

Patient Certificates and Notices: Admission date 1887

Contributors

Ticehurst House Hospital

Publication/Creation

late 19th century - early 20th century

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NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day from the Patient's reception.

I hereby give you Notice, That _____

(a) House or hospital.

was admitted into this (a) _____ as a Private Patient, on the

_____ day of _____ 188 , and I hereby

transmit a Copy of the Order and Medical Certificates on which he was received

(b) If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.

(b)

Signed, _____

(c) Superintendent or proprietor of—

(c) _____

Dated this _____ day of _____

One Thousand Eight Hundred and Eighty _____

To the Commissioners in Lunacy.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A.) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive _____

whom I last saw at _____

(a) Within one month previous to the date of the order.

(b) Lunatic, or an idiot, or a person of unsound mind.

on the _____ day of _____ (a)

a (b) _____ as a Patient into your House.

Subjoined is a Statement respecting the said _____

Signed, Name _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any) or }
other circumstances of connection with the Patient. }

Dated this _____ day of _____

One Thousand Eight Hundred and Eighty _____

To the Drs. NEWINGTON,

Proprietors of the Ticehurst Establishment.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at }
length _____ }

Sex and Age _____

Married, Single, or Widowed _____

Condition of Life, and previous Occupation }
(if any) _____ }

Religious Persuasion, as far as known _____

Previous Place of Abode _____

Whether First Attack _____

Age (if known) on First Attack _____

When and where previously under Care and }
Treatment _____ }

Duration of existing Attack _____

Supposed Cause _____

Whether subject to Epilepsy _____

Whether Suicidal _____

Whether Dangerous to others _____

Whether found Lunatic by Inquisition, }
and Date of Commission or Order for }
Inquisition _____ }

Special Circumstances (if any) preventing }
the Patient being examined, before Ad- }
mission, separately by Two Medical }
Practitioners _____ }

Name and Address of Relative to whom }
Notice of Death to be sent _____ }

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (c) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or }
other circumstances of connection with the Patient. }

MEDICAL CERTIFICATE,—Schedule (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, John Taylor

being a (a) Member of the Royal College of Surgeons,
England.

and being in actual practise as a (b) Surgeon

hereby certify, that I, on the 11th day of June

at (c) The Establishment. Ticehurst

in the County of Sussex separately from any other Medical Practitioner

personally examined Mary Emma St John

of (d) The Lodge. Sturford. Sussex and that

the said Mary Emma St John

is a (e) person of unsound mind and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself :—

(f) her appearance, manner and conduct are
all of an irrational character - she
rambles most incoherently in her talk - she
throws herself on the ground - shouts -
and laughs without reason -

2.—Other facts (if any) indicating Insanity communicated to me by others :

(g) Annie Osous - her attendant. Says that
she (Mary Emma St John) refuses to take
food, as she fancies every thing is poisoned -
she is noisy and at times violent,
requiring restraint.

Signed, Name, John Taylor

Place of Abode, Ticehurst. Sussex

Dated this 11th day of June One Thousand Eight

Hundred and Eighty seven

(a) Here set forth the qualification entitling the person certifying to practice as a physician, surgeon or apothecary, es. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be

(c) Here insert the street and number of the house (if any) or other like particulars.

(d) Insert residence and profession or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

MEDICAL CERTIFICATE,—Schedule (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Robert White
being a (a) Member of the Royal College of Surgeons of England
Student of Medicine of the University of Aberdeen
and being in actual practice as a (b) Physician
hereby certify, that I, on the 11 day of June
at (c) The Establishment Fitchurst
in the County of Sussex separately from any other Medical Practitioner
personally examined Mary Emma St John
of (d) The Lodge Hurst, Sussex and that
the said Mary Emma St John Spinster
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself :—

(f) Here state the facts.

(1) She talks like a mad person. Her appearance is such,
very incoherent & wild. Throws herself about keeps
pulling up her dress & twisting her hair on her knees
& clapping her hands, laughs & talks without any
reason or sense whatever

2.—Other facts (if any) indicating Insanity communicated to me by others :

(g) Here state the information, and from whom.

(2) Ann Owens her attendant says that the
(Mary Emma St John) will take in food unless forced
down her throat as she says it is poisoned. She is very
violent at times & requires two or three persons to hold her.
I will not walk near her than 2 or 3 yards without throwing
her down.

Signed,

Name,

William Robert White M.D.

Place of Abode,

Mileend, Wadhurst Sussex

Dated this

11

day of

June

One Thousand Eight

Hundred and Eighty

Seventy

Notice of Admission

I hereby give you notice that Mary Emma
S^h Lohr was admitted into this House as a
Private-patient on the Eleventh day of June
1887 and I hereby transmit a Copy of the Order
& Medical Certificate on which she was received

A. S. Newington
St. prop. of Seaboard Asylum

Dated this 12th day of June
One thousand eight hundred and eighty-seven

To the Comm.

