oct 1. Again put in protection-sheet: very restless
Oct 1/3 and throwing himself out of bed. Oct 3. Taken out of protection-sheet: given enema:
6 result good. Oct 6. (14 day record up.). Continues very restless: sleeps little: & is failing slowly. T-, now, slightly sub-normal. Evening Temp. 97 P. 68. R 22.

Oct. 13. Patient restless; hard to keep in bed; feeble.

Oct 20. Fell out of bed; bruised face. Oct. 22 three convulsions. Temperature sub-normal. Oct 28 Failing rapidly. Taken home by sisters.

Personal and Medical History of

Personal and Medical History of Edward Barry

Whole No. 5934.

Residence, Winnebago Tp.

Date Admission, 21st September 1901.

Admitted by Dr. O. C. Negerdale hour, 4th P.M.

How Sent, L. Budahl, Dep. Houston County

Sex, Male Age, 41

Civil Condition, married

Children, 1 Age Youngest Child,

Occupation, Farmer

Degree Education, Limited; reads & writes

Profession of Religion, R. Catholic

Habits, not Intemperate

Nativity, Houston County, Minn.; Parents, Ireland

Physicians Committing, W. E. Browning & D. C. Rhines

Correspondents, (wife) Mrs. Kate Barry

(Family Physcn. Dr. Bayer of New Albin Iowa (?)) Winnebago Valley Houston Co. Minn

No. for Year, 36

Insane Relatives, No; but 2 sisters said to have acted like patient

Cause Exciting, none apparent

Cause Predisposing, previous attack

Form, chr. melancholia

Accompanying Bodily Disorder, none mentioned

Suicidal or not, — not — but will injure others.

Date of this Attack, 2 weeks ago

Duration, — weeks —

No. of Attack, Not 1st (15 yrs ago had 1st attk)

No. of Admission, 1 St

Age First Attack, about 26.

Time of Leaving, December 21 - 1901

Time in Hospital, 2 mos - 27 ds

Result, Improved: Discharged by Bd of H July 9 - 1902

Examination on Admission by Dr. C. L. Chapple *Date of* Sep 26/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Clear : Quick

MEMORY, Past Events, apparently good

Recent Events, Good Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

Alert and Correct

REASONING POWER, Ordinary Subjects, Good

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS, Yes

SUMMARY,

HISTORICAL.

LENGTH INVASION, 6 or 7 years

ONSET, Gradual or Sudden, Gradual

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

Father, Dead: inflammation of bowels

Paternal Relatives, all healthy

Mother, Dead: cancer of womb

Maternal Relatives, all healthy

Brothers and Sisters, 6 Sisters well: one brother killed when 11 yrs 1 child

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

none

HABITS, Drinking and Smoking, Chews & Smokes has not drank for 1½ years.

HEADACHES, VERTIGO, OR CONVULSIONS, Headaches

OCCUPATION, Healthy or not, Farmer

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

Sleep, fair; Fells when poor Appetite, usually good Bowels, fairly regular

Personal and Medical History of Edward Barry

PHYSICAL CHARACTERISTICS.

HEIGHT, 5ft 11in PRESENT WEIGHT, 143 lb USUAL WEIGHT, NUTRITION,

WOUNDS, Abnormalities, Large mole on left side: wart on back Condition of Skin, healthy slight eruption on right leg.

TONGUE, Coatings, Promptness of Movement, Clear — prompt

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

SIGHT,

EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, none

HEARING,

COORDINATION, Arms, Legs, Grasp,

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

PATELLAR REFLEX, Other Reflexes,

ARTICULATION, Slurred, normal Hesitating, Slow,

FACIAL EXPRESSION, Sensibility,

HEART, Regularity, regular

Strength, Sounds, Good

Size, normal

Apex Beat, 5

Murmurs, none

ARTERIES, normal

LUNGS, Chest symmetry: Sym Expansion: Fair Breath Sounds: Normal

Passed 10/8/1901 at 9 15 am. Ex: at 3 30 pm

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. 1015 Reaction, acid Color and Appearance, light yellow clear

Albumen, Heat: no Nitric acid: no Sugar, Fehling's sol: no Bazo no.

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, fair

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).

Is of fair mental grade: general health somewhat impaired. Says "that people talk about him in his hearing & threaten him & then deny it." Says "his cousin is jealous of him." Attributes his trouble to his having told others of certain bad habits in youth and has been taunted by them. Claims he did not have any intention of harming his wife. "Just wanted to scare her"

In all general subjects, appears perfectly rational.

Personal and Medical History of *Edward Barry*

1901

This patient was brought here by Dep. J. T. Ryan, in fair condition, with following history of case. Order for Committal also accompanied papers. There is no history of consanguinity: No insane relatives: but 2 sisters said to have acted like patient. This is not 1st attack: 15 years ago had 1st attack; duration 2 weeks: and attacks becoming more frequent: was not sent to hospital. First symptoms of this attack manifested 2 weeks ago, by fear of harm from neighbors. Disease seems increasing: violent and with rational intervals, but these occur at irregular intervals. Derangement now shown in that he imagines neighbors are contriving to do him physical harm. Is disposed to injure others, but not suicidal: no filthy or destructive habits. No previous peculiarities noted: no history of intemperance, nor of any severe disease &c a head injury. Has not been restrained or confined. Cause of the disease, none apparent: treatment, none. On personal examination, is perfectly rational and apparently knows that his troubles (during attack) are imaginary. Committment recommended because of Dec 17. Nos 2 & 5.

Sept 29 On admission, was put on B3 (S. & N. Dpt. Complexion dark: hair dark brown; eyes gray: condition of skin good: birth-mark on left side under left shoulder: eruptions on right leg: is clean. teeth: 32 gone, upper jaw: 1, lower jaw. Behavior good. Examined by J. Wood).

Oct. 7/01 Health fairly good during stay; very complaining. Oct. 25 Visited by friends; has improved some. Nov. 1 Has improved a good deal. Dec. 21. Much improved; visited frequently by people; taken home today.

Personal and Medical History of

Personal and Medical History of Forgus D. Abbey

Whole No. 5925

Residence, St Paul, Minn

Became resident of State 20 yrs ago: of County, 20 yrs ago.

Date Admission, 25th September 1901.

Admitted by Dr. O. C. Heyerdale hour, 7.30 P.M.

How Sent, Edmund W. Bazille, Jos P. Ramsey County

Sex, Male Age, 43

Civil Condition, married

Children, — Age Youngest Child, —

Occupation, Hotel-Keeper

Degree Education, College

Profession of Religion, not a church member

Habits, not intemperate

Nativity, Chicago. Ills. Father's Canada: Mother's, Erie, Penn

Physicians Committing, Parks Ritchie and Ethelbert. F. Geer

Correspondents, none given on papers.

