Sheriff's Warrants

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20 & 21 *Vict., Cap.* 71, *Sect.* 37.

NOTICE OF ADMISSION.

I HEREBY GIVE NOTICE, That (1)
was received into this House as a (2)
Patient on the (3) day of
and I hereby transmit a Copy of the Order and Medical Certificates and Statement on which he was received.

Subjoined is a Report with respect to the mental and bodily condition of the above-named Patient.

(SIGNED) _____ *Superintendent.*

DATED at this (4) day of
one thousand eight hundred and

To the Secretary of the
General Board of Lunacy.

REPORT.

I HAVE this day (4) seen and personally examined
the Patient named in the above Notice,
and hereby report and certify, with respect to mental state, that (5)

and with respect to bodily health and condition, that (6)

(SIGNED) _____

(7) _____

DATED this day of one thousand eight hundred and

---

(1) Name and Designation.
(2) Private or Pauper.
(3) Some day within fourteen days after the date of the Order of the Sheriff; or within twenty-one days, if the Order be granted by the Sheriff of Orkney and Shetland.
(4) Some day not less than two clear days after the admission of the Patient, and before the expiration of fourteen clear days after admission.
(5) Insert particulars.
(6) Insert particulars.
(7) Add Designation.

Lunacy Board.—Dec.—37.—1200.

Joseph Robertson
1st January 1860.

(~~Copies.~~)

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of John Copland, Inspector of Poor Kirkgunzeon humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Joseph Robson, your Petitioners pe is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Joseph Robson to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Copland

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 1st (3) day of January one thousand eight hundred and sixty six years

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Joseph Robson
2. Sex and Age,	— 46 years
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	Farm Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Brownhill Kirkgunzeon
7. Place where Found and Examined,	at home, examined in Dumfries
8. Length of time Insane,	About eight months
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	About eight months
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkgunzeon
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Ann Robson Sister, Brownhill Kirkgunzeon A Brother died insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* John Copland

DATED this 1st day of January one thousand eight hundred and sixty s

* To be Signed by the Party applying.

(Empire)

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Alexander Arthur M.D.
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician at Dumfries
hereby certify, on soul and conscience, that I have this day, at (3) 13 Broadmeadow
in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Joseph Robson a Pauper
from Broomhill Lunatic Asylum
and that
the said Joseph Robson is a (5) Person of Weak
and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Has the look of a
person of weak intellect & unsound mind, and
talks in a foolish manner upon any subject
introduced

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
John Cossland the Inspector of Poor states that he
cannot be left home wandering from home, and during
night, that he has threatened to take poison

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

(SIGNED) *Name and Medical Designation,* Alex Arthur M.D.

Place of Abode, Dumfries

DATED this 10th day of January One thousand eight hundred and Sixty Six Years.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, John Dickson.
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Breadalbane
in the County of
Street Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Joseph Robson a Pauper
from Broomhill Lunatic Asylum
and that
the said Joseph Robson is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He is of
weak intellect generally; talks foolishly;
is given to wander.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
John Cossland Inspector of Poor informs
me that he has frequently threatened suicide
by poison, drowning &c

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

(SIGNED) *Name and Medical Designation,* John Dickson M.D.

Place of Abode Breadalbane Street

DATED this 10th day of January one thousand eight hundred and Sixty Six.

(*Copies.*)

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of one thousand eight hundred and

(1) Lunatic, or an Insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Andrew Barrie Esqre (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Copland
Inspector of Poor Kirkpatrick
Certificates under the hands of Alexander Borthwick
and John Dickson , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Joseph Robson Farm Servant, Brownhill a pauper, and that the said
Joseph Robson is a (5) person of unsound
mind and a Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Joseph Robson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize
his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Joseph
Robson which accompanied the said Petition.

RS

(SIGNED) A Barrie

DATED this First day of January one thousand eight hundred and Sixty Six

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) ~~Sheriff~~ ~~Steward~~ of ~~the~~ (2) Stewartry Wigtown and ~~his~~ Kirkcudbright and his Substitutes for the Stewartry of ~~Kirkcudbright~~. The Petition of ~~Inspector of Poor Minnigaff~~ William Henry Inspector of Poor Minnigaff residing at Inspector of Poor for parish of Minnigaff in the Stewartry

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Goudie your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Goudie to the Southern Co. Asylum, Dumfries and to sanction his admission into the said Asylum.

(3) State Pauper, Private Patient, or Patient boarded at home, as the case may be.

~~Two words deleted~~ William Henry Inspector of Poor
~~of Parish of Minnigaff~~

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Second (4) day of January One thousand eight hundred and Sixty Six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Thomas Goudie
2. Sex and Age,	Male ; about 38 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Shepherd
5. Religious Persuasion, so far as known,	Reformed Presbyterian
6. Previous Place of Abode,	High Minniwick
7. Place where Found and Examined,	Minniwick in Minnigaff Parish
8. Length of time Insane,	4 days
9. Whether first attack,	Not first attack.
10. Age (if known) on first Attack,	About 30 years
11. When and where previously under Examination and Treatment,	Placed under restraint in his own house
12. Duration of existing Attack,	4 days
13. Supposed Cause,	No Cause
14. Whether subject to Epilepsy,	Not subject to Epilepsy
15. Whether Suicidal,	His Father Committed suicide & he fears he may do the same
16. Whether Dangerous to others,	He is dangerous to others
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Minnigaff Parish
18. Date of becoming Chargeable,	1st January 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	None Relatives Known to Petioner His father Committed suicide
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Second day of January One thousand eight hundred and Sixty Six

(*To be signed by Party applying*) William Henry
Inspector of Poor
Minnigaff

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

I, the undersigned, James Clark

being a (1) Licentiate of the Faculty of Physicians and Surgeons Glasgow.

and being in actual practice as a (2) Surgeon.

hereby certify, on soul and conscience, that I have this day, at (3) Muiniwirk in the County of

Baygrennan. Muiniwirk Kirkcudbright separately from any other Medical Practitioner,

visited and personally examined (4) Thomas Gordie — and that

the said Thomas Gordie is a (5) person

of unsound mind and a proper person to be detained

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

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He thinks himself like a child; believes that he is a prophet that the resurrection is at hand. At one time he is cheerful and at others depressed and anxious about his religious state —

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

James Brown, Plowman — { That he is violently excited at times; he fears that he will do injury to some one, and closes his attendants to restrain him —

Name and Medical Designation, James Clark, Surgeon.

Place of Abode, New Stewart.

DATED this First day of January One thousand eight hundred and Sixty Six —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Fergus M'Kinnon

being a (1) Licentiate of the Faculty of Physicians & Surgeons of Glasgow

and being in actual practice as a (2) Surgeon

hereby certify, on soul and conscience, that I have this day, at (3) Muiniwirk in the County of

Baygrennan Muiniwirk Kirkcudbright separately from any other Medical Practitioner,

visited and personally examined (4) Thomas Gordie and that

the said Thomas Gordie is a (5) person

of unsound mind and a proper person to be detained

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

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

He believes he is a prophet sent by God to raise the dead from their graves & that the resurrection is at hand.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Stat. whether any other supervening fact

Name and Medical Designation, Fergus M'Kinnon Phys

Place of Abode, New Stewart

DATED this First day of January One thousand eight hundred and Sixty Six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(5) State medical qualification. (7) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar Jun. (1) Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) William Henry Certificates under the hands of James Clark and Fergus McKinnon, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Thomas Gordie and that the said Thomas Gordie is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Gordie as a Patient into the (6) Dumfries Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Gordie which accompanied the said Petition.

DATED this third day of January One thousand eight hundred and Sixty three

W H Dunbar

To the Superintendent of the (7) Dumfries Lunatic
Asylum of Dumfries.

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

✓ $\frac{1}{170}$

Thomas Gondie

Jan 7 3. 1866.

55

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned, the Mother of the Patient, being desirous to transfer James Galloway Junior, my son, at present a Patient in the Glasgow Royal Lunatic Asylum, and (¹) whose nearest known relative I am from the said Asylum to the Southern Counties Asylum Dumfries, hereby request the authority of the Board to such transfer; and I subjoin a Statement of Particulars regarding the said James Galloway Junr. and a Medical Certificate with respect to his mental and bodily condition.

(¹) *If Lunatic is not a Pauper:* detained at my instance, *or* whose nearest known relative I am. *If Lunatic is a Pauper:* a Pauper Lunatic of the Parish of which I am Inspector of Poor.

Elizabeth Galloway

Glasgow (²) Mother of Patient

(²) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED at ~~twenty-ninth~~ this 29 day of December, One thousand eight hundred and sixty-five.

STATEMENT.