Form of Medical Certificate

I, the undersigned being a Member of the Royal College of
Surgeons in London - and being in actual practice as
a Surgeon hereby certify that I, on the tenth day of
June at Slinfold Lodge ^{Slinfold} in the County of Surrey
separately from any other Medical Practitioner personally
examined Mary Emma St. John ^{of Slinfold Lodge Slinfold Surrey} and that the said Mary
Emma St. John ^{Spinster} is a person of unsound mind and
a proper person to be taken charge of and detained under
care and treatment and that I have formed this
opinion upon the following grounds -
1. Facts indicating Insanity observed by myself.
2. Sloppiness - untidiness - incoherent talking - drinking
freak - delusions -

2. Other facts indicating Insanity communicated to
me by the Nurse - Susan Langford.
That she is very mischievous and noisy - constantly
rambling on in incoherent talk.

Edw. J. Bostwick.

M.D. 62

7 North Street Hove near

Surrey.

Dated the tenth day of June one thousand eight
hundred and eighty seven.

Form of Medical Certificate

I Frederick S Caddy the undersigned being a Member
of Royal College of Surgeons in England and being in practice
as a Surgeon hereby certify that I, on the tenth day of June
at 7 North St. Haverham in the County of Essex, separately
from any other Medical Practitioner personally examined
Mary Anne St. John of the said City for the County of
Essex - Spina - and that the said Mary Anne
is a person of sound mind and a proper
person to be taken charge of and detained under care
and treatment, and that I have formed the opinion
upon the following grounds - viz.

1. Facts indicating Insanity known by myself.
2. Other facts (if any) indicating Insanity communicated
to me by others.

(Signed) Frederick S Caddy

51 North Street Haverham

Dated this tenth day of June one thousand eight
hundred and eighty seven.

Copied

PRIVATE PATIENT.

(25 & 26 Vict. c. 111, s. 28).

STATEMENT.

(a) After two clear days and before the expiration of seven clear days, from the admission of the patient.

I have this Day (a) seen and examined *Mary Emma St John*

a Private Patient, received

on the *Elmth - A.H.N.* day of *June* 188*7*
Elmth day of *June*
pursuant to an Order dated the *Elmth* day of

June 188*7* and hereby Certify, that with respect to Mental State she is suffering from acute mania, is restless, noisy, sleepless & only takes food when fed

and that with respect to Bodily Health and Condition she is open & worn by the disease.

(b) Medical proprietor or superintendent, or attendant of —.

Signed, (b) *A.S. Newington*
Joint Medical Proprietor
of Litchhurst Asylum

Dated this *16th* Day of *June*
One Thousand Eight Hundred and Eighty seven.

Medical Return
Miss Mary Emma St John
sent - 16 June 1887

admitted 10th June 1887

St John Mary Emma

Admitted. June 1st
1897-

No. 565

LUNATICS.
*Notice of Admission of a Private Patient
 into an Asylum.*
 16 & 17 Vict., c. 97, s. 89.
 SCHED. F. No. 4.
 25 & 26 Vict. c. 111, s. 28.
 No. 4.

NOTICE OF ADMISSION OF A PRIVATE LUNATIC

I hereby give you Notice, that¹ _____

was admitted into this Asylum as a Private Patient, on the _____

day of _____ 188 , and I hereby transmit a Copy of the Order and

Statement, and Medical Certificate² on which³ he was received.

⁴

(Signed) _____

Clerk of _____ Asylum.

Dated this _____ day of _____

One thousand eight hundred and _____

To the Commissioners in Lunacy.

¹ Here insert the Patient's Name.

² Or Certificates.

³ Insert where necessary *she*.

⁴ If the Patient be received upon one Certificate only, the

special circumstances which have prevented the Patient from being examined by two Medical Practitioners must be here stated, as in the Statement which accompanies the Order for Admission.

NOTE.—The 16 & 17 Vict. c. 97, and 25 & 26 Vict. c. 111, s. 28, requires the Clerk of the Asylum, within *one* clear day from the day on which the Patient has been received into the Asylum, to transmit this document to the Commissioners in Lunacy, subject to a penalty of £20 for his omission.

COPY OF THE ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

I, the undersigned, hereby request you to receive ¹ *The Rev^d Richard Cox Hales*
 whom I last saw at *Woodmancote Rectory*
 on the *27th* day of *June* 18*87*. being within one calendar month prior to the date hereof,
 a ² *person of unsound mind* as a Patient into your *Establishment*
 Subjoined is a Statement respecting the said ¹ *Rev^d Richard Cox Hales*
 (Signed) Name *Ada Young Hales*
 Occupation (if any) *Wife*
 Place of Abode *Woodmancote Rectory*
 Degree of Relationship (if any) } *Wife*
 or other circumstances of con- }
 nexion with the Patient }
 Dated this *27th* day of *June* one thousand eight hundred and *87*.