Mrs Bertha Abbey 1897 E. 8th St. St Paul Minn

No. for Year, 37.

Insane Relatives, none

Cause Exciting, Unknown

Cause Predisposing, previous attacks

Form, Porous

Accompanying Bodily Disorder, none mentioned

Suicidal or not, not

Date of this Attack, about 5 years ago

Duration, — about 5 years.

No. of Attack, not 1st

No. of Admission, 1st

Age First Attack, not given

Time of Leaving, March 20th 1902

Time in Hospital, 5 mos 23 Ds

Result, Unimproved: Disgd. Sept 1 - 1902 By B of C -

Examination on Admission by Dr. C. L. Chapple *Date of* Sep 27/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Sluggish

MEMORY, Past Events, poor

Recent Events, poor 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,

Demented

DELUSIONS, Systematized, — Transitory, —

Special Subjects, concerning own Condition

HALLUCINATIONS, —

ILLUSIONS,

~~SUMMARY~~, Attention much impaired: is dull & slow in speaking - simple & childish -

HISTORICAL.

LENGTH INVASION, probably several years (as per Commitment)

ONSET, Gradual or Sudden, Gradual

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

nothing obtainable from patient

Father, Living — well

Paternal Relatives, —

Mother, Dead — childbirth

Maternal Relatives, —

Brothers and Sisters, 3 brothers: 2 sisters: all well

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

Typhoid fever, years ago

HABITS, Drinking and Smoking, none

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Hotel Keeper: formerly R.R. Con.

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

—

Sleep, — Appetite, — Bowels,

Say: "all good" -

Personal and Medical History of Forgus D. Abbey

Not found to F. D. Abbey

49/381
5925

M Forgus D. Abbey

Copy of Order for Hearing Petition of Bertha Abbey — for appointment of — as guardian for Said Forgus D. Abbey — insane; served and service admitted notice filed 12th Oct 1901.

(Papers filed with commitment papers.)

PHYSICAL CHARACTERISTICS.

T, not taken USUAL WEIGHT, NUTRITION, quite good

Condition of Skin, Capillary dilatation

— Sluggish

se to Light, slow & slight Accommodation, slow

Finger to nose, eyes shut, slow & hesitating

Standing on one foot, very unsteady

impaired Grasp,

Standing eyes shut, sways: feels unsteady.

Facial Muscles, General unsteadiness

Other Reflexes, —

hesitating & slow Slow,

Sensibility, —

HEART, Regularity, regular

Strength, Sounds, fair

Size, normal

Apex Beat, 5

Murmurs, Loud, diastolic

ARTERIES,

apparently normal

LUNGS,

Chest symmetry: Dym

Expansion: fair

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good — fine.

BOWELS, Present Condition, good

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

Patient evidently of good mental grade. Present condition paretic: speech very slow and hesitating & slurring: various tremors: inactivity of pupils: loss of knee-jerk &c. Is unsteady in movement: expression blank: says "he is perfectly well": "able to attend to large business" Does not know where he is: and imagines he is taking long journeys: has a loud diastolic heart murmur, but heart seems fairly competent. Arteries apparently not atheromatous: Denies having had syphilis or any severe illness.

Personal and Medical History of Forgus D. Abbey

Whole No. 5925

Residence, St Paul, Minn

Became resident of State 20 yrs ago: of County, 20 yrs ago

Date Admission, 25th September 1901.

Admitted by Dr. O. C. Heyerdale hour, 7.30 P.M.

How Sent, Edmund W. Bazille, Jos P. Ramsey County

Sex, Male Age, 43

Civil Condition, married

Children, — Age Youngest Child, —

Occupation, Hotel-Keeper

Degree Education, College

Profession of Religion, not a church member

Habits, not intemperate

Nativity, Chicago, Ills. Father's Canada: Mother's, Erie, Penn

Physicians Committing, Parks Ritchie and Ethelbert. F. Geer

Correspondents, none given in papers.

Mrs Bertha Abbey 1897 E. 8th St. St Paul Minn

No. for Year, 37.

Insane Relatives, none

Cause Exciting, Unknown

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Time of Leaving, March 20 ..

Time in Hospital, 5 mos 23 Ds

Result, Unimproved: Disgd. Sep 11 - 1902 By B of C -

Examination on Admission by Dr. C. L. Chapple *Date of* Sep 27/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Sluggish

MEMORY, Past Events, poor

Recent Events, poor 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,

Demented

DELUSIONS, Systematized, — Transitory, —

Special Subjects, concerning own Condition

HALLUCINATIONS, —

ILLUSIONS,

~~SUMMARY~~, Attention much impaired: is dull & slow in speaking - simple & childish -

HISTORICAL.

LENGTH INVASION, probably several years (as per Commitment)

ONSET, Gradual or Sudden, Gradual

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

nothing obtainable from patient

Father, Living — well

Paternal Relatives, —

Mother, Dead — childbirth

Maternal Relatives, —

Brothers and Sisters, 3 brothers: 2 sisters: all well

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

Typhoid fever, years ago

HABITS, Drinking and Smoking, none

HEADACHES, VERTIGO, OR CONVULSIONS, no

OCCUPATION, Healthy or not, Hotel Keeper: formerly R.R. Con.

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

Sleep, — Appetite, — Bowels, —

Say: "all good" -

Personal and Medical History of Forgus D. Abbey

Not found to F D Abbey St Paul Minn

PHYSICAL CHARACTERISTICS.

...T, not taken USUAL WEIGHT, NUTRITION, quite good

Condition of Skin, Capillary dilatation

...white coated - sluggish

...normal Response to Light, slow & slight Accommodation, slow

...troubles, —

HEARING, Impaired

COORDINATION, Arms, Impaired Legs, Impaired Grasp, Finger to nose, eyes shut, slow & hesitatingly. Standing on one foot, very unsteady. Standing eyes shut, sways: feels unsteady.

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

PATELLAR REFLEX, absent Other Reflexes, —

ARTICULATION, Slurred, Hesitating, hesitating & slow Slow,

FACIAL EXPRESSION, — Sensibility, —

HEART, Regularity, regular

Strength, Sounds, fair

Size, normal

Apex Beat, 5

Murmurs, Loud, diastolic

ARTERIES,

apparently normal

LUNGS,

Chest symmetry: Dym

Expansion: fair

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, good — fine

BOWELS, Present Condition, good

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

Patient evidently of good mental grade. Present condition paretic: speech very slow and hesitating & slurring: various tremors: inactivity of pupils: loss of knee-jerk &c. Is unsteady in movement: expression blank: says "he is perfectly well": "able to attend to large business" Does not know where he is: and imagines he is taking long journeys: has a loud diastolic heart murmur, but heart seems fairly competent. Arteries apparently not atheromatous: Denies having had syphilis or any severe illness.