1. Christian Name and Surname of Patient at length,	James Galloway, Junior.
2. Sex and Age,	Male – 30 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and Previous Occupation (if any),	Son of a Parochial Schoolmaster
5. Religious Persuasion, so far as known,	Church of Scotland
6. Date of Admission into Asylum,	3rd. March 1857.
7. Length of time Insane,	upwards of nine years
8. Whether first Attack,	First attack
9. Age (if known) on first Attack,	about 20. years
10. Duration of existing Attack,	upwards of ten years
11. Supposed Cause,	Unknown
12. Whether subject to Epilepsy,	No
13. Whether Suicidal,	No
14. Whether Dangerous to others,	Very seldom.
15. Parish to which the Lunatic (if a Pauper) is Chargeable,	–
16. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of Family known to be, or to have been Insane,	His father James Galloway Junr. Teacher Mollinsburn

I certify that, to the best of my knowledge, the above particulars are correctly stated.

(*To be signed by the Applicant*) Elizabeth Galloway

DATED this 29th day of December, One thousand eight hundred and 65.

N.B.—The foregoing particulars are required for the information of the authorities to whose care the Patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned Alexander MacKinlay M.D. being (1) a Licentiate of the Faculty of Physicians & Surgeons of Glasgow hereby certify that I have this day at (2) the Glasgow Royal Asylum Gartnavel personally examined James Galloway, Junr. at present a Patient in said Asylum, and with respect to his Mental State that he is incoherent

; and with respect to his Bodily Health and Condition that they are tolerably good -

and I further certify that, in my opinion, there is nothing in the Mental or Bodily Condition of the Patient to contraindicate removal to the Asylum of Dumfries the Southern Counties.

MacKinlay M.D.

DATED this twenty-ninth day of December One thousand eight hundred and sixty-five -

(1) State Medical Qualification.
(2) Name Asylum.

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

Application having been made to the Board by (1) Mrs Elizabeth Galloway. to authorize the transfer of James Galloway Jr from Glasgow Royal Asylum to Southern Counties Asylum Dumfries and the Board having considered such application and the accompanying Medical Certificate, do hereby authorize the transfer of the said James Galloway Jr as requested.

James Cox Commissioner.

DATED at Edinburgh, this 31st day of December One thousand eight hundred and Sixty six

(1) Insert at whose instance the Lunatic is detained, or the nearest known Relative of the Lunatic, or the Inspector of the Parish by which the expense of the maintenance of the Lunatic is defrayed.

1/171
James Galloway
8/1/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) ~~Stewartry~~ Shire of Dumfries ~~Kirkcudbright~~ *and his Substitutes,*—

The Petition of Samuel Crocket, joiner, Lochfoot humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Crocket your Petitioner's (3) Wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Crocket to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Samuel Crocket

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 18th (4) day of January One thousand eight hundred and ~~sixty~~ sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Styelop Crocket
2. Sex and Age,	Female 33
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Joiner's Wife
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Lochfoot
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	~~& fortnight~~ 6 Years
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	27
11. When and where previously under Examination and Treatment,	In the Southern Counties Asylum
12. Duration of existing Attack,	A fortnight
13. Supposed Cause,	None can be assigned
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Has threatened suicide once
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Robert Styelop Farmer Boreland Colvend No
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 18th day of January One thousand eight hundred and sixty six

(*To be signed by Party applying*) Samuel Crocket

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) 20 Buccleuch Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Agnes Hyslop Crocket Joiners Wife and that the said Agnes Hyslop Crocket is a (5) insane person and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is excited and labouring under delusions that her husband is plotting against her and that her neighbours & relations are disposed to injure her. She is restless & disposed to wander

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband informs me that she has threatened violence to himself and the children. She has previously been in the Southern Counties Asylum, & also under restraint in America

Name and Medical Designation, John Dickson MD

Place of Abode, 20 Buccleuch St Dumfries

DATED this 18th day of January One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any); or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, J. Gilbert MD being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Agnes Hyslop Crocket Joiners wife Lockfoot and that the said Agnes Hyslop Crocket is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is restless and excited and labouring under delusions. Believes herself betrayed and persecuted

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Has offered violence to her husband and children Has been before under treatment in S. E. Asylum

Name and Medical Designation, J. Gilbert MD

Place of Abode, Crichton Nouns Dumfries

DATED this 19th day of January One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson Md being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) 20 Buccleuch St in the County of Dumfries, seen and personally examined Agnes Hyslop Crocket, Jones Wife, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

th John Dickson MD

DATED this 18 day of January One thousand eight hundred and sixty six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Stewart Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Samuel Crocket Farmer Lochfoot (Wayland), Certificates under the hands of John Dickson and James Gilchrist, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Hyslop Crocket Lochfoot and that the said Agnes Hyslop Crocket is an (5) ~~person of unsound mind~~ insane person and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Hyslop Crocket as a Patient into the (6) Public Asylum of Southern Counties and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Hyslop Crocket which accompanied the said Petition. ~~four words delete~~

DATED this Nineth day of January One thousand eight hundred and sixty six

Wm Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/172

Agnes Hyslop Crocket.

18/1/66.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form **A**]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sherriff *of the* (2) County *of* Lanarkshire *and his Substitutes,—*

The Petition of Ewing Cameron — Clerk 6 Oswald Street — Glasgow — son of the Patient — humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mr Daniel Allan Cameron your Petitioner's (3) Father — residing at 111 Hill Street — Garnet Hill Glasgow is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mr Daniel Allan Cameron to the Crichton Institution, Dumfries and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Ewing Cameron

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Twentieth (4) day of January One thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Daniel Allan Cameron
2. Sex and Age,	Male — Fifty nine years
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	Surgeon Dentist
5. Religious Persuasion, so far as known,	Baptist
6. Previous Place of Abode,	111 Hill St. Glasgow
7. Place where Found and Examined,	do do
8. Length of time Insane,	about twenty two years
9. Whether first attack,	No
10. Age (if known) on first Attack,	about Forty seven years
11. When and where previously under Examination and Treatment,	Gartnavel & Longdales Institutions — near Glasgow
12. Duration of existing Attack,	Been worse for about a month
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	Not aware
15. Whether Suicidal,	Family apprehensive
16. Whether Dangerous to others,	do
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	None —
18. Date of becoming Chargeable,	None —
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Margaret Fisher Cameron — Wife — residing at 111 Hill Street — Garnet Hill Glasgow None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twentieth day of January One thousand eight hundred and sixty six

(*To be signed by Party applying*) Ewing Cameron

P. p.

MEDICAL CERTIFICATE, No. I.

(1) Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a Pauper state so.

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

I, the undersigned, being a (1)

and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) 111 Bell Street, Glasgow — in the County of Lanarkshire — separately from any other Medical Practitioner, visited and personally examined (4) Mr. Daniel allan Cameron 111 Bell Street - Glasgow — and that the said Mr. Daniel allan Cameron is a (5) person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) State the facts.

1. Facts indicating Insanity observed by myself: (6) I have attended him during his illness - he made two attempts at suicide - once by a wound at the bend of arm - the other by taking arsenic - He believes he has numerous enemies who are plotting against him to do him hurt & among these includes many of his best friends - letters on this subject - has met many to myself - sometimes accosting but more frequently hugging me to protect him - This Mr Cameron at the time he wrote these letters seen - His family think their interests in danger from him -

(7) State the information, and from whom derived.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Andrew Buchanan M.D.

Place of Abode, 4 Athole Place Glasgow

DATED this Twentieth day of January One thousand eight hundred and Sixty six —

MEDICAL CERTIFICATE, No. II.

(1) Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street, and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a pauper state so.

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

I, the undersigned, John Gibson Fleming being a (1) Fellow of the Faculty of Physicians & Surgeons and being in actual practice as a (2) Consulting Medical Practitioner hereby certify, on soul and conscience, that I have this day, at (3) 111 Bell Street, Glasgow — in the County of Lanarkshire — separately from any other Medical Practitioner, visited and personally examined (4) Mr. Daniel allan Cameron 111 Bell Street - Glasgow — and that the said Mr. Daniel allan Cameron is a (5) person of unsound mind — and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) State the facts.

1. Facts indicating Insanity observed by myself: (6) as above, also that there are plots against him by his friends & that the public have treated his preposterous merits most ungratefully - desires recent outrages

(7) State the information, and from whom derived.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The circumstances mentioned above by Dr Buchanan, and his wife mentions that she & the family are in constant dread of bodily danger

Name and Medical Designation, J. G. Fleming M.D.

Place of Abode 155 Bath Street

DATED this Twentieth day of January One thousand eight hundred and Sixty six —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Alexander Erskine Murray (1) Sheriff Substitute
of the (2) County of Lanark
having had produced to me, with a Petition at the instance of (3) Ewing Cameron Clerk
60 Oswald St 4/11 Hill Street, Glasgow son of the Patient
Certificates under the hands of Dr. Andrew Buchanan
and Dr. John Fleming, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Mr. Daniel Allan Cameron - 111 Hill Street, Glasgow and that the said
Mr. Daniel Allan Cameron is a (5) Person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mr. Daniel Allan Cameron as a Patient into the
(6) Public Crichton Institution, Dumfries ~~Asylum of~~ and I authorize
his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Daniel Allan Cameron which accompanied the said Petition.