To _____
 Superintendent of the Asylum for the
 of _____

COPY OF THE STATEMENT.*

If any of the Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, and Christian Name, at length	...	<i>Richard Cox Hales</i>
Sex and Age	...	<i>69</i>
Married, Single, or Widowed	...	<i>married</i>
Condition of Life, and previous Occupation (if any)...	...	<i>Clergyman</i>
Religious Persuasion, as far as known	...	<i>oxford</i>
Previous Place of Abode	...	<i>no</i>
Whether first Attack	...	<i>About 45</i>
Age (if known) on first Attack	...	<i>near under restraint</i>
When and where previously under Care and Treatment	...	<i>2 years</i>
Duration of existing Attack	...	<i>Business Troubles</i>
Supposed Cause	...	<i>no</i>
Whether subject to Epilepsy	...	<i>Yes</i>
Whether Suicidal	...	<i>Slightly</i>
Whether Dangerous to others	...	
Whether found Lunatic by Inquisition, and date of Commission or Order for Inquisition...	...	
Special circumstances (if any) preventing the Patient being examined before Admission separately by two Medical Practitioners	...	
Name and Address of Relation to whom Notice of Death may be sent	...	<i>M^{rs} Hales - Woodmancote Rectory Henfield - Sussex</i>
(Signed) Name		<i>Ada Young Hales</i>

Where the Person signing the Statement is not the Person who signs the Order, the following Particulars concerning the Person signing the Statement are to be added: viz.—

Occupation (if any) _____
 Place of Abode *Woodmancote Rectory, Henfield, Sussex*
 Degree of Relationship (if any) } *Wife*
 or other circumstances of con- }
 nexion with the Patient ... }

¹ Name of Lunatic.

² Lunatic, or an idiot, or a person of unsound mind.

³ County or Borough.

* Fill in the blanks from the Statement.

COPY OF THE MEDICAL CERTIFICATE.

I, the undersigned, being a Physician in M.D. of the University
of Edinburgh and being in actual Practice as a Physician hereby Certify, that I,
 on the 23^d day of June at Woodmaule's
Rectory in the County of Dunlop

personally examined the Rev. Richard, Co. of Hales
insert evidence Rector of the Parish of Woodmaule
Professor and that the said Richard, Co. of Hales, residing at Woodmaule Rectory
 is a Person of unsound Mind, and a proper Person to be taken charge of and detained
 under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself—

a Confession that he had attempted
suicide by hanging himself, and
expressing regret that he had been cut down
and that he had not succeeded.—Further that at former
interviews he declared his intention to commit
suicide at the same time showing the marks
of a razor cut which he had begun on one occasion
and on another a rope mark

2. Other Facts (if any) indicating Insanity communicated to me by others—

M^r R. C. Hales told me he had threatened
to strike me over the head with a large
paten and did really thrust his bill
the end of it

(Signed) Richard Dill M.D.

Place of Abode 19 Regency Sq. Brighton

Dated this 25th day of June

One thousand eight hundred and eighty seven

COPY OF THE MEDICAL CERTIFICATE.

I, the undersigned, being a Licentiate of the Royal College of Physicians, Edinburgh
and a member of the Royal College of Surgeons, England
 and being in actual Practice as a Physician and Surgeon hereby Certify, that I,
 on the twenty third day of June 1857 at Woodmanste Rectory
 in the County of Surrey

Insert
Professor separately from any other Medical Practitioner
 personally examined Rev^d Richard Cox Hales of Woodmanste Rectory
Minister in Holy Orders and Rector of Woodmanste
 and that the said Rev^d Richard Cox Hales
 is a person of unsound mind and a proper Person to be taken charge of and detained
 under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself—

That he had on this day attempted suicide by hanging
and being called to him found him semi-conscious
His neck showing Abrasions and Adema.
He told me this was the nineteenth attempt and
very much regrets it was not successful.
On many occasions he has stated his intentions of
committing suicide

2. Other Facts (if any) indicating Insanity communicated to me by others—

M^{rs} R. C. Hales his wife — informs me on this
23rd June. She found him hanging and insensible and
cut him down. That he has also on many occasions
threatened to strike her with her, with anything in reach
Also he has attempted to set light to the window curtains

(Signed) Charles Francis Lewis

Place of Abode "Broomfields" Henfield
Surrey

Dated this twenty fifth day of June

One thousand eight hundred and seventy seven

PRIVATE PATIENT.

(25 & 26 Vict. c. 111, s. 28).

STATEMENT.

(a) After two clear days and before the expiration of seven clear days, from the admission of the patient.