Personal and Medical History of Forgus D. Abbey

Whole No. 5925

Residence, St Paul, Minn

Became resident of State 20 yrs ago: of County, [illegible]

Date Admission, 25th September 1901.

Admitted by Dr. O. C. Heyerdale hour, [illegible]

How Sent, Edmund W. Bazille, Jos P. Ramsey [illegible]

Sex, Male Age, 43

Civil Condition, Married

Children, — Age Youngest Child, —

Occupation, Hotel-Keeper

Degree Education, College

Profession of Religion, not a church mem[illegible]

Habits, not intemperate

Nativity, Chicago. Ills. Father's Canada: Mother's, Erie, Penn

Physicians Committing, Parks Ritchie and Ethelbert. F. Geer

Correspondents, none given in papers.

Mrs Bertha Abbey 1897 E. 8th St. St Paul Minn

No. for [illegible]

Insane [illegible]

Time of Leaving, March 20th 1902

Time in Hospital, 5 mos 23 Ds

Result, Unimproved: Disgd. Sep 11 - 1902 By B of C -

Examination on Admission by Dr. C. L. Chapple *Date of* Sep 27/1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

Confused: Sluggish

MEMORY, Past Events, poor

Recent Events, poor 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,

Demented

DELUSIONS, Systematized, — Transitory, —

Special Subjects, concerning own Condition

HALLUCINATIONS, —

ILLUSIONS, —

~~SUMMARY~~, Attention much impaired: is dull & slow in speaking - simple & childish -

HISTORICAL.

LENGTH INVASION, probably several years (as per Commitment)

ONSET, Gradual or Sudden, Gradual

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

nothing obtainable from patient

Father, Living — well

Paternal Relatives, —

Mother, Dead — childbirth

Maternal Relatives, —

Brothers and Sisters, 3 brothers: 2 sisters: all well

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

Typhoid fever, years ago

HABITS, Drinking and Smoking, None

HEADACHES, VERTIGO, OR CONVULSIONS, No

OCCUPATION, Healthy or not, Hotel Keeper: formerly R.R. Con.

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

Sleep, — Appetite, — Bowels,

Say: all good" -

Personal and Medical History of Forgus D. Abbey

PHYSICAL CHARACTERISTICS.

HEIGHT, not taken PRESENT WEIGHT, not taken USUAL WEIGHT, NUTRITION, quite good

WOUNDS, Abnormalities, — Condition of Skin, Capillary dilatation

TONGUE, Coatings, Promptness of Movement, white coated - sluggish

PUPILS, Equality, unequal Size, normal Response to Light, slow & slight Accommodation, slow

SIGHT, fairly good

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

HEARING, Impaired

COORDINATION, Arms, Impaired Legs, Impaired Grasp, finger to nose, eyes shut, slow & hesitatingly standing on one foot, very unsteady

TREMORS, Hands, Yes Tongue, Yes Facial Muscles, — General, standing eyes shut, sways: feels unsteady, unsteadiness

PATELLAR REFLEX, absent Other Reflexes, —

ARTICULATION, Slurred, Hesitating, hesitating & slow Slow,

FACIAL EXPRESSION, — Sensibility, —

HEART, Regularity, regular

Strength, Sounds, fair

Size, normal

Apex Beat, 5

Murmurs, Loud, diastolic

ARTERIES,

apparently normal

LUNGS,

Chest symmetry: Dym

Expansion: fair

Breath Sounds: normal

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Good — fine

BOWELS, Present Condition, Good

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

Patient evidently of good mental grade. Present condition paretic: speech very slow and hesitating & slurring: various tremors: inactivity of pupils: loss of knee-jerk &c. Is unsteady in movement: expression blank: says "he is perfectly well": "able to attend to large business" Does not know where he is: and imagines he is taking long journeys: has a loud diastolic heart murmur, but heart seems fairly competent. Arteries apparently not atheromatous: Denies having had syphilis or any severe illness.

1901

This patient was brought here by Dep. E. Johnson, attended by A. Girard, in poor physical condition, with following history of case. There is no history of consanguinity, nor of heredity. This is not 1st attack: (when others occurred, not stated): first symptoms of this attack manifested about 5 years ago: Paresis: Disease seems increasing: variable and with rational intervals, but these, not regular: Derangement now shown by increasing dementia. Is not disposed to injure others, nor suicidal: no 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. Cause of the disease unknown. Treatment, Christian Science for past 12 months.

On personal examination, there is noted the usual appearance of Dementia.

Sep 25 On admission, was put on I.W. (G.H.N.R.pt. Complexion fair: hair brown & gray: eyes brown; condition of skin good: small scar on forehead; small scar over left eye: 3 small scars on back of neck: scar on small of back: 5 small scars on left knee: is clean: teeth all gone in upper jaw, except 2 front and one molar: 1 gone lower right. Is inclined to be pugnacious. Examined by E. Ballard).

Sept. 30 Wt. 136#; paretic delusions; paretic behavior. Oct. 28 Fell & cut his eye; becoming very paretic. Feb. 3/02 Put to bed. Feb. 19 Still failing; fell out of bed. Mar. 1 Several slight convulsions. Mar. 5 Several convulsions every day. Mar. 20 Taken home by wife.

Personal and Medical History of F. W. Hoyer

Whole No. 5927.
Residence, Henderson, Sibley County
Resident of State since 1887: of County since 1896.
Date Admission, 26th September 1901.
Admitted by Dr. C. L. Chapple hour, 7.45 P.M.
How Sent, Edmund W. Bazille, Jo. P. Ramsey Co.
Sex, Male Age, 50
Civil Condition, Married
Children, none Age Youngest Child, —
Occupation, Farming
Degree Education, Common School
Profession of Religion, Lutheran
Habits, unknown if intemperate
Nativity, Germany: parents also born there
Physicians Committing, Arthur Sweeney and W. E. Richeson
Correspondents, none given in papers

No. for Year, 39.
Insane Relatives, none
Cause Exciting, Unknown
Cause Predisposing, previous attack (?)
Form, Chronic mania
Accompanying Bodily Disorder, nothing mentioned
Suicidal or not, — not —
Date of this Attack, In Jany 1901.
Duration, — about 9 months —
No. of Attack, 2nd (one in Jany 1901)
No. of Admission, 1st here (was at St. Peter)
Age First Attack, about 49.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. C. L. Chapple *Date of* Sept — 1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quite clear & quick
MEMORY, Past Events, apparently good
Recent Events, " " 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, persecution
HALLUCINATIONS, ✓
ILLUSIONS, ✓
SUMMARY,

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead — bowel trouble
Paternal Relatives, —
Mother, —
Maternal Relatives, —
Brothers and Sisters, —
Children none
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,
See Commitment
Sleep, — Appetite, — Bowels,
good

Personal and Medical History of F. W. Hoyer

CLEARLY UNBALANCED. [illegible]
Aged Henderson Man Committed to the Asylum.
F. W. Hoyer was examined for insanity in the probate court today and committed. He is the elderly man who attempted to call upon Gov. Van Sant at the capitol a few days ago. He hails from Henderson, and, while rational on some subjects, is clearly unbalanced.