DATED this Twentieth day of January One thousand eight hundred and sixty six

A Erskine Murray

To the Superintendent of the (7) Public Crichton Royal Institution
at ~~Asylum of~~ Dumfries.

Error

The Crichton Royal Institution - Dumfries -

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1029

Daniel Allan Cameron

20/1/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A4]

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE TRANSFER OF A LUNATIC FROM ONE ASYLUM TO ANOTHER.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of William Mason Banker Tedburgh humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John W. Mason my brother at present a Patient in the Asylum of Morningside Edinburgh remains in a state of Mental Derangement, and is a proper person for treatment in an Asylum; and that it is desired to transfer the said John W. Mason to the Asylum of Crichton Institution at Dumfries. May it therefore please your Lordship to authorize the Transfer of the said John W. Mason and to sanction his admission into the said Asylum accordingly.

(Signed)* William Mason (Brother to Patient)

Designation, Banker, Tedburgh

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 24th (3) day of January one thousand eight hundred and sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Willis Mason
2. Sex and Age,	Male, Thirty seven,
3. Married, Single, or Widowed,	Unmarried.
4. Condition of Life, and previous Occupation (if any),	Life Insurance Business
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Birmingham & Bristol
7. Place where Found and Examined,	Tedburgh
8. Length of time Insane,	Near two years
9. Whether First Attack,	yes Believe so
10. Age (if known) on First Attack,	Thirty five
11. When and where previously under Examination and Treatment,	Millbrae House Musselburgh
12. Duration of Existing Attack,	Two years
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes.
16. Whether Dangerous to others,	Was so,
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	William Mason National Bank of Scotland Tedburgh — to member of Family previously Insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signed)* *Name,* William Mason, Brother to Patient

Dated this 24th day of January one thousand eight hundred and 66.

* To be Signed by the Party applying, who shall state the degree of Relationship (if any) to the Patient.

MEDICAL CERTIFICATE, No. I.

(1) *Here set forth the qualification entitling the person certifying to grant the certificate; e. g.*—Member of the Royal College of Physicians in Edinburgh.
(2) Physician or Surgeon, *as the case may be.*
(3) *Here insert the street and number of the house (if any), or other like particulars.*
(4) *Here insert Designation and Residence, and if a Pauper state so.*
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) *Here state the facts.*
(7) *Here state the information, and from whom derived.*

I, the undersigned, David Skae MD
being a (1) Fellow of the Royal College of Surgeons of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Royal Edinburgh Asylum for the Insane
in the county of Mid Lothian separately from any other Medical Practitioner, personally examined (4) John Willis Mason
and that the said John Willis Mason is a (5) person of unsound mind
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
He labours under a number of delusions, such as that he is persecuted, pursued by a flood, solicited to commit unnatural crimes by the attendants and patients, that his friends suffer persecution & death on his ac

2. Facts indicating Insanity communicated to me by others: (7)
He is frequently violent in his language & threatens to assault the officers and attendants. I have myself heard him & been frequently informed of the same by his attendant

(SIGNED) *Name and Medical Designation,* David Skae MD

Place of Abode, Morningside Edinburgh

DATED this twenty second day of January One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Here set forth the qualification entitling the person certifying to grant the certificate; e. g.*—Member of the Royal College of Physicians in Edinburgh.
(2) Physician or Surgeon, *as the case may be.*
(3) *Here insert the street and number of the house (if any), or other like particulars.*
(4) *Here insert Designation and Residence, and if a Pauper state so.*
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) *Here state the facts.*
(7) *Here state the information, and from whom derived.*

I, the undersigned, John Batty Tuke
being a (1) M.D. Univ. Edin
and being in actual practice as a (2) physician
hereby certify, on soul and conscience, that I have this day, at (3) the Royal Edinr Asylum
in the county of Mid-Lothian separately from any other Medical Practitioner, personally examined (4) John Willis Mason
and that the said John Willis Mason is a (5) person of unsound mind
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Full of the most extravagant delusions breaks out into violent & very foul abuse — Has the mark of an extensive wound of throat caused by an attempt at suicide —

2. Facts indicating Insanity communicated to me by others: (7)

(SIGNED) *Name and Medical Designation,* John B Tuke M.D.

Place of Abode, Royal Edinr Asylum

DATED this twenty-second day of January One thousand eight hundred and sixty-five

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSFER AND RECEPTION OF THE LUNATIC.

I, John Alexander Trotter Esquire (1) Advocate, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition for Transfer at the instance of (3) William Mason Banker Jedburgh Certificates under the hands of David Thomson M.D and John Batty Tuke , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) John Willis Mason Brother of Petitioner at present a patient in the Asylum of Morningside Edinburgh and that the said John Willis Mason is a (5) person of unsound mind and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE the Transfer of the said John Willis Mason from the Asylum of Morningside Edinburgh to the Asylum of Crichton Institution Dumfries and I authorize the Transmission to the Asylum of Crichton Institution accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Willis Mason which accompanied the said Petition.

(SIGNED) John P Trotter

DATED this twenty fourth day of January one thousand eight hundred and sixty six

To the Superintendent of the (6) Public *Asylum of* Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District or Private.

1031

John Willis Mason

26/1/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,*—

The Petition of Elizabeth Ward, Schoolmasters Wife

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Ward, residing at Milton Pl...

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Husband is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Robert Ward to the Southern Counties Asylum and to sanction his admission into the said Asylum.

Elizabeth Ward

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this fourth (4) day of February One thousand eight hundred and sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Robert Ward
2. Sex and Age,	Male — 40
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Established Church of Scotland
5. Religious Persuasion, so far as known,	Dumfries
6. Previous Place of Abode,	Burns Street Dumfries
7. Place where Found and Examined,	3 years
8. Length of time Insane,	Yes
9. Whether first attack,	37
10. Age (if known) on first Attack,	None
11. When and where previously under Examination and Treatment,	10 days
12. Duration of existing Attack,	Intemperance
13. Supposed Cause,	No
14. Whether subject to Epilepsy,	Yes threatened
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Elizabeth Ward Wife
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this fourth day of February One thousand eight hundred and sixty six

(*To be signed by Party applying*) Elizabeth Ward

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, John Dickson MD being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) 4 Sutton Pl Burns Street Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Robert Ward, late Schoolm Old Lyng and that the said Robert Ward is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

At present in a state of Intoxication.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

His wife inform me that he has been a state of constant intoxication for the last three years and that latterly he has been a source of dangerous Mania threatening the life of his wife & others, and has often threatened to take his own life. These statements are confirmed by the Aunt of his wife, and by the neighbours around.

Name and Medical Designation, John Dickson MD

Place of Abode, Buccleuch Street Dum

DATED this Tenth day of February One thousand eight hundred and Sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, James Lyburn MD being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Sutton Cottage Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Robert Ward Schoolmaster 4 Sutton Place Burns Street Dumfries and that the said Robert Ward is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Cannot allege Proof of Legal insanity in this at present

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

In arriving at opinion founded on evidence the nature of the case and its surroundings taken into account from a visit to the patient when he is dangerous to himself and the public

Name and Medical Designation, James Lyburn MD

Place of Abode Sutton House Dumfries

DATED this 13th day of February One thousand eight hundred and Sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) 14 Hamilton Place Burns St in the County of Dumfries, seen and personally examined Robert Ward Schoolmaster, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this tenth day of February One thousand eight hundred and sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexander Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Elizabeth Ward Schoolmasters wife Certificates under the hands of John Dickson and Jane Gilchrist, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Robert Ward 4 Hamilton Place Burns Street Dumfries and that the said Robert Ward is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Robert Ward as a Patient into the (6) Public Asylum of Southern Counties and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Ward which accompanied the said Petition.

DATED this thirteenth day of February One thousand eight hundred and

J Alex Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties

Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/173.

Robert Ward

10/2/66.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,*—

The Petition of John Forsyth Old Dairy

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Forsyth your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Forsyth to the Crichton Asylum and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Forsyth

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this fourth (4) day of February One thousand eight hundred and sixty two

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Forsyth
2. Sex and Age,	Male, single
3. Married, Single, or Widowed,	
4. Condition of Life, and previous Occupation (if any),	Pensioner formerly soldier in India
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Glencaple
7. Place where Found and Examined,	Do
8. Length of time Insane,	since Tuesday last
9. Whether first attack,	First as far as Known
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Since Tuesday last
13. Supposed Cause,	Drink & alledged sun stroke in India
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No appearance
16. Whether Dangerous to others,	Likely
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Forsyth, father, Glencaple, sister committed Suicide
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 12th day of February One thousand eight hundred and 66 years

(*To be signed by Party applying*) John Forsyth

P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, James M. McCulloch M.D. &c
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Glencaple
in the County of Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) James Forsyth and that
the said James Forsyth is a (5) Lunatic
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Raving about
& God, rattling, with

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The
same, with violence breaking the windows, a
furniture &c. sleeplessness &c.

Name and Medical Designation, James M. McCulloch M.D.