I have this Day (a) seen and examined *Richard Cox Hales*

a Private Patient, received

on the *27th* day of *June* 1887

pursuant to an Order dated the *27th* day of

June 1887 and hereby Certify, that with

respect to Mental State he *suffers from Melancholia.*

He is dejected, takes a gloomy view of everything, centres his whole thought on himself and his troubles, which latter he exaggerates. He is restless, querulous and fidgety. He deeply feels of his impulses to suicide, and owns that at times he is dangerous to himself.

and that with respect to Bodily Health and Condition the former is apparently good, with the exception that he has a rupture of several years standing, and spasmodic retention of urine, of more recent date.

As to Bodily Condition: it is good - He has the remains of a severe supra-orbital contusion on the right side, this being the result of a fall sustained on his head out down. When found suspended and unconscious (referred to in the certificate).

(b) Medical proprietor, superintendent, or attendant of—

Signed, (b)

*Joint Medical Proprietor
of the Ticehurst Asylum*

Dated this

Second Day of *July*

One Thousand Eight Hundred and Eighty-Seven

6329/66 3/4

Dated Oct-8th 1887.

I hereby authorize and request you
to discharge my husband, Mr. Hales, from
your custody

Signed

To the D^r-herington.

Ada Y. Hales.

6329/66 4/4

Copy
8 & 9 Vict. c. 100.—Sched. (g) No. 2.

NOTICE OF DISCHARGE.

I Herby Give you Notice, That *M^r. Richard Cox Hales*
a Private Patient received into this House on the *27th* day of *June*
18*87*, was discharged therefrom *Recovered* by the authority of
M^{rs} Hales (His wife)
on the *8th* day of *October* 18*87*.

Signed *H. Hayer Hewinfor*
Joint Medical Proprietor of The Ticehurst Asylum.

Dated this *Eighth* day of *October* One
Thousand Eight Hundred and *Eighty-seven*

To

Revnd Richard Cox
Hales.

Admitted June 24th
1887.

No. 566

NOTICE OF ADMISSION.

*To be forwarded to the Commissioners in Lunacy within one clear day
from the Patient's reception.*

I hereby give you Notice, That

(e) House or hospital.

was admitted into this (a)

as a Private Patient, on the

Day of

188, and I hereby

transmit a Copy of the Order and Medical Certificates on which he was received (b).

(b) If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.

Signed,

Dated this

day of

One Thousand Eight Hundred and Eighty

To the Commissioners in Lunacy.

Lunatics 1.
(14 & 17 Vlot. e. 9³, Sched. C.
s. 24.)

(25 & 26 Viet. c. 111.)

Private Patient.

LONDON
SHAW AND SONS,
Fetter Lane.

(154 T.D.B. = 7.8) $\times$

Name	When Admitted	No. in Register
...	...	...

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A.) No. 1. Sects. 4, 8.

I, the undersigned, hereby request you to receive Josiah Brown Pearson

whom I last saw at 62 Brunswick Gardens

(a) Within one month previous to the date of the order.

(b) Lunatic, or an idiot, or a person of unsound mind.

on the thirteenth day of July 1887 (c)

a (b) person of unsound mind, as a Patient into your House.

Subjoined is a Statement respecting the said Josiah Brown Pearson

Signed, Name, Ellen Pearson

Occupation (if any), —

Place of Abode Carlton-on-Trent, Newark.

Degree of Relationship (if any), or other circumstances of connection with the Patient. } Wife

Dated this thirteenth day of July 1887

One Thousand Eight Hundred and Eighty seven

(c) Proprietor or superintendent of

To (c) Jr Herbert Newington
Ticehurst.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length. } Josiah Brown Pearson
Sex and Age. } Male aged 47.
Married, Single, or Widowed. } Married
Condition of Life, and previous Occupation (if any) } Lord Bishop of Newcastle New South Wales.
Religious Persuasion, as far as known } Church of England
Previous Place of Abode } Morpeth New South Wales
Whether First Attack } Yes.
Age (if known) on First Attack } 47
When and where previously under Care and Treatment } —

Duration of existing Attack } Seven months
Supposed Cause } Anxiety and overwork in a hot climate

Whether subject to Epilepsy } Not subject.
Whether Suicidal } Cannot positively say whether or no.
Whether Dangerous to others. } No.