PHYSICAL CHARACTERISTICS.

PRESENT WEIGHT, 173# USUAL WEIGHT, NUTRITION, good
Cupping scars on back of neck: I abre cut on left temple Condition of Skin, healthy
...ngs, Promptness of Movement, clean; prompt
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Impaired senile?
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, Arms, Good Legs, " " Grasp, " "
TREMORS, Hands, no Tongue, no Facial Muscles, no General, no
PATELLAR REFLEX, normal Other Reflexes, —
ARTICULATION, Slurred, normal Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, Strong
Size, normal
Apex Beat, 5
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: Sym
Expansion: fair
Breath Sounds: normal

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

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

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, good
BOWELS, Present Condition, 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 will not answer personal questions: says "Go to the Governor". Says "all he wants is Justice" and "damages", or else to be sent to Germany". Says "Dishonest lawyers have estranged his family & gotten all his property". Claims his right arm is disabled & that he cannot work, but says "he was never in better health in his life". — Dem —

Personal and Medical History of F. W. Hoyer

Whole No. 5927.
Residence, Henderson, Sibley County
Resident of State since 1887: of County since 1896.
Date Admission, 26th September 1901.
Admitted by Dr. C. L. Chapple hour, 7.45 P.M.
How Sent, Edmund W. Bazille, Jos P. Ramsey Co.
Sex, Male Age, 50
Civil Condition, Married
Children, none Age Youngest Child, —
Occupation, Farming
Degree Education, Common School
Profession of Religion, Lutheran
Habits, unknown if intemperate
Nativity, Germany: Parents also born there
Physicians Committing, Arthur Sweeney and W. E. Richeson
Correspondents, none given in papers

No. for Year, 39.
Insane Relatives, none
Cause Exciting, Unknown
Cause Predisposing, previous attack (?)
Form, Chronic mania
Accompanying Bodily Disorder, nothing mentioned
Suicidal or not, — not —
Date of this Attack, In Jany 1901.
Duration, — about 9 months —
No. of Attack, 2nd (one in Jany 1901)
No. of Admission, 1st here (pas at St Peter)
Age First Attack, about 49.
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. C. L. Chapple *Date of* Sept — 1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Quite clear & quick
MEMORY, Past Events, apparently good
Recent Events, " " 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, persecution
HALLUCINATIONS, ✓
ILLUSIONS, ✓
SUMMARY,

HISTORICAL.

LENGTH INVASION, —
ONSET, Gradual or Sudden, —
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
Father, Dead — bowel trouble
Paternal Relatives, —
Mother, —
Maternal Relatives, —
Brothers and Sisters, —
Children none
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,
See Commitment
Sleep, — Appetite, — Bowels,
good

Personal and Medical History of F. W. Hoyer

PHYSICAL CHARACTERISTICS.

HEIGHT, 5 ft 7½ PRESENT WEIGHT, 173# USUAL WEIGHT, NUTRITION, good
WOUNDS, Abnormalities, Cupping scars on back of neck: Sabre cut on left temple Condition of Skin, healthy
TONGUE, Coatings, Promptness of Movement, clean; prompt
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Impaired senile?
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, good
COORDINATION, Arms, Good Legs, " " Grasp, " "
TREMORS, Hands, no Tongue, no Facial Muscles, no General, no
PATELLAR REFLEX, normal Other Reflexes, —
ARTICULATION, Slurred, normal Hesitating, — Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, strong
Size, normal
Apex Beat, 5
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry: Sym
Expansion: fair
Breath Sounds: normal

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

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

OPHTHALMOSCOPIC EXAMINATION,
BLOOD, Corpuscles, Hæmoglobin,
SLEEP, Present Amount and Character, good
BOWELS, Present Condition, 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 will not answer personal questions: says "Go to the Governor". Says "all he wants is Justice" and "damages", or else to be sent to Germany". Says "Dishonest lawyers have estranged his family & gotten all his property". Claims his right arm is disabled & that he cannot work, but says "he was never in better health in his life". — Dem —

1901

This patient was brought here by Emanuel Johnson, in apparently good physical condition, with following history of case. There is no history of consanguinity nor of heredity:- This is not 1st attack; one occurred in January 1901: duration 2 months: was sent to St Peter Hospital; then discharged. First symptoms of this attack manifested in January 1901: believed that people were persecuting him. Disease seems stationary. Variable & with rational intervals, but these not regular. Derangement now shown in the belief that lawyers are conspiring against his happiness and are trying to make him a "dead-beat". Is not disposed to injure others, nor suicidal: no filthy or destructive habits: as to any previous peculiarities, history of intemperance unknown. No history of any severe disease & a head-injury. He has also been confined at County Jail 4 Days. Cause of the disease is unknown. Treatment none. On personal examination, patient talks incessantly about his alleged wrongs and believes that lawyers are lying machines and that every one is against him.

Sep 11 On admission, was put on B^3 (G. H. N. R'pt. Complexion fair: hair dark gray: eyes gray: Condition of skin good: vaccination scar on left arm: scars on back of neck from cupping. Is clean. Teeth: 2 gone, lower jaw; the rest in poor condition. Behavior good. Ex'ly I Blood)

Oct. 9/01. Various delusions; wanted to see governor to get justice; mildly maniacal, complaining noisy. Jan. 1/02 Wt. 192#. Still complaining and noisy. (R.M.P.) Feb. 1/02 193#. Mar. 22 Trans. to B^2; slightly quarrelsome; likes to dictate; harangues about his own troubles. Writes a good deal. Aug. 1 Wt. 186#.

Jan. 31 No change in mental condition; meddlesome and dictatorial; quite abusive at times to nurses & physicians; does no work; spends much time in writing out his grievances; pill fiend. (Dr. Chapple).

Personal and Medical History of Reuben B. Galusha

N.B. Examination made 24th Sept 1901.