Place of Abode, 38 Castle Street, Dumfries

Dated this 12th day of February One thousand eight hundred and sixty six years.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, James Sylvester M.B
being a (1) Graduate in the University
of Edinburgh & Physician
and being in actual practice as a (2)
hereby certify, on soul and conscience, that I have this day, at (3) Southern
Counties Asylum Dumfries in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) James Forsyth Soldier
from old Dizzy and that
the said James Forsyth is a (5) Lunatic
Unnamed Mink and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) Mental Incoherence
generally unnamed. Is at times violent
& excited and excited. Is
Facetious & often assaultive

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Attendant says he does not
sleep & sometimes swears and
threatens

Name and Medical Designation, J. Sylvester M.B

Place of Abode, Crichton House Dumfries

Dated this 13th day of February One thousand eight hundred and sixty six

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James M. M'Culloch M.D. &c. Edinburgh being (1) a Physician & Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Lincaple in the County of Dumfries, seen and personally examined James Forsyth, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

James M. M'Culloch, M.D. &c.

DATED this 12th day of February One thousand eight hundred and sixty six years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexr Inglis Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Forsyth Old Quay Certificates under the hands of James M. M'Culloch and James Gilchrist, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Forsyth residing at Lincaple and that the said James Forsyth is a (5) Lunatic and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Forsyth as a Patient into the (6) Public Asylum of Southern Counties and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Forsyth which accompanied the said Petition.

DATED this Thirteenth day of February One thousand eight hundred and sixty six

John Inglis

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

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(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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James Forsyth
12/2/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,*—

The Petition of Joseph Crichton, Inspector of Poor Parish of Canonbie, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Bahner, a pauper is at present in a state of Mental Derangement and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Bahner to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNATURE) J Crichton Inspector Poor

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 12th (3) day of July one thousand eight hundred and Sixty Six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jane Bahner
2. Sex and Age,	Female - 34
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Pauper
5. Religious Persuasion, so far as known,	— Protestant
6. Previous Place of Abode,	— Canonbie
7. Place where Found and Examined,	— Casual Poorhouse Canonbie
8. Length of time Insane,	— 3 days
9. Whether First Attack,	— No
10. Age (if known) on First Attack,	— Age not known
11. When and where previously under Examination and Treatment,	
12. Duration of Existing Attack,	— 3 days
13. Supposed Cause,	— Not known
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Canonbie
18. Date of becoming Chargeable,	10 years
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Robert Bahner, Canonbie Not known to have been Insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNATURE)* *Name,* J Crichton

DATED this 12th day of July one thousand eight hundred and Sixty Six

* To be Signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Thomas Mercantry being a (1) Member of the College of Surgeons of Glasgow and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Canal Poorhouse Canonbie in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Jane Balmer Pauper One Roll of Canonbie Parish and that the said Jane Balmer is a (5) Person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Frequent attempts to commit suicide — constantly talk the greatest nonsense.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

(SIGNED) *Name and Medical Designation,* T. Mercantry Surgeon

Place of Abode, Canonbie

DATED this 12th day of July One thousand eight hundred and Sixty Six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Samuel Pierson being a (1) Member of the Royal College of Surgeon of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Jane Balmer a pauper from Canonbie Parish and that the said Jane Balmer is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Great excitement, loquaciousness, & mischievous — a constant maniacal pny exhibiting itself in screaming, gesticulating, kicking or caressing &c &c

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mr William Crichton says that in the Canal Poorhouse she proved perfectly unmanageable

(SIGNED) *Name and Medical Designation,* S. Pierson M.B.C. Ed.

Place of Abode Southern Counties Asylum Du

DATED this Twelfth day of February one thousand eight hundred and Sixty Six

CERTIFICATE OF EMERGENCY.

(This certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Jane Balmer is a (1) person of unsound mind hereby further certify that the Case of the said Jane Balmer is one of Emergency, and I recommend the immediate removal of the said Jane Balmer to an Asylum accordingly.

Name, A Macaulay

Place of Abode, Canonbie

DATED this 12th day of July One thousand eight hundred and sixty six

(1) Lunatic or an insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Stewart Irvine Esquire (2) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Joseph Cruchley Inspector of Poor Canonbie Certificates under the hands of Aeneas Macaulay and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jane Balmer, Canonbie (a pauper) and that the said Jane Balmer is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Balmer as a Patient into the (6) Public Asylum of Southern Counties and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Balmer which accompanied the said Petition.

(SIGNATURE) J Stewart Irvine

DATED this Twelfth day of February one thousand eight hundred and sixty six

To the Superintendent of the (6) Public Asylum of Southern Counties Dumfries

(2) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.

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Jane Babner
12/2/66.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A.]

20 & 21 *Vict. Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries *and his Substitutes,—*

The Petition of James Brown, Inspector of Poor Sanquhar,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Marion Muir, a pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Marion Muir to the Southern Counties' Asylum, Dumfries and to sanction her admission into the said Asylum.

(Signed) James Brown Insp. of Poor Sanquhar

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Twentieth (3) day of February One thousand eight hundred and Sixty Six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Marion Muir
2. Sex and Age,	F. 32 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Humble, Domestic Servant
5. Religious Persuasion, so far as known,	United Presbyterian
6. Previous Place of Abode,	Helens' Tynd Sanquhar
7. Place where Found and Examined,	Helens' Tynd. Sanquhar.
8. Length of time Insane,	Five Weeks.
9. Whether first attack,	First Attack
10. Age (if known) on first Attack,	32 years.
11. When and where previously under Examination and Treatment,	None.
12. Duration of existing Attack,	Five Weeks.
13. Supposed Cause,	No known cause
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Sanquhar.
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Euphemia Muir, Mother. No.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signed)* Name, James Brown Inspector

Dated this Twentieth day of February One thousand eight hundred and Sixty Six

* To be signed by the Party applying.

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Kay Surgeon, Langwh[illegible] being a (1) Licentiate of the Faculty of Physicians and Surgeons of Glasgow. and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) her Mother's Helen's Wynd, Langwhar in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Marion Muir, Helen's Wynd a Pauper and that the said ~~Helen~~ Marion Muir is a (5) person of Unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She has left off working, is desponding, says she can do nothing and imagines she is lost both Soul and Body.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She has bitten her Arm, torn her Breast and sometimes she eats old Clothes or any other substance she gets hold of — By her Cousin Archibald Muir —

(SIGNED) *Name and Medical Designation,* Wm Kay Surgeon

Place of Abode, Langwhar

DATED this 20th day of February One thousand eight hundred and Sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Grierson being a (1) Member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Marion Muir, a pauper from Langwhar and that the said Marion Muir is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She appears deep melancholic, silent and reserved; but confessing under questioning that she is lost that she sleeps none, that she is unable to [illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) stand the impulse to commit acts which [illegible] knows to be wrong &c

The Inspector speaks of her as at times violent.

(SIGNED) *Name and Medical Designation,* J. Grierson M.R.C.S. Eng

Place of Abode, Southern Counties Asylum Dum

DATED this twentieth day of February One thousand eight hundred and sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Marion Muir is a (1) person of unsound mind hereby further certify that the Case of the said Marion Muir is One of Emergency, and I recommend the immediate removal of the said Marion Muir to an Asylum accordingly.

Name, William Kay Lingen

Place of Abode, Langholm

DATED this 20th day of February One thousand eight hundred and Six & Six -

(1) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Andrew Barrie, Esquire (1) Sheriff Substitute of the (2) County of Dumfries - - - having had produced to me, with a Petition at the instance of (3) James Brown Inspector of Poor Langholm Certificates under the hands of William Kay - - - and Samuel Grierson - - - , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Marion Muir Helen Wynd Langholm Spinster and that the said Marion Muir - - - is a (5) person of unsound mind - - - and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Marion Muir - - - as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Marion Muir - - - which accompanied the said Petition.

(SIGNED) A Barrie

DATED this twenty first day of February One thousand eight hundred and sixty Six

To the Superintendent of the (7) Asylum of Public Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

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Marion Muir

to

20 February

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of Joseph Welsh Inspector of Poor Moqueer humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Hogg Saw Miller your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Robert Hogg Saw Miller to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Joseph Welsh Inspector of Poor

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Twenty First (4) day of February One thousand eight hundred and Sixty Six years

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Robert Hogg
2. Sex and Age,	Male 32 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Saw miller
5. Religious Persuasion, so far as known,	Free Church Protestant
6. Previous Place of Abode,	50 Glasgow Street Maxwelltown
7. Place where Found and Examined,	50 Glasgow Street Maxwelltown
8. Length of time Insane,	0 Month
9. Whether first attack,	First attack
10. Age (if known) on first Attack,	32 Years
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	0 month
13. Supposed Cause,	Jealousy
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	on this occasion
16. Whether Dangerous to others,	Dangerous to others
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Moqueer
18. Date of becoming Chargeable,	21st Feby 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Agnes Blythe his wife
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twenty First day of February One thousand eight hundred and Sixty Six

(*To be signed by Party applying*) Joseph Welsh Inspector of Poor Moqueer

P.p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Murray being a (1) Graduate of the University of Glasgow and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Maxwelltown in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Robert Hogg Law Mills Pauper and that the said Robert Hogg Law Mills Pauper is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Restless and excited manner and, alternately, attempts at violence himself.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His wife Mrs Montgomery states that he attempted to commit suicide, has threatened to murder his wife and attempted this morning by a Lancashire knife.