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition. } No

Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners. } —

Name and Address of Relative to whom Notice of Death to be sent } Ellen Pearson, Carlton-on-Trent, Newark

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (c) Ellen Pearson

Occupation (if any), —

Place of Abode, Carlton-on-Trent Newark

Degree of Relationship (if any), or other circumstances of connection with the Patient. } Wife

I, the undersigned, *George Deeding Blandford*
being a (a) *Member of the M.C. of Physicians London*

(a) Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

and being in actual practice as a (b) *Physician*

(b) Physician, surgeon, or apothecary, as the case may be

hereby certify, that I, on the *tenth* Day of *July* 1887

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) *62 Sunnyside Gardens S.W.*

in the County of *Middlesex* separately from any other Medical Practitioner

personally examined *The Right-Rev Josiah Brown Pearson D.D.*

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) *Morpeth N.S. Wales Bishop of Newcastle N.S. Wales* and that

the said *Josiah Brown Pearson* is

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) *person of unsound mind* and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) *He is in a state of great mental depression & thinks that some terrible calamity is about to befall him & his wife & that there is no hope whatever for them. Thinks that it would be a good thing if they were both out of the world. Admits that he has wished to give himself up to justice for crimes he thinks he has committed*

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

His friend the Rev. A. MacLaren of West Hamland N.S. Wales tells me that the Bishop has been under delusions for the last six months, that on board ship he has been going down on his knees to the passengers, wishing to give himself up to them. That he thinks his wife is going to be tortured & her eyes put out

Signed, Name, *G. Deeding Blandford*

Place of Abode, *71 Grosvenor Street W*

Dated this *eleventh* Day of *July* One Thousand Eight

Hundred and Eighty *1887*

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, *Frederic Norton Manning*

(a) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) *Doctor of Medicine of Students & Member of the Royal College of Surgeons of London*

and being in actual practice as a (b) *Consulting Physician*

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I, on the *Eleventh* Day of *July* 1887

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) *62 Emismore Gardens Kensington*

in the County of *Middlesex*

separately from any other Medical Practitioner

personally examined *Josiah Brown Pearson*

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) *Morpeth New South Wales Bishop of Newcastle in N.S.W.*

and that

the said *Josiah Brown Pearson*

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) *person of unsound mind* and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

- 1st He imagines that he has committed some grievous offence against the Church & acts immorally whereas he has led a most moral life & is held in universal respect.
- 2nd He ~~has delusions~~ thinks that a conspiracy has been entered into to harm his wife & take her away from him, & wishes to destroy her to save her from persecution.
- 3rd Tho' a man of great intellectual power he is unable to occupy himself in reading or to understand what he reads, his mind as he says being occupied entirely with his troubles.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

He has been quite unable to occupy himself in business work for 7 months. Throws himself at the feet of strangers & begs them to save him, imagines that the police are always after him to take him for crimes he has committed & requires constant watching to prevent him doing some harm to himself. This information was given by Mr Pearson his wife & the Rev. A. A. Mackenzie the Bishop's Chaplain.

Signed, Name, *Frederic Norton Manning M.D.*

Place of abode, *63 Wozou St May Fair & Sney New South Wales.*

Dated this *Eleventh* Day of *July*

One Thousand Eight

Hundred and Eighty *Seven*

Wms

PRIVATE PATIENT.

(25 & 26 Vict. c. 111, s. 28).

STATEMENT.

(a) After two clear days
and before the expiration of
seven clear days, from the ad-
mission of the patient.

I have this Day (a) seen and examined *Isiah Brown, Pearson*

a Private Patient, received

on the

13th

day of

July

188 *7*

pursuant to an Order dated the

13th

day of

July

188 *7*

and hereby Certify, that with

respect to Mental State he

suffers from mania

melancholia. He is gloomy & dejected in appearance somewhat lost and slow in answering questions. He says that he is a wretched case - by his own deed. He is in great fear that evil will happen to his wife, and he has told me that he regrets he did not ~~kill~~ ^{accept} the opportunity offered of taking his own life, and that of his wife. The reason for the latter is that he would rather "have her meet her God than man."

Physical health - apparently good - except that his digestive apparatus is out of order

Condition very good

(b) Medical proprietor or
superintendent, or attendant
of —

Signed, (b)

W.D.

*Joint Medical Proprietor
of the Ticehurst Asylum*

Dated this

Eighteenth Day of *July*

One Thousand Eight Hundred and Eighty - *Seven*

6329/69 3/3

This Patient is stated by Dr. Newington to be very suicidal.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., cap. 96, § 20.

CONSENT.

We, the undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the *24th* day of *September* 188*8*, of *The Right Revd Josiah Brown Pearson D.D.* a Private Patient in *Licchurst Asylum House, Licchurst,* to *the Manchester Royal Lunatic Hospital, Cheadle.*

Given under our hands this *8th* day of *September* in the year of Our Lord One Thousand Eight Hundred and Eighty-eight.

J. S. Bapst
W. E. Fene.

Commissioners
in
Lunacy.

ORDER.

I, *Ellen Pearson* the undersigned,
having Authority to discharge *The Right Revd Josiah Brown Pearson D.D.* a Private
Patient in *Licchurst Asylum House, Licchurst,*
hereby order and direct that the said *Right Revd Josiah Brown Pearson D.D.*
be removed therefrom to *the Manchester Royal Lunatic Hospital, Cheadle.*

Given under my hand this *9th* day of *September* in the year of Our Lord One Thousand Eight Hundred and Eighty-eight.