Whole No. 5928.

Residence, St Paul, Minn

Became resident of state 43 years ago: of County 43 yrs ago

Date Admission, 27th September 1901

Admitted by Dr Arthur J. Kilbourne hour, 2.00 P.M.

How Sent, Edmund W. Bazille, Jail Ramsey County

Sex, Male Age, 69 years

Civil Condition, Married

Children, 5 Age Youngest Child, —

Occupation, Lawyer

Degree Education, College

Profession of Religion, Not a church member

Habits, Not Intemperate

Nativity, Vermont: Parents born in United States.

Physicians Committing, John A. Vieregg and E. J. Abbott

Correspondents, Mrs R. B. Galusha
505 Dayton Ave
St Paul Minn

No. for Year, 40.

Insane Relatives, None

Cause Exciting, Unknown

Cause Predisposing, "chronic"

Form, Poss. of apoplectic insanity

Accompanying Bodily Disorder, Bright's disease

Suicidal or not, Not

Date of this Attack, Four years ago

Duration, Four years

No. of Attack, 1st

No. of Admission, 1st

Age First Attack, — 65 —

Time of Leaving, August 10 - 1902

Time in Hospital, 10 mos 1X days

Result, Died: Nephritis; (Several years)

Examination on Admission by Dr. C. L. Chaffee *Date of* Sept 1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events,
Recent Events, ✓ Special Subjects, ✓

PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Illusive

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

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

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 Reuben B. Galusha

PIONEER PRESS: MONDA
Aug 19 02

1928
49/389

R. B. GALUSHA PASSES AWAY

Died there

PIONEER RESIDENT OF ST. PAUL DIES OF KIDNEY TROUBLE.

Was Prominent Among the Attorneys of the State and Took an Active Part in the Affairs of the City—Formerly Served in Capacity of Pension Agent for State.

Reuben B. Galusha died yesterday morning at his home on Goodrich avenue after an illness of four years. Mr. Galusha had lived on Dayton avenue near Fisk street during the past two years, and had moved into his new house scarcely a week when the final attack came upon him. His death was due to kidney trouble.

Mr. Galusha was born in Shaftsbury, Vt., in 1833. He moved to Mount Vernon, Ohio, at an early age and was there admitted to the bar in 1857. The following year Mr. Galusha came to St. Paul, arriving here in August. He afterward formed a law partnership with Henry J. Horn, which continued for many years. Mr. Galusha was pension agent for Minnesota during the early '70s, and afterward attorney for the St. Paul, Minneapolis & Manitoba railway for several years before it became the Great Northern.

Mr. Galusha was prominent in city affairs, but not as an officeholder, except when he served on the workhouse board for several years. He was well known among the lawyers of the city and was an attorney in many of the important cases that have been before the courts during the last thirty years.

During the last four years of his life, however, Mr. Galusha did not practice law, owing to his ill health, which kept him practically an invalid. He is survived by a widow and five children—Misses Helen and Emily, and Howard, Reuben and Norman. No arrangements for the funeral had been made last night.

Galusha

ura J Galusha

for appointment of

as guardian for

insane; served and

3-1902.

Court House, St Paul

nt papers.)

RACTERISTICS.

USUAL WEIGHT, NUTRITION,

Condition of Skin, normal

rates slightly bright

nse to Light, Yes Accommodation, Yes

arcus senilis

Slight Swaying Grasp,

Tongue, No Facial Muscles, no General, no

normal

Other Reflexes,

Hesitating, rather jerky Slow, —

Sensibility, —

CRANIAL MEASUREMENTS.

Circumference Horizontal,

Circumference Verto-Mental,

Naso-Occipital Arc,

Binauricular Arc,

Ant-Post Diameter,

Transverse Diameter,

Binauricular Diameter,

Facial Length,

Length-Breadth Index,

Volume,

Peculiarities in Shape,

Slightly Sclerotic

LUNGS,

Chest Symmetry: Sym

Expansion: Fair

Breath Sounds: Normal

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sound

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).

Senile in appearance: Some slight evidences of apoplexy: Hearing very poor: and he also seems very illusive: repeats his words, without reference to meaning & apparently is unable to speak more than a few words. Urine of low Sp gr & slight quantity of albumen. Unable to obtain history from patient.

Condition, doubtless, resulting from Chronic nephritis & arterio-sclerosis & probable apoplexy, which has left slight motor impairment & considerable aphasia.

Personal and Medical History of Reuben B. Galusha

N.B. Examination made 24th Sept 1901.

Whole No. 5928.	No. for Year, 40.
Residence, St. Paul, Minn	Insane Relatives, None
Became resident of state 43 years ago: of County 43 yrs ago	Cause Exciting, Unknown
Date Admission, 27th September 1901.	Cause Predisposing, "Chronic"
Admitted by Dr. Arthur F. Kilbourne hour, 2.00 P.M.	Form, Poss. apoplectic insanity
How Sent, Edmund W. Bazielle, Jo P. Ramsey County	Accompanying Bodily Disorder, Bright's disease
Sex, Male Age, 69 years	Suicidal or not, Not
Civil Condition, Married	Date of this Attack, Four years ago
Children, 5 Age Youngest Child, —	Duration, Four years
Occupation, Lawyer	No. of Attack, 1st
Degree Education, College	No. of Admission, 1st
Profession of Religion, Not a church member	Age First Attack, — 65 —
Habits, Not intemperate	Time of Leaving, August 10 - 1902
Nativity, Vermont: parents born in United States.	Time in Hospital, 10 Mos 14 Ds
Physicians Committing, John A. Vieregge and E. J. Abbott	Result, Died: Nephritis; (Several years)
Correspondents, Mrs R. B. Galusha 805 Dayton Ave St. Paul Minn	

Examination on Admission by Dr. C. L. Chapple *Date of* Sept — 1901

MENTAL CHARACTERISTICS.

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

MEMORY, Past Events,

Recent Events, ✓ Special Subjects, ✓

PERCEPTIVITY, Alert or Dull, Correct or Illusive, Illusive

REASONING POWER, Ordinary Subjects, ✓

Special Subjects,

Own Mental State, ✓

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

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, ✓

...dical History of Reuben B. Galusha

5928
49/389

M. Reuben B. Galusha

Copy of Order for Hearing Petition of Laura S. Galusha on Wednesday 19th February 1902 for appointment of as guardian for Reuben B. Galusha insane; served and ~~service admitted~~ Papers filed Feby 3-1902.

(Papers filed with commitment papers.)

Hearing at Probate Court room, Court house, St. Paul

...RACTERISTICS.