Name and Medical Designation, P. Murray M.D.

Place of Abode, 22 Buccleuch Street Glasgow

DATED this 21st day of February One thousand eight hundred and 66

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson being a (1) Graduate of the Edinburgh University and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Maxwelltown Kirkcudbright in the County of Glasgow separately from any other Medical Practitioner, visited and personally examined (4) Robert Hogg - Law Mills Glasgow Street Maxwelltown and that the said Robert Hogg - is a (5) lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is at present in a state of Religious excitement, praying & swearing alternately, and threatening his intention of destroying himself.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
His wife, and the immediate neighbours inform me that he has for the last week been restless and excitable in manner - accusing his wife of infidelity &c - this morning he attempted to commit suicide by cutting his throat with a knife which he had secreted for the purpose, when he was taken by his wife cutting the rope by which he had suspended himself.

Name and Medical Designation, John Dickson M.D.

Place of Abode, 20 Buccleuch Street Glasgow

DATED this 21st day of February One thousand eight hundred and Sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Strain Lytle, Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Joseph Welch
Inspector of Poor Dongueer
Certificates under the hands of Patrick Murray M.D.
and John Dickson M.D. , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Robert Hogg James Miller Maxwelltown Pauper and that the said
Robert Hogg is a (5) pauper Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Robert Hogg as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Hogg which accompanied the said Petition.

DATED this twenty first day of February One thousand eight hundred and sixty-one - one word deleted -

J. Strain Lytle

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Robert Hay

Lieutenant Colonel

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of George Mc Dougal Blacksmith Castlemilk Gate humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Joseph Mc Dougall your Petitioner's (3) son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Joseph Mc Dougall to the Southern Counties asylum and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

George Mc Dougall

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this twenty third (4) day of Febry One thousand eight hundred and Sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Joseph Mc Dougall
2. Sex and Age,	male aged 33
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Schoolmaster
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Castle Milk gate
7. Place where Found and Examined,	Do
8. Length of time Insane,	
9. Whether first attack,	no
10. Age (if known) on first Attack,	31
11. When and where previously under Examination and Treatment,	In the Southern Counties Asylum for a few months in 1863
12. Duration of existing Attack,	a few days
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	not known rather suspicious
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	None
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	George Mc Dougal Castle Milk gate his father.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this twenty third day of February One thousand eight hundred and Sixty six

(*To be signed by Party applying*) George Mc Dougall

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Thomson Wilson being a (1) Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Castlemilk Gate in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Joseph McDougal and that the said Joseph McDougal is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) His highly excitable appearance, irritability and violence of manner, disc[illegible] action, and suspicion of myself & others.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His Father and brothers describe his extreme violence, and threat the lives of the various members of his own family, of destroying his own life.

Name and Medical Designation, Jas. T. Wilson Surgeon

Place of Abode, Lockerbie

DATED this 23d day of February One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Gibson being a (1) member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Anglum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Joseph McDougal, son of Geo McDougal Blacksmith, Castlemilkgate and that the said Joseph McDougal is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) he is wild looking irritable, & suspicious. He imagines his [illegible] bours — especially a Mr Whinstone of Broadholm exercising a malevolent and injurious influence [illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His father, brother, and sister state that he is [illegible] times violent and with risk and difficulty restrained that he has been for a few nights sleepless and [illegible] wild.

Name and Medical Designation, J. Gibson M.R.C.S.

Place of Abode, Southern Counties Anglum [illegible]

DATED this 23d day of February One thousand eight hundred and Sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James Thomson Wilson Surgeon being (1) a licentiate of the Royal College of Surgeons Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Castlemilk Gate in the County of Dumfries, seen and personally examined Joseph McDougal, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Jas. T. Wilson

DATED this 23d day of February One thousand eight hundred and sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (3) Sheriff Substitute of the (4) County of Dumfries having had produced to me, with a Petition at the instance of (5) George McDougal Blacksmith Castlemilk Gate Certificates under the hands of James Thomson Wilson and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Joseph McDougal Castlemilk Gate and that the said Joseph McDougal is a (7) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Joseph McDougal as a Patient into the (8) Public Asylum of Southern Counties and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Joseph McDougal which accompanied the said Petition.

DATED this Twenty sixth day of February One thousand eight hundred and

John P. Trotter

To the Superintendent of the (9) Public Asylum of Southern Counties Dumfries

(3) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(4) State whether a County or Stewartry.
(5) Insert Name and Designation.
(6) Describe him, and if a Pauper, state so.
(7) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(8) Public, District, Parochial, or Private.
(9) Public, District, Parochial, or Private.

To
Joseph McDougall
Esq.
Montreal

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1)— Sheriff —— of ~~the~~ (2) Wigton and Kirkcudbright —— *and his Substitutes,*—

The Petition of Margaret Campbell or Smith humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Smith ——————

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) daughter ——————

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Smith —————— to the Southern Counties asylum Dumfries and to sanction her admission into the said Asylum.

Margaret Smith

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 23rd (4) day of February — One thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jane Smith
2. Sex and Age,	Female - Sixty years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Dressmaker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Castle Douglas
7. Place where Found and Examined,	Castle Douglas
8. Length of time Insane,	Has had a tendency towards insanity
9. Whether first attack,	yes for about 2 months
10. Age (if known) on first Attack,	30
11. When and where previously under Examination and Treatment,	Never
12. Duration of existing Attack,	See No 8
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Not to any great extent
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kelton
18. Date of becoming Chargeable,	23 July 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Margaret Campbell or Smith the applicant King street Castle Douglas
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	No

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this twenty third day of February — One thousand eight hundred and sixty six

(*To be signed by Party applying*) Margaret Smith

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James Laidlaw being a (1) Licentiate of the Royal College of Surgeons in Edinb and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) King Street, Castle Douglas, Kirkcudbright in the County of visited and personally examined (4) separately from any other Medical Practitioner, Jane Smith, King Street, Castle Douglas and that the said Jane Smith is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Incoherent in her sta & labours under the delusion that she is the greatest he on the earth. that God has forsaken her & that her soul is has spectral illusions excited & hurried in her manne rather sleepless nights & eats little

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Agnes Solly a neighbour informs me that she has bee out of bed during the night to sit with Jane Smith who found very much excited & under fair having a constant of the Divine Wrath & impending destruction &c

Name and Medical Designation, James Laidlaw L.R.C

Place of Abode, Castle Douglas

Dated this 23 day of February One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Walter Lorraine being a (1) Licentiate Roy Coll Surgeons Edi and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) King Street Castle Douglas Kirkcudbright in the County of visited and personally examined (4) separately from any other Medical Practitioner, Jane Smith King Street Castle Douglas and that the said Jane Smith is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Labours under delusions respecting religion - A constant current of her hopeless condition as respects her salvation, great apparent restlessness & anxiety, and at times excited manner which produces a state of great sleeplessness

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her mother alleges to her sleeplessness & great restle being extremely unpleasant both her; Recently to her statement she has manifested a tendency to injure herself & threatening to take away her life and has

Name and Medical Designation, Walter Lorraine L.R.C.S.E

Place of Abode, Castle Douglas

Dated this 23rd day of February One thousand eight hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DAYED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar Esqr. Steward Substitute
of the (2) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3) Margaret Campbell or Smith
Certificates under the hands of James Laidlaw
and Walter Lorraine , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jane Smith and that the said Jane Smith is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said ~~Margaret Campbell or Smith~~ as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said ~~Margaret~~ Jane ~~Campbell~~ Smith which accompanied the said Petition. This words delete.

DATED this Twenty third day of February One thousand eight hundred and Sixty Six years.

W H Dunbar

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/179

Jane Smith

26/2/66

Petition

of

Margaret Campbell

or Smith

23 February 1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honorable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Charles Riardson Saunders of Dumfries Hall

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary B Blacklock

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Servant

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Blacklock to the Crichton Royal Institution and to sanction the admission into the said Asylum.

Charles Riardson Saunders

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 26th (4) day of February One thousand eight hundred and Sixty-six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mary Blacklock.
2. Sex and Age,	Female. 47 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	House keeper to the Father.
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Native Place.
7. Place where Found and Examined,	Quat Saltpld
8. Length of time Insane,	about 14 days as far as known.
9. Whether first attack,	First attack
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	
13. Supposed Cause,	cannot say.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	I have not heard anything to that effect
16. Whether Dangerous to others,	but not
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Sarah Blacklock. Dunscore Hall Penpont Sister from I Family know of no other than the insane.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 26th day of February. One thousand eight hundred and sixty-six

(*To be signed by Party applying*) Charles Riardson Saunders

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Joseph Williamson being a (1) a Member of the Royal College of Surgeons. Lon L: a: S: London et M.D. St Andrews and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Village of Great Salkeld in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) Mary Blacklock, Sp and that the said Mary Blacklock is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Answers all questions irrationally. When awake talks almost incessantly.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Has very often refused to take food. Magnus [illegible] When the attendant has given her a piece of bread & [illegible] it behind the fire.