(Signed) *Ellen Pearson*
Place of Abode *Carlton on Trent*
Newark

* NOTE. This order must be signed and dated subsequently to the consent of the Commissioners; and it must be signed by—

1. The person who signed the order for the Patient's admission;
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband* or *Wife* of the patient;
3. If there be no Husband or Wife, then by the Patient's *Father*;
4. If there be no Father, then by the Patient's *Mother*;
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*; or by the person who made the last payment on the Patient's account.

Josiah Brown
Pearson.

Admitted. July 13^t
1887.

No. 567.

NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day from the Patient's reception.

I hereby give you Notice, That _____

(a) House or hospital

was admitted into this (a) _____ as a Private Patient, on the

_____ day of _____ 188 , and I hereby

transmit a Copy of the Order and Medical Certificates on which he was received

(b) If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.

(b)

Signed, _____

(c) Superintendent or proprietor of—

(c) _____

Dated this _____ day of _____

One Thousand Eight Hundred and Eighty _____

To the Commissioners in Lunacy.

**ORDER
FOR THE RECEPTION OF A PRIVATE PATIENT.**

Sched. (A.) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Constance Elizabeth Owen

whom I last saw at Titchhurst
on the 1st day of November (a)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (b) person of unsound mind as a Patient into your House. Constance Elizabeth Owen
Subjoined is a Statement respecting the said Constance Elizabeth Owen

Signed, Name P. H. Owen
Occupation (if any), Clerk in Holy Orders
Place of Abode, Owslebury near Winchester
Degree of Relationship (if any) or other circumstances of connection with the Patient. Husband

Dated this 1st day of November
One Thousand Eight Hundred and Eighty Seven

To the DRS. NEWINGTON,
Proprietors of the Titchhurst Establishment.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length } Constance Elizabeth Owen
Sex and Age } Female - thirty two
Married, Single, or Widowed } married
Condition of Life, and previous Occupation }
(if any) }
Religious Persuasion, as far as known } Church of England
Previous Place of Abode } Owslebury near Winchester.
Whether First Attack } No
Age (if known) on First Attack } 29
When and where previously under Care and Treatment } In 1884 at the Drs. Newington
Duration of existing Attack } Since Aug 9th of this year
Supposed Cause } former attacks
Whether subject to Epilepsy } no
Whether Suicidal } not at all
Whether Dangerous to others } no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition } no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners }
Name and Address of Relative to whom Notice of Death to be sent } Rev. P. H. Owen, Owslebury, Winchester

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (c) P. H. Owen
Occupation (if any), Clerk in Holy Orders
Place of Abode, Owslebury near Winchester
Degree of Relationship (if any), or other circumstances of connection with the Patient. Husband

MEDICAL CERTIFICATE,—Schedule (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, John Taylor

being a (a) The Member of the Royal College of Surgeons England

and being in actual practise as a (b) Surgeon

hereby certify, that I, on the 3rd day of November

at (c) The Vicarage, Titchhurst

in the County of Surrey separately from any other Medical Practitioner

personally examined Mrs. Constance Elizabeth Owen

of (d) Orosbury Vicarage, Winchester and that

the said Mrs. Constance Elizabeth Owen

is a (e) Person of unsound mind and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself :—

(f) Here state the facts.

(f) She has a vacant Expression. I never lost -
rambles in her conversation - is unable to collect her
thoughts so as to answer questions rationally -
Prays to Jesus Christ to deliver her from these
Evils.

2.—Other facts (if any) indicating Insanity communicated to me by others :

(g) Here state the information, and from whom.

(g) Caroline Taylor her attendant says that she
Mrs. Constance Elizabeth Owen sits without taking heed
of anything about her - roams about her room
without reason - is sometimes excited and if
interfered with will resist with violence

Signed, Name, John Taylor

Place of Abode, Titchhurst - Surrey

Dated this 3rd day of November One Thousand Eight

Hundred and Eighty Seven

MEDICAL CERTIFICATE,—Schedule (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Robert White Esq
being a (a) Member of the Royal College of Surgeons of England

and being in actual practice as a (b) Physician Surgeon

hereby certify, that I, on the 4th day of November 1884

at (c) The Vineyard Titchmarsh

in the County of Lincoln separately from any other Medical Practitioner

personally examined M^{rs} Constance Elizabeth Owen

of (d) Orchardbury Vicarage Wth Winchester and that

the said M^{rs} Constance Elizabeth Owen

is a (e) person of unsound mind and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself :—

(f) Here state the facts.

(f) She stands up in the bed & says God is talking to her
she has a very vacant air, takes a long while before
answering, says I am a Jew & God has sent
her to take care of me, calls things different names, says
her husband is Maurice &c.