USUAL WEIGHT, NUTRITION, —

Condition of Skin, Normal

...rates slightly to right

...onse to Light, Yes Accommodation, Yes

... arcus senilis

... slight swaying Grasp,

TREMORS, Hands, Scarcely any Tongue, no Facial Muscles, no General, no

PATELLAR REFLEX, Normal Other Reflexes,

ARTICULATION, Slurred, Hesitating, rather jerky Slow, —

FACIAL EXPRESSION, Sensibility, ✓

HEART, Regularity, regular

Strength, Sounds, Normal: 2d sound rather irritable

Size, Normal

Apex Beat, 5

Murmurs, None

ARTERIES, Slightly 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,

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

Albumen, Sugar,

Casts and Crystals,

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sound

BOWELS, Present Condition, 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).

Senile in appearance: some slight evidences of apoplexy: hearing very poor: and he also seems very illusive: repeats his words, without reference to meaning & apparently is unable to speak more than a few words. Urine of low sp. gr. & slight quantity of albumen. Unable to obtain history from patient.

Condition, doubtless, resulting from Chronic nephritis & arteriosclerosis & probably apoplexy, which has left slight motor impairment & considerable aphasia.

Personal and Medical History of Reuben B. Galusha

N.B. Examination made 24th sept 1901.

Whole No. 5928.
Residence, St Paul, Minn
Became resident of state 43 years ago: of County 43 yrs ago
Date Admission, 27th September 1901
Admitted by Dr Arthur J. Kilbourne hour, 2.00 P.M.
How Sent, Edmund W. Bazille, Jail Ramsey County
Sex, Male Age, 69 years
Civil Condition, Married
Children, 5 Age Youngest Child, —
Occupation, Lawyer
Degree Education, College
Profession of Religion, Not a Church member
Habits, Not Intemperate
Nativity, Vermont: Parents born in United States.
Physicians Committing, John A. Vieregge and E. J. Abbott
Correspondents, Mrs R. B Galusha
805 Dayton Ave
St Paul Minn

No. for Year, 40.
Insane Relatives, None
Cause Exciting, Unknown
Cause Predisposing, = chronic =
Form, Poss. of opposite insanity
Accompanying Bodily Disorder, Bright's disease
Suicidal or not, Not
Date of this Attack, Four years ago
Duration, Four years
No. of Attack, 1st
No. of Admission, 1st
Age First Attack, — 65 —
Time of Leaving, August 10 - 1902
Time in Hospital, 10 Mos 14 Ds
Result, Died: Nephritis; (Several years)

Examination on Admission by Dr. C L Chaffee *Date of* Sept — 1901

MENTAL CHARACTERISTICS.

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

...ical History of Reuben B. Galusha

PHYSICAL CHARACTERISTICS.

HEIGHT, Not taken PRESENT WEIGHT, Not taken USUAL WEIGHT, NUTRITION, —
WOUNDS, Abnormalities, — Condition of Skin, Normal
TONGUE, Coatings, Promptness of Movement, prompt: deviates slightly to right
PUPILS, Equality, Equal Size, normal Response to Light, Yes Accommodation, Yes
SIGHT, Much impaired
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, slight arcus senilis
HEARING, very poor
COORDINATION, ~~Arms~~, fairly good Legs, slight unsteadiness Grasp,
TREMORS, Hands, Scarcely any Tongue, no Facial Muscles, no General, no
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, Hesitating, rather jerky Slow, —
FACIAL EXPRESSION, Sensibility, —
HEART, Regularity, regular
Strength, Sounds, normal: 2d sound rather irritable
Size, normal
Apex Beat, 5
Murmurs, None
ARTERIES, Slightly 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,

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

OPHTHALMOSCOPIC EXAMINATION,

BLOOD, Corpuscles, Hæmoglobin,

SLEEP, Present Amount and Character, Sound

BOWELS, Present Condition, 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).

Senile in appearance: Some slight evidences of apoplexy: hearing very poor: and he also seems very illusive: repeats his words, without reference to meaning & apparently is unable to speak more than a few words. Urine of low Sp gr & slight quantity of albumen. Unable to obtain history from patient.

Condition, doubtless, resulting from Chronic nephritis & arteriosclerosis & probable apoplexy, which has left slight motor impairment & considerable aphasia.

Personal and Medical History of Reuben B. Galusha

1901

This patient was brought here by E.B. Ober, attended by Norman Galusha, in poor physical condition with following history of case. There is no history of consanguinity nor heredity: This is first attack: first symptoms manifested four years ago, by convulsions. Disease seems increasing: variable and with rational intervals, but these are irregular. Derangement is now shown by loss of memory, aberration of speech. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. No previous peculiarities manifested. No history of intemperance. Has "Bright's Disease". Has not been restrained or confined. Cause of the disease unknown. Usual treatment has been given.

Sept 27 On personal examination, patient talks in coherently. ("Information of disunity" with paper). On admission, was put on T.W. (G.H.N. Dpt. Complexion fair: hair dark gray: eyes brown: condition of skin good: Is clean: Teeth all gone, except an, upper left. Below in good.)

Oct. 10/01 Has been quiet; dull; feeble; confused; health fairly good. Jan 31/02 Continued about the same. Had convulsions Dec. 14 & Jan. 31. Feb. 2 Convulsions. July 1/02 Seems to be failing more paralyzed. Aug. 3 Weak & exhausted. Aug. 4 Visited by wife. Aug. 10 Died at 5 a.m. Wife and family visited daily - Death caused by failure of circulation.

Personal and Medical History of

Personal and Medical History of Martin Bros

Whole No. 5930.
Residence, Dont know
Not a resident of Fillmore County.
Date Admission, 30th September 1901.
Admitted by Dr. C. L. Chapple hour, 9.15 P.M.
How Sent, E. V. Farrington, J of P. Fillmore Co
Sex, Male Age, 59.
Civil Condition, Dont know
Children, — Age Youngest Child, —
Occupation, Laborer; (if any) —
Degree Education, Can read
Profession of Religion, Says "Catholic" —
Habits, not intemperate
Nativity, Dont know: says "In Scotland": parents born in England
Physicians Committing, J. H. Phillips and Geo. A. Love
Correspondents, none given in papers

No. for Year, 42.
Insane Relatives, None
Cause Exciting, Dont know
Cause Predisposing, probably previous attacks
Form, ~~[illegible]~~
Accompanying Bodily Disorder, None mentioned.
Suicidal or not, — not —
Date of this Attack, not given
Duration, not known
No. of Attack, Dont know
No. of Admission, 1st here
Age First Attack, not known
Time of Leaving,
Time in Hospital,
Result,

Examination on Admission by Dr. C. L. Chapple *Date of* Oct — 1901

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,
Confused — Sluggish
MEMORY, Past Events, Very poor
Recent Events, poor Special Subjects, —
PERCEPTIVITY, Alert or Dull, Correct or Illusive,
Dull — Correct
REASONING POWER, Ordinary Subjects, poor
Special Subjects, —
Own Mental State, Says "he is alright"
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).
only as below
Father, Dead — Consumption
Paternal Relatives, no history
Mother, Dead — consumption
Maternal Relatives, no history
Brothers and Sisters, Doesn't know
Children 1 — Dead —
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
Typhoid fever

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

Sleep, Good Appetite, Good Bowels, regular

Personal and Medical History of Martin Bros.