Name and Medical Designation, Joseph Williamson M.D.

Place of Abode, Eden Vue, Langworthy & Penrith. Cu

DATED this 26th day of Feb. One thousand eight hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robert Pearson being a (1) Doctor of Medicine of the University of Edinburgh. a Member of the Royal College of Surgeons England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Great Salkeld Cumberland in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Blacklock Spinster and that the said Mary Blacklock is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Talks incessantly, and refuses food she also sleeps very little

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Mrs Rumney tells me that she threw a [illegible] of tea at the [illegible] yesterday & that she has threatened to injure her attendants

Name and Medical Designation, Robert Pearson

Place of Abode, Strickland gate Penrith

DATED this 26th day of Feb One thousand eight hundred and sixty six.

Filed up and sign certificate
Emergency

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Joseph Williamson being (1) a Member of the Royal College of Surgeons London hereby certify, on soul and conscience, that I have this day, at (2) Great Salkeld in the County of Cumberland, seen and personally examined Mary Blacklock, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Joseph Williamson M.R.C.S.L.C

DAYED this 28th day of Feb. One thousand eight hundred and sixty six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Charles Ricardson Saunders Nunwich Hall Penrith Certificates under the hands of Joseph Williamson and Robert Pearson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Blacklock Spinster and that the said Mary Blacklock is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Blacklock as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Blacklock which accompanied the said Petition.

DAYED this Twenty eighth day of February One thousand eight hundred and sixty six

John P. Trotter

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1032

Mary Blackstock

26/2/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Elizabeth Brown Kirkhampton

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Brown your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Brown to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

E Brown

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 27th (4) day of Febr One thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Brown
2. Sex and Age,	Male 37
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Woman — Farmer
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Kirkhampton
7. Place where Found and Examined,	Kirkhampton
8. Length of time Insane,	nine days
9. Whether first attack,	yes
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	nine days
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Elizabeth Brown Sister Kirkhampton Carlisle
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 27th day of Febr One thousand eight hundred and sixty six

(*To be signed by Party applying*) E Brown

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Robert Brown being a (1) Fellow of the College of Surgeons of Lond and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Kirkhamplow in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) John Brown of Kirkham and that the said John Brown is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Is constantly singing, occasionally refuses to answer questions.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

His Sister says that he believes he is being poisoned —

Name and Medical Designation, Robert Brown Surgeon

Place of Abode, 5 Devonshire Street Carlisle

DATED this 27th day of Feby One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Stewart Locke being a (1) Doctor of Medicine (Edinburgh) and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Kirkhamplow in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) John Brown, Kirkhamplow and that the said John Brown is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Fancies (while in bed) that he is driving machine, says he is driving it to the Ki

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

His Sister says he is constantly sen telegraphic messages to imaginary pe

Name and Medical Designation, Stewart Locke Su

Place of Abode, 7 Devonshire Street, Carlis

DATED this 27th day of February One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Robert Brown
being (1) Fellow of the College of Surgeons of Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Kirkbampton
in the County of Cumberland, seen and personally examined
John Brown, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Robert Brown

DATED this 27th day of Feby One thousand eight hundred and sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Elizabeth Brown Kirkbampton Carlisle
Certificates under the hands of Robert Brown
and Stuart Locke, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) John Brown Kirkbampton Cumberland and that the said John Brown is a (5) Lunatic and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Brown as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Brown which accompanied the said Petition.

DATED this Twenty eighth day of February One thousand eight hundred and sixty six

John A Trotter

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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John Brown

27th February

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of John Dinwoodie Inspector of Poor for the Parish of Dumfries

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Maryann Appleton residing at Dumfries Infirmary your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Maryann Appleton to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Twentyseventh (4) day of February One thousand eight hundred and Sixtysix

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Maryann Appleton
2. Sex and Age,	Female, 30
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	a Tramp
5. Religious Persuasion, so far as known,	R. Catholic
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	— do —
8. Length of time Insane,	About a fortnight
9. Whether first Attack,	Not Known
10. Age (if known) on first Attack,	do do
11. When and where previously under Examination and Treatment,	Dumfries Infirmary
12. Duration of existing Attack,	About a fortnight
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries Meantime
18. Date of becoming Chargeable,	27 Feb: 1866.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twentyseventh day of February One thousand eight hundred and Sixtysix

(*To be signed by Party applying*) John Dinwoodie, Inspector

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Marshall being a (1) Licentiate of the Faculty of Physicians and Surgeons Glasgow and College of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Infirmary Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mary Anne Appleton & Son and that the said Mary Anne Appleton is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) talks incoherently Came of suppose any question with satisfaction dull and stupid Refuses the Nourishment her speech is incoherent &c &c

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The Nurse states that she keeps from her during the night and general conduct of Nurse says she talks incoherently & that she is violent

Name and Medical Designation, Wm Marshall M.D. &c

Place of Abode, Dumfries

DATED this 24th day of February One thousand eight hundred and Sixty Seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Turner being a (1) graduate of University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Infirmary Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mary Ann Appleton and that the said Mary Ann Appleton is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Mind wea Memory impaired - Conversation vague Incoherent ideas Confused & obscure refuses to take Nourishment &

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) None

Name and Medical Designation, John Turner M.D. Edin

Place of Abode, Infirmary. Dumf.

DATED this 24th day of February One thousand eight hundred and Sixty six years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Advocate, Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dinwoodie Inspector of Poor for the Parish of Dumfries
Certificates under the hands of William Marshall
and John Turner, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Ann Appleton (a pauper) and that the said Mary Ann Appleton is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Ann Appleton as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Ann Appleton which accompanied the said Petition.

DATED this twenty eighth day of February One thousand eight hundred and sixty six years

John P. Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.
(6) Public, District, Parochial, *or* Private.
(7) Public, District, Parochial, *or* Private.

1/181

Mary Ann Appleton

28/2/66

1/181

Mary Anne Appleton

28th February

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of John Barker Newton Lodge Lancashire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Charles E. Barker, Student, your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Charles E. Barker to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Barker

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty Eighth (4) day of February One thousand eight hundred and sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Charles Ellis Barker
2. Sex and Age,	Aged 23
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Student
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Broughton Lodge Newton in Cartmel Lancashire
7. Place where Found and Examined,	
8. Length of time Insane,	Six or seven months
9. Whether first attack,	First
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	At Ottery St Mary Devonshire & home
12. Duration of existing Attack,	Six or seven months
13. Supposed Cause,	Self abuse
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Has expressed homicidal & suicidal opinions but in a very vague way
16. Whether Dangerous to others,	Yes under excitements
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Father John Barker Broughton Lodge, Newton in Cartmel Lancashire Father's brother from expression living was once under restraint for a few weeks
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty Eighth day of February One thousand eight hundred and sixty six

(*To be signed by Party applying*) John Barker

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson MD being a (1) graduate of the Edinburgh Univers and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Charles Ellis Barker Student and that the said Charles Ellis Barker is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

He is absent & preoccupied in manner, conversation. States that he is subject to hallucinations of hearing and sight, and that his memory is very deficient.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

I am informed by his Medical Attendant, Welsh that he is restless and disposed to w without aim; also that he fancies he hears which have no existence.

Name and Medical Designation, John Dickson

Place of Abode, Buccleuch Street Dum

DATED this 28th day of February One thousand eight hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Hugh Grainger Stewart being a (1) graduate of the University of Edinburgh in Medicine & a Licentiate of the Royal College of Sur and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Charles Ellis Barker a Student & lately resident at Broughton Lodge Lancashire and that the said Charles Ellis Barker is a (5) lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Is very slow in answering questions seems confused and unable to understand his position, is inclined to wander without an object. Says he has been in Dumfries last year & that he has seen those now about him at that time. Such being not the case. Complains of strange feelings in his limbs which he [illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) an [illegible] George Jones gardener at Broughton Lodge tells me he has known him from Childhood and that he has always been regarded as of weak mind but of late has become unmanageable at home

Name and Medical Designation, H G Stewart M.

Place of Abode, Crichton Institution Dum

DATED this 28th day of February One thousand eight hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson M.D.
being (1) a Graduate of the Edinburgh University practitioner
hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal
in the County of Dumfries, seen and personally examined
Charles Ellis Barker - Student, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson M.D

DATED this 28 day of February One thousand eight hundred and sixty six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Rogerson Rotter (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Barker
Newton Lodge Lancashire
Certificates under the hands of John Dickson M.D.
and Hugh Grainger Stewart M.D. being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Charles Ellis Barker Student Droughton Lodge Newton and that the said
Charles Ellis Barker is a (5) Lunatic -

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Charles Ellis Barker as a Patient into the (6) Public Asylum of Crichton Royal Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Charles Ellis Barker which accompanied the said Petition.