2.—Other facts (if any) indicating Insanity communicated to me by others :

(g) Here state the information, and from whom.

(g) Caroline Payne her attendant says that M^{rs} Constance Elizabeth Owen
is always talking in a far from rational way about religion
is constantly trying to get out of bed & standing up on
the bed for no reason, throws herself down when out walking
at other times tries to run away, very excited & talks
in a meaningless way, imagines she sees all sorts of objects
which do not exist

Signed, Name, William Robert White Esq

Place of Abode, Wellman Woodhouse Surgery

Dated this 4th day of Nov One Thousand Eight

Hundred and Eighty Seven

Ticehurst

Nov^r 2^d 1857

In ^{the} ~~the~~ reference to the accompanying Notice of
 the Admission of Mrs C. E. Owen as a
 patient into this Asylum, we beg to inform the
 Commissioners in lunacy that she has been
 residing herein as a Voluntary Boarder ~~by~~ with
 the usual permission of two ^{of the} Visitors.

As she has become ~~more~~ and very insane,
 we communicated with her husband, requesting
 him to come here to see her with a view to the
 patient being placed under certificates. This
 has been done.

I am yours^{tr} &c &c

W. A. 2.

6329/68 3/3

Brosbury Vicarage
Winchester

June 26. 1888

Dear Dr. Newington

As the necessity
for Mrs Owen remaining
under your care no
longer exists, I should
be obliged if you
would relinquish your
charge of her at an
early date:

I am

Very truly

P. A. Owen

6329/68 3/3

8 & 9 Vict. c. 100.—Sched. (g) No. 2.

Copy

NOTICE OF DISCHARGE.

I Herby Give you Notice, That *Constance Elizabeth Owen*
a Private Patient received into this House on the *4th* day of *November*
18*87*, was discharged therefrom *Relieved* by the authority of
Geo F. H. Owen
on the *2nd* day of *July* 18 *88*.

Signed *G. F. H. Owen*
Joint Medical Proprietor of The Ticehurst Asylum.

Dated this *Second* day of *July* One
Thousand Eight Hundred and *Eighty-Eight*

To

Auer, Constance
Elisabeth

Admitted Nov. 4th 1888.

No. 568-

NOTICE OF ADMISSION.

To be transmitted within ONE CLEAR DAY from the
day of the Patient's Reception.

I hereby give you Notice, That _____

(a) House or hospital. was admitted into this (a) _____ as a Private Patient, on the
_____ day of _____ 18____, and I hereby
transmit a Copy of the Order and Medical Certificates on which he was

*(b) If a private patient be
received upon one certificate
only, the special circum-
stances which have prevented
the patient from being ex-
amined by two medical prac-
titioners to be here stated,
as in the statement accom-
panying the order for admis-
sion.*

received (b) _____

Signed, _____

(c) Superintendent or
proprietor of _____

(c) _____

(d) Full address.

(d) _____

Dated this _____ day of _____
One Thousand Eight Hundred and _____

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, Sched. C
§ 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane, E.C.

**ORDER
FOR THE RECEPTION OF A PRIVATE PATIENT.**
Sched. (A.) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Emily Norris

whom I last saw at St Margaret's - London
on the 22nd day of December 1887 (*)
a (*) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said Emily Norris

Signed, Name, Carlton J. R. Carr
Occupation (if any), British Square of the same
Place of Abode, St Margaret's - London
Degree of Relationship (if any) or other circumstances of connection with the Patient, Paternal uncle
Dated this 22nd day of Decr

One Thousand Eight Hundred and eighty seven

To the Registrar
(*) Richmond Asylum (*) Richmond

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name and length..... Emily Norris
Sex and Age..... Female 47
Married, Single, or Widowed..... Single
Condition of Life, and previous Occupation (if any)..... None
Religious Persuasion, as far as known..... English Catholic
Previous Place of Abode..... Westminster
Whether First Attack..... Second attack
Age (if known) on First Attack..... 41
When and where previously under Care and Treatment..... near home with her own family
Duration of existing Attack..... One month
Supposed Cause..... Exhaustion from her own Sister's illness & death
Whether subject to Epilepsy..... No
Whether Suicidal..... Yes
Whether Dangerous to others..... No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition..... Not under certificate
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners..... None
Name and Address of Relative to whom Notice of Death to be sent..... S. P. Norris Esq. Barley Lodge Park Road Brompton

Signed, Name, (*) Carlton J. R. Carr
Occupation (if any), British Square of the same
Place of Abode, St Margaret's - London
Degree of Relationship (if any), or other circumstances of connection with the Patient, Paternal uncle

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Robert James Wilson
being a (a) Fellow of the Royal College of Physicians
in Edinburgh

and being in actual practice as a (b) Physician
hereby certify, that I, on the Twenty first day of December 1887

at (c) 57 West Hill, St Leonards-on-sea
in the County of Sussex separately from any other Medical Practitioner,
personally examined Emily Norris (Sister being present)

of (d) 57 West Hill, St Leonards-on-sea and that
the said Emily Norris

is a (e) Person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz:—

(f) More date the facts.
1. Facts indicating Insanity observed by myself (f) first despondency - before she is so simple that for long not help her insomnia - looks like one afflicted by melancholia.