PHYSICAL CHARACTERISTICS.

HEIGHT, — PRESENT WEIGHT, — USUAL WEIGHT, NUTRITION, Good
WOUNDS, Abnormalities, Superficial Scar on each shoulder; scar on back of neck and one on left side of forehead — Condition of Skin, healthy
TONGUE, Coatings, Promptness of Movement, slight coat — prompt —
PUPILS, Equality, yes Size, normal Response to Light, yes Accommodation yes
SIGHT, Good
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, Good
COORDINATION, ~~Arms,~~ All good ~~Legs,~~ ~~Grasp,~~
TREMORS, Hands, no Tongue, no Facial Muscles, no General, no
PATELLAR REFLEX, normal Other Reflexes,
ARTICULATION, Slurred, normal Hesitating, — Slow, ✓
FACIAL EXPRESSION, Sensibility, ✓
HEART, Regularity, regular
Strength, Sounds, Good
Size, normal
Apex Beat, 5'
Murmurs, none
ARTERIES,
normal
LUNGS,
Chest symmetry; Gen
Expansion; fair
Breath Sounds: normal
Passed 10/19/1901: at 6.30 am Ex. 10/19/1901 at 11.00 am

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. 1015 Reaction, acid Color and Appearance, Light yellow clear
Albumen, Heat: No Nitric acid: No. Sugar, Fehling's Sol. No Diazo No.
Casts and Crystals,

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

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

appears of very moderate mental grade: physical condition quite good. Appears to evade answering questions directly, and frequently says "he would not state" — appears to have very poor memory, and mixes dates — says "he has had lots of trouble"; "lost wife & a child" — Got out of work. Has a suit & pair of shoes, stolen: wore his aldones out. Gives his age as 59 — (appears much younger) — says "he served for years in the U.S. regular army, but evinces very poor knowledge of places & persons and dates — has general air of "Shamming" —

Personal and Medical History of Martin Bros

1901

This patient was brought here by Sheriff E. K. Glexrud, attended by O. O. Blogsvedt, in fair physical condition, with following history of case. No history of consanguinity nor heredity: If first attack, dont know. Patient was found by the Sheriff wandering around, without shoes: could give no intelligent account of himself. Disease seems stationary: dont know as to intervals (if any rational), being regular. Derangement now manifested in that he can give no intelligent account of himself. Is not disposed to injure others, nor suicidal; no filthy or destructive habits. Dont know if any previous peculiarities shown: No history of intemperance, nor of any severe disease &c or head injury. If restraint or confinement has been employed, dont know. Dont know cause of the disease; or if any treatment, dont know. On personal examination, patient talks incoherently; can give no intelligent account of himself. Commitment recommended because his condition is such that it is dangerous for himself and others to have him at large: his disease is of such a nature as to require aid and assistance, while under legal restraint. (Residence not known: not a resident of Fillmore County).—

Sep 30 On admission, was put on I.W. (G. H. N. R'pt. Complexion dark: hair black: eyes brown; condition of skin fair: scars on forehead: scar on neck: large scar on right shoulder: large scar on left shoulder: scar on left knee: scar on back of right hand: is dirty: Teeth all gone on upper except one on each side: 3 gone on each side of lower jaw: Behavior good: Examined by E. Ballard). Aug 1/03 Wt. 144#

03 Jan 31 Usually quiet; silly in manner; always evasive in regard to his history. Usually well behaved — is rather indifferent.

Personal and Medical History of

Personal and Medical History of Gunder T. Nelson

Whole No. 5931.
Residence, Steele County, Minn
Date Admission, 1st October 1901
Admitted by Dr. C. L. Chapple hour, 10 45 am
How Sent, W. A. Eggleston, J of P. Steele County
Sex, Male Age, 43
Civil Condition, married
Children, 9 Age Youngest Child, —
Occupation, Farmer
Degree Education, Common School
Profession of Religion, Not a church member
Habits, no history of intemperance
Nativity, Minnesota: Parents born in Norway
Physicians Committing, A. B. Stewart and J. S. Adair
Correspondents, Mrs. Gunder (Serena) T. Nelson (wife) Bixby. Minn

No. for Year, 43.
Insane Relatives, No history
Cause Exciting, Unknown
Cause Predisposing, Previous attacks
Form, ~~Sub acute melancholia~~
Accompanying Bodily Disorder, None mentioned
Suicidal or not, Not
Date of this Attack, within 2 years
Duration, Some 2 years?
No. of Attack, Not 1st (at intervals past 2 years)
No. of Admission, 1st —
Age First Attack, about 41
Time of Leaving, October 28 — 1901.
Time in Hospital, — 27 Ds —
Result, Improved: Discharged by Board of Control April 14 — 1902

Examination on Admission by Dr. C. L. Chapple *Date of* Octo — 1901

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
REASONING POWER, Ordinary Subjects, fair
Special Subjects, —
Own Mental State, Thinks he is perfectly sane
EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed, Normal
DELUSIONS, Systematized, — Transitory, Yes
Special Subjects, —
HALLUCINATIONS, No —
ILLUSIONS, — no —
SUMMARY,

HISTORICAL.
LENGTH INVASION, probably Year or more
ONSET, Gradual or Sudden, Gradual
HEREDITY, (Question concerning Insanity, Consanguinity, Epilepsy, Paralysis, Syphilis, Hysteria, Inebriety, Consumption).
— no history —
Father, Dead — (Paralysis) —
Paternal Relatives, 1 aunt & 1 uncle died of consumption
Mother, Living — well — 73
Maternal Relatives, Grandmother — paralysis —
Brothers and Sisters, 7 brothers — 2 sisters — well — children — 9 — well
PROMINENT DISEASES, (especially Typhoid Fever, Sunstroke, Head Injuries and Surgical Operations).
— none —
HABITS, Drinking and Smoking, Both — not to excess
HEADACHES, VERTIGO, OR CONVULSIONS, headaches
OCCUPATION, Healthy or not, Farmer
Detail Date, Duration, and Character of Previous Attack, if any,
Sleep, good Appetite, good Bowels, regular

Personal and Medical History of Gunder T. Nelson

PHYSICAL CHARACTERISTICS.

HEIGHT, 6 ft PRESENT WEIGHT, 208 lbs USUAL WEIGHT, NUTRITION, Good
WOUNDS, Abnormalities, none Condition of Skin, healthy
TONGUE, Coatings, Promptness of Movement, slight coat — prompt —
PUPILS, Equality, equal Size, normal Response to Light, yes Accommodation, yes
SIGHT, slight impairment
EYES, Nystagmus, Squint, Arcus Senilis, or other troubles, —
HEARING, quite good
COORDINATION, ~~Arms,~~ all good ~~Legs,~~ ~~Grasp,~~
TREMORS, Hands, none Tongue, none Facial Muscles, — General, —
PATELLAR REFLEX, normal Other Reflexes, —
ARTICULATION, Slurred, normal Hesitating, — Slow,
FACIAL EXPRESSION, — Sensibility, normal
HEART, Regularity, regular
Strength, Sounds, strong
Size, normal
Apex Beat, 5
Murmurs, none
ARTERIES, OK
LUNGS,
Chest symmetry: sym
Expansion: good
Breath Sounds: normal

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

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

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

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

Patient is in apparently excellent physical condition: is a large, well built robust man: says that he used to drink some: wife states he used to drink hard, but not for a year or more — about the time present trouble appeared. A friend also states that patient is heavily in debt and has worried over it. No other causes for condition discovered. Patient says a neighbor accused him of buggery and he had said he would make soap of said neighbor, but no further threats. He also thinks his brother has begun a damage suit against said neighbor without patient's knowledge and that there is a scheme to get money that belongs to him —

Personal and Medical History of Gunder. T. Nelson

1901

This patient was brought here by Sheriff Chas Misgen, attended by Geo. McCrady, in good physical condition, with following history of case. There is no history of consanguinity: no history as to insane relatives: This not 1st attack: others occurred past 2 years, at intervals: duration not stated: was not sent to hospital. First symptoms of this attack manifested within two years. Disease seems stationary: if variable & with rational intervals?. Derangement now shown in that he is convinced that neighbors have slandered him, and that damages were awarded him, but withheld. Is not disposed to injure others, nor suicidal: no filthy or destructive habits. No history as to any previous peculiarities, nor of intemperance &c, nor of any severe disease &c or head-injury. He has not been restrained or confined. Cause of the disease unknown: treatment, none. On personal examination, he undoubtedly has "delusions of Persecution".

Oct 1 On admission, was put on B3 (G.H.N. Rpt. Complexion fair: hair light-brown: eyes blue: condition of skin good: one scar on right side of forehead: scar on left arm: underwear dirty: teeth in good condition: behavior good: examined by I Blood)

N.B. See letter from N. T. Nelson (brother), dated Oct 8/1901, on file "Glad to hear that my brother's mental trouble does not appear to be of serious note. Wife will be down to see him again, in a few days: wish you would call her in & get all information you can out of her as she is in position to give you more fully the history of his trouble. She says, the first she knew there was anything wrong was a year ago last Christmas: he commenced crying, saying that his neighbors were slandering him and were going to send him to State-Prison. A year ago this summer, he came into my office & wanted to know if I had heard any talk about him and I told him "No" & asked him what was the matter; and he said if I had not heard anything, there could not be anything to it & after a while he made the remark that "he thought he was getting crazy". And sometime later, he drifted into the idea that his neighbors had had a law-suit about him and they failed to prove anything against him, and they were fined and this fine was turned over to me for safe-keeping & he has been to see me, a number of times, about paying that money over to him, as it belonged to him, he said, & would get quite mad about it. We were able, at times, to prove to him that he was wrong in his idea; but in a short time he would drift right back in the same channel. x x x x fairly well contented here: I guess that is a mistake. He is not at all contented (in this hospital). finds fault with being among crazy people; xx cannot sleep. xxx so much disturbance &c. Put him in some quiet room, if possible: give him out door exercise &c. Am told that July 4th 1899, he was thrown down on a floor & knocked senseless & it was some time before he came to. Do you suppose his head was injured then & that is the cause of his mental trouble? I expect you have noticed that the blood rushes to his head, at times, & when this occurs, he is much more restless. Could this not be cured? &c".

Oct 1/14 Oct 1. Received on Ward: given bath. Oct 14. 14 day record up. T.P.&R. have been normal: appetite good: bowels & urine regular: has shown no change, since here. "I under the impression that there is some scheme to get money which belongs to him, but is reasonable & content to wait till authorities let him go" (was visited by relatives Oct 11. & by wife, on 13th, who wished to take him home;

Personal and Medical History of Gunder. T. Nelson

days: he is all right"). Works well on ward: very quiet: talks well on ordinary subjects.

Oct. 15 14 day record finished; talk fairly rational; does not mention delusion; Oct. 28 Taken home by brother.

Personal and Medical History of

Whole No.

Residence,

Date Admission,

Admitted by hour,

How Sent,

Sex, Age,

Civil Condition,

Children, Age Youngest Child,

Occupation,

Degree Education,

Profession of Religion,

Habits,

Nativity,

Physicians Committing,

Correspondents,

No. for Year,

Insane Relatives,

Cause Exciting,

Cause Predisposing,

Form,

Accompanying Bodily Disorder,

Suicidal or not,

Date of this Attack,

Duration,

No. of Attack,

No. of Admission,

Age First Attack,

Time of Leaving,

Time in Hospital,

Result,

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

MENTAL CHARACTERISTICS.

MENTAL ACTIVITY, Clear or Confused, Quick or Sluggish,

MEMORY, Past Events,

Recent Events, Special Subjects,

PERCEPTIVITY, Alert or Dull, Correct or Illusive,

REASONING POWER, Ordinary Subjects,

Special Subjects,

Own Mental State,

EMOTIONAL STATE, Normal, Indifferent, Exalted, Depressed,

DELUSIONS, Systematized, Transitory,

Special Subjects,

HALLUCINATIONS,

ILLUSIONS,

SUMMARY,

HISTORICAL.

LENGTH INVASION,

ONSET, Gradual or Sudden,

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

Father,

Paternal Relatives,

Mother,

Maternal Relatives,

Brothers and Sisters,

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

HABITS, Drinking and Smoking,

HEADACHES, VERTIGO, OR CONVULSIONS,

OCCUPATION, Healthy or not,

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

Sleep, Appetite, Bowels,