DATED this Second day of March One thousand eight hundred and Sixty six years.

J. Rogerson Rotter

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1033

Chas Ellis Barker

28/2/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries & *and his Substitutes,—*

The Petition of John Boyd, Fisherman, Fairlie, Greenock, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Alexander Boyd your Petitioner's (3) Daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Alexander Boyd to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Boyd

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Second (4) day of March One thousand eight hundred and Sixty-six years

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jane Alexander Boyd
2. Sex and Age,	Female 22 years & 9 months
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic servant
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Acre Villa, Broomfields, Largs
7. Place where Found and Examined,	Knox's Land Fairlie
8. Length of time Insane,	Nine days
9. Whether first attack,	First attack
10. Age (if known) on first Attack,	22 years & 9 months
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	Nine days
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Talked about cutting throat, but never made any attempt.
16. Whether Dangerous to others,	Strikes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Boyd, Knox's Land Fairlie Father None Known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this first day of March One thousand eight hundred and sixty six.

(*To be signed by Party applying*) John Boyd

P. p.

her father

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robert Kirkwood being a (1) doctor of medicine of the university of Glasgow and being in actual practice as a (2) physician hereby certify, on soul and conscience, that I have this day, at (3) Knox's land in the village of Fairlie in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Jane Alexander Boyd domestic servant, Knox's land Fairlie and that the said Jane Alexander Boyd is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) In a state of violent maniacal excitement, striking at her fat[illegible] and talking loudly & incoherently; at times apparently [illegible]versing with persons whom she imagines to be present, ab[illegible] devils, magic, lambs, Hugh Paton, Jock the tinkler, butchers &

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Helen Boyd her mother, Knox's land Fairlie info[illegible] me that Jane Alexander Boyd has for several days been most excited, striking her, breaking & tearing furniture, clothes &c; that she talks do[illegible] for hours without ceasing & that there is no connection nor sense in what she says

Name and Medical Designation, Robert Kirkwood M[illegible]

Place of Abode, Gallowgate St., Largs, Ayrshire

DATED this first day of March One thousand eight hundred and sixty six years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Grierson being a (1) member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Jane Alexander Boyd dau[illegible] of John Boyd, Fisherman, Fairlie near Greenock and that the said Jane Alexander Boyd is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) There is maniacal excitem[illegible] She is restless & coy or silent or singing or weeping [illegible] deliriously rapid succession. She appears indiffe[illegible] to pain & tears her hair and bites at her person sav[illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her father & brother in law state th[illegible] She is very violent & unmanageable

Name and Medical Designation, J. Grierson M[illegible]

Place of Abode, Southern Counties Asylum D[illegible]

DATED this Second day of March One thousand eight hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Robert Kirkwood being (1) a doctor of medicine of Glasgow University hereby certify, on soul and conscience, that I have this day, at (2) Knox's land Fairlie in the County of Ayr, seen and personally examined Jane Alexander Boyd, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Robert Kirkwood M.D

DATED this first day of March One thousand eight hundred and sixty six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Boyd Fisherman, Fairlie, Greenock Certificates under the hands of Robert Kirkwood and Samuel Grierson being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jane Alexander Boyd, Domestic Servant Knox's land Fairlie and that the said Jane Alexander Boyd is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Alexander Boyd as a Patient into the (6) public Asylum of Southern Counties, Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Alexander Boyd which accompanied the said Petition.

DATED this third day of March One thousand eight hundred and sixty six

John P Trotter

To the Superintendent of the (7) public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Jane Alexander Boyd
March 2nd 1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes*—

The Petition of John Dinwoodie Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Nancy Graham residing at the Hospital, Dumfries your Petitioner's (3) Pauper. is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Nancy Graham to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Fifth (4) day of March One thousand eight hundred and Sixtysix

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Nancy Graham
2. Sex and Age,	Female 80 years
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Widow. Inmate of Hospital
5. Religious Persuasion, so far as known,	Protestant —
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	— do —
8. Length of time Insane,	Not Known
9. Whether first Attack,	yes
10. Age (if known) on first Attack,	80 years
11. When and where previously under Examination and Treatment,	Hospital. Dumfries
12. Duration of existing Attack,	Not Known
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	5th March 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not Known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Not Known

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Fifth day of March One thousand eight hundred and Sixtysix

(To be signed by Party applying) John Dinwoodie Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Marshall
being a (1) Graduate of the Faculty of Physicians and Surgeons Glasgow and Collage of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Nancy Graham a pauper and that the said Nancy Graham is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks incoherently states that some of the inmates both the boys are possessed of the Devil who punts them on her great grievance of mind and body so greatly be

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The Matron states that at the dinner table she utter frenzies of temper screaming that the inmates the[y] were trying into subduing offers (illegible) to be involved

Name and Medical Designation, Mar. Lallie M.D.

Place of Abode, Dumfries

Dated this 5th day of March One thousand eight hundred and Sixty six years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Scott
being a (1) Graduate of the University of Edin
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Minheads Hospital St Mich: A Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Nancy Graham a pau and that the said Nancy Graham is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has delusion & talks incoherently, &c

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The Matron of the Hospital gives same Statement as the above

Name and Medical Designation, Wm Scott M.D &

Place of Abode, Dumfries

Dated this 5th day of March One thousand eight hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1) —
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Blair Fuller Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dinwoodie
Inspector of Poor of the Parish of Dumfries
Certificates under the hands of William Marshall
and William Scott , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Nancy Graham Dumfries Hospital (a pauper) and that the said
Nancy Graham is a (5) person of unsound mind
and a Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Nancy Graham as a Patient into the
(6) Public Asylum of Southern Counties and I authorize
her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Nancy Graham which accompanied the said Petition.

DATED this Sixth day of March One thousand eight hundred and sixty six

J. Blair Fuller

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Nancy Shaken
March
1866

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Nancy Shaken
6/13/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Shire of Dumfries and his Substitutes,—

The Petition of John Dinwoodie Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Elliott, a baker & pauper your Petitioner's (3) ward is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Robert Elliott to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

DATED this Twelfth (4) day of March One thousand eight hundred and Sixtysix

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Robert Elliott
2. Sex and Age,	Male 30 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Baker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	— do —
8. Length of time Insane,	About one week
9. Whether first Attack,	yes
10. Age (if known) on first Attack,	30 years
11. When and where previously under Examination and Treatment,	Dumfries
12. Duration of existing Attack,	About one week
13. Supposed Cause,	Dropsy
14. Whether subject to Epilepsy,	yes
15. Whether Suicidal,	No
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twelfth day of March One thousand eight hundred and Sixtysix

(To be signed by Party applying) John Dinwoodie Inspector

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Marshall being a (1) Graduate of the Faculty of Physicians Surgeons Glasgow and College of St Andrews and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Herries's Close Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Robert Elliott a pauper and that the said Robert Elliot is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks incoherent Declares that the place in which he lives all on fire, from which he gets into a most determined and distracted state of mind to get [illegible]

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His neighbours state that he threatened to away the lives of his children

Name and Medical Designation, } W Marshall M: D &c

Place of Abode, Dumfries

DATED this 7th day of March One thousand eight hundred and Sixty six years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Gierson being a (1) Member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeons hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Robert Elliott, baker and pauper and that the said Robert Elliott is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Excitement bewilderment, and incoherence. Subject to delusion &c &c

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Suffers from Epileptoid attacks and is [illegible] furious

Name and Medical Designation, } S Gierson M.R.C.

Place of Abode, Southern Counties Asylum

DATED this twelfth day of March One thousand eight hundred and Sixty ~~three~~ six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Marshall College of Physicians
being (1) a Graduate of the faculty of Physicians and Surgeons Glasgow
hereby certify, on soul and conscience, that I have this day, at (2) Henry Close Dumfries
in the County of Dumfries, seen and personally examined Robert Elliot
Robert Elliot, and that the said
person ~~is~~ of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

W Marshall M.D

DATED this 11th day of March One thousand eight hundred and Sixty Six years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Andrew Barrie Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dinwoodie
Inspector of Poor Dumfries
Certificates under the hands of William Marshall
and Samuel Emerson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Robert Elliot, Baker, Dumfries, a Pauper and that the said
Robert Elliot is a (5) Lunatic and a person
of unsound mind and a proper Person to be detained, and taken care of, DO HEREBY AUTHORIZE you to receive the said Robert Elliot as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Elliot which accompanied the said Petition.

DATED this Twelfth day of March One thousand eight hundred and Sixty Six years

A Barrie

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, *or* an insane person, *or* an Idiot, *or* a person of unsound mind.
(6) Public, District, Parochial, *or* Private.
(7) Public, District, Parochial, or Private.

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Robert Elliott

11th March

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of* ~~the~~ (2) Wigtown and Kirkcudbright *and his Substitutes,—*

The Petition of Anthony McConnell Senior Farmer Cuninghame humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Anthony McConnell Junior your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said ~~Anthony~~ Anthony McConnell Junr. to the ~~A~~ Crichton Asylum, Dumfries and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

X Anthony McConnell Senior

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this nineteenth (4) day of March One thousand eight hundred and sixty six years.—

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Anthony McConnell
2. Sex and Age,	Male, Twenty Two years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Farmers son engaged in farming
5. Religious Persuasion, so far as known,	member of the Church of Scotland
6. Previous Place of Abode,	Has always lived here (at Cuninghame Farm).
7. Place where Found and Examined,	Cuninghame, Parish of Wigtown
8. Length of time Insane,	Five weeks
9. Whether first attack,	First attack
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	no.
12. Duration of existing Attack,	Five weeks
13. Supposed Cause,	uncertain
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	not ~~not~~ observed to be so.
16. Whether Dangerous to others,	would be so if not restrained
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Anthony McConnell, Senr. Farmer Cuninghame, Parish of Wigtown, and father of the patient. A sister of the patients was for about a year in a state of melancholy
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this nineteenth day of March One thousand eight hundred and sixty six

(*To be signed by Party applying*) X Anthony McConnell Senior

P. p.

Robert Elliott

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Rob. D. Rose being a (1) Licentiate of the Royal College of Surg of Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Cuningham Farm house, in the parish of Wigtown in the County Wigtown separately from any other Medical Practitioner visited and personally examined (4) Anthony McConnell Junr. with his father & mother in the said Farm of Cuningham and that the said Anthony McConnell Junr. is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) I have attended Anthony McConnell Junr. from the commencement of his illness till the present date he has been throughout sleepless, irritable, excited very often noisy, and has required constant and careful watching. He entertained delusions about the profanation of Wigtown church, which he [illegible] should be burned laterally, he has been rambling & incoherent & perfectly incapable of talking rat[illegible] on any subject.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) I am informed by his father & mother that in my absence he has been often very violent and that the servants in the execution of their [illegible] in watching him, have very considerable difficulty in pre[illegible] him from injuring himself and them.

Name and Medical Designation, Rob. D. Rose Surgeon

Place of Abode, Wigtown

DATED this Nineteenth day of March One thousand eight hundred and Sixty Six years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Dunbar White being a (1) Graduate in Medicine of the University of Edinburgh and a Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Cuninghame Farm House, in the Parish of Wigtown in the County of Wigton separately from any other Medical Practitioner, visited and personally examined (4) Anthony McConnell, residing with his father and mother in the said Farm House of Cuninghame and that the said Anthony McConnell is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) I have visited this patient thrice, viz. on the 15th and 21st of February last, and on this day (March 19th) and on all these occasions found him moreover restless & excited in look, gesture, and so disordered in mind as to be quite incapable talking rationally on any subject — He requires the constant attendance of two men by day as well as by [illegible] and the violence of his movements has been so great as to require the temporary use of a straitwaist[illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His father, and Howden, one of his attendants inform me that he has suspected the presence of person in his drink — that he believes he is persecuted by his attendants with a view to their being masters or possessors of the Farm — and that he sometimes thinks he is fighting for his father's [illegible]

Name and Medical Designation, Dunbar White M. D.

Place of Abode, Whithorn

DATED this Nineteenth day of March One thousand eight hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Thomas Murray Esquire Sheriff Substitute (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Anthony Mc Connell Labourer former Cunningham
Certificates under the hands of Robert D. Ross Surgeon
and Dunbar White M.D , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Anthony Mc Connell Junior and that the said
Anthony Mc Connell Junior is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Anthony Mc Connell Junior as a Patient into the (6) Crichton Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Anthony Mc Connell Junior which accompanied the said Petition.

DATED this twentieth day of March One thousand eight hundred and sixty six

Thos Murray

To the Superintendent of the (7) Crichton
Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/185

Anthony McConnell

21/3/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of William Cumming, draper in Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Cumming, farmer, Stonehouse Sorbie your Petitioner's (3) Father is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Cumming to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

W. Cumming Dumfries

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 22 (4) day of March One thousand 7~~86~~ eight hundred and Sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Cumming
2. Sex and Age,	Male – 32 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Farmer's Son
5. Religious Persuasion, so far as known,	Free Church of Scotland, member of
6. Previous Place of Abode,	Stonehouse farm, Sorbie
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	31 or 32 years
11. When and where previously under Examination and Treatment,	never – nowhere
12. Duration of existing Attack,	3 months
13. Supposed Cause,	
14. Whether subject to Epilepsy,	no – about 10 years ago was subject to
15. Whether Suicidal,	no fits,
16. Whether Dangerous to others,	yes, at times
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Alexander Cumming Stonehouse Sorbie, father; William Cumming draper, Dumfries, his brother.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 22 day of March One thousand eight hundred and 66

(*To be signed by Party applying*) W. Cumming

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Proper state so.*

(5) Lunatic, or an insane person, *or* an Idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of medicine of the University of Edinburgh
and licentiate of the Faculty of Physicians & Surgeons
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Castle Street
Dumfries
in the County of Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) James Cummings — Farmer - Stonehouse - Sorby - Wigtonshire
and that the said James Cummings is a (5) person
of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is much excited and raves incoherently about some long affair - requires to be restrained, and told me that one of the men beside me is dead - thinks he is himself in imminent danger of death - Answers only in monosyllables upon this ground
2. Other facts (if any) indicating Insanity communicated to me by others: (7) Told by his mother that - he was violently disposed and requires restraint - wrote desiring when he found her that he wished about a certain person - Also, that he has been in a despondent state for about 6 months, and is much in dread of death that he would not

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode, Castle St - Dumfries

DATED this Twenty third day of March One thousand eight hundred and Sixty six years —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a proper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Samuel Grierson
being a (1) Member of the Royal College of Surgeons of England
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries
Dumfries
in the County of separately from any other Medical Practitioner,
visited and personally examined (4) James Cumming, son of Alex Cumming, Stonehouse, Sorbie
and that the said James Cumming is a (5) person of
Unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Excessive restlessness and timidity arising from a fear that the Almighty offends with him and is now descending from heaven to cut him. His behaviour is constant — he comes and craves protection from first one and then another, or hides in the corner of the room, and then in that state he offers up prayers for himself.
2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The Attendant say that from midnight till morning he was sleepless and excited

Name and Medical Designation, S. Grierson M.R.C.S. Eng

Place of Abode, Southern Counties Asylum Du

DATED this twenty sixth day of March One thousand eight hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, being (1) Alexander Thomson Doctor of Medicine of the University of Glasgow, and Surgeon hereby certify, on soul and conscience, that I have this day, at (2) Dumfries in the County of Dumfries, seen and personally examined James Cumming, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Alex. Thomson

DATED this twenty third day of March One thousand eight hundred and Sixty five years.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Alexander Wannop (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Cumming Baker in Dumfries Certificates under the hands of Alexander Thomson and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Cumming, Farmer, Stonehouse, (Palmers Brother) and that the said James Cumming is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Cumming as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize hereby Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Cumming which accompanied the said Petition.

DATED this Twenty Sixth day of March One thousand eight hundred and Sixty Five

Alex. Wannop

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of John Dyson, Relieving officer Longtown humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Hodgson, Weaver, Longtown your Petitioner's (3) Ward is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Robert Hodgson to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

X John Dyson

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 29th (4) day of March One thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Robert Hodgson
2. Sex and Age,	Male. 67 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Weaver
5. Religious Persuasion, so far as known,	W. P. Church
6. Previous Place of Abode,	Back St. Longtown
7. Place where Found and Examined,	Back St Longtown
8. Length of time Insane,	about 20 years
9. Whether first attack,	No 3rd attack
10. Age (if known) on first Attack,	27 years
11. When and where previously under Examination and Treatment,	Never — and nowhere
12. Duration of existing Attack,	about 6 weeks
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Not taken
16. Whether Dangerous to others,	Occasionally threatens
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Longtown Union
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Elizabeth Hodgson, Back St Longtown, his wife.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 29th day of March One thousand eight hundred and sixty six

(*To be signed by Party applying*) X John Dyson

F. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Smith Kerr being a (1) Doctor of Medicine and Member of the Roy. Coll. Surg. Edinr. and being in actual practice as a (2) Medical Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) Robert Hodgson, a weaver and pauper and that the said Robert Hodgson is a (5) Person of Unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

He says that his soul is eternally lost. He labours under melancholy. He comp[illegible] of sleeplessness.—

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Mr. Graham, Surgeon to Longtown Union. [illegible] that he thinks this case is one of suicidal [illegible] that he is often violent and threatening.

Name and Medical Designation, William S. Kerr [illegible]

Place of Abode, Dumfries

DATED this 28th day of March One thousand eight hundred and Sixty-Six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Gueson being a (1) Member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Robert Hodgson, weaver and pauper from Longtown and that the said Robert Hodgson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is dull, [illegible] and brooding — says, in answer to the question of [illegible] is the matter with him, that his soul is eternally [illegible] and that in consequence he is wretched, [illegible] and sleepless & wishes himself dead, but [illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

his destiny is to be one of perpetual earth[