(g) More state the information, and from whom.
2. Other facts (if any) indicating Insanity communicated to me by others (g) N. J. W. Suicidal - This informed me this morning that the nurse in charge had great difficulty on the evening of Saturday the 17th Decr in preventing the patient from jumping off the parade into the sea.

Signed, Name Robert James Wilson
Place of Abode, Warwick Square & Leamington
Dated this Twenty first day of December One Thousand Eight Hundred and Eighty seven

* State which College

MEDICAL CERTIFICATE, — Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

* I, the undersigned, Richard Douglas Powell M.D.

(a) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon or apothecary, *ex. gra.* — Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Fellow of the Royal College of Physicians of London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Physician

(c) Here insert the street and number of the house (if any) or other like particulars.

hereby certify, that I, on the 22^d day of December

at (c) 82 Margaret Street W.

in the County of Middlesex separately from any other Medical Practitioner,

personally examined Emily Norris (Sister Mary Rachel)

(d) Insert residence and profession or occupation (if any) of the patient.

of (d) 82 Margaret St W. and that

the said Emily Norris

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of unsound mind and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

- (1) I find her distressed in mind & incessantly stating that she has sinned hopelessly and cannot be forgiven by God
- (2) She states that she by her wickedness has caused the death of her sister
- (3) Her expression and manner are those of melancholic depression amounting to insanity

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Mary Tuck nurse in attendance upon patient

Constantly reverting to her "sin" & "wickedness"

For names of Informant,

Walking with the Nurse on a rough day 16th Dec by the sea at St Leonards
forecast the storm & the wrecks likely to follow were due to
her wickedness & tried to escape from the nurse to throw
herself into the sea to allay the storm

Signed, Name, R. Douglas Powell M.D.

Place of Abode, 62 Wimpole Street

Dated this 22^d day of December One Thousand Eight

Hundred and eighty seven

Copy

PRIVATE PATIENT.

(25 & 26 Vict. c. 111, s. 28).

STATEMENT.

(a) After two clear days and before the expiration of seven clear days, from the admission of the patient.

I have this Day (a) seen and examined *Mrs Emily Norris*

a Private Patient, received

on the *Twentysecond* day of *December* 188*7*
pursuant to an Order dated the *Twentysecond* day of

December 188*7* and hereby Certify, that with respect to Mental State she is suffering from melancholia with a suicidal tendency & insomnia.

and that with respect to Bodily Health and Condition she is in fairly good health & Condition though naturally somewhat spare.

(b) Medical proprietor or superintendent, or attendant of —.

Signed, (b) *A. S. Newington*
Joint Medical Proprietor of
Lichfield Asylum

Dated this

Day of *December*

One Thousand Eight Hundred and Eighty *seven*.

Miss Emily Norris

Medical Return

Dec. 26th 1887



HARRISON & SONS, London.

POST OFFICE TELEGRAPHS.

No. of Message.....

Dated Stamp of.



If the accuracy of an Inland Telegram be doubted, the telegram will be repeated on payment of half the amount originally paid for its transmission, any fraction of 1d. less than $\frac{1}{2}$ d. being reckoned as $\frac{1}{2}$ d.; and if it be found that there was any inaccuracy, the amount paid for repetition will be refunded. Special conditions are applicable to the repetition of Foreign Telegrams.

N.B.—This Form must accompany any inquiry made respecting this Telegram.

Charges to pay £.....s.....d.

Delivering Office.

Handed
in at the

Bournemouth

Office at

4 50/6

Received
here at

5 5/6

TO { B. Newington Litchurch

to You may discharge my Sister
day Morris

6329/69 3/3

6329/69 3/3

Copy
8 & 9 Vict. c. 100.—Sched. (g) No. 2.

NOTICE OF DISCHARGE.

I Herby Give you Notice, That *Miss Emily Harris*
a Private Patient received into this House on the *22nd* day of *December*
18 *87*, was discharged therefrom *Recovered* by the authority of
M^r D. D. Harris (Her Brother)
on the *16th* day of *February* 18 *88*.

Signed *A. S. Newington*
Joint Medical Proprietor of The Ticehurst Asylum.

Dated this *Seventeenth* day of *February* One
Thousand Eight Hundred and *Eighty Eight*

To

Emily Morris.

Admitted Dec ⁶⁰ 22nd
1887-

No. 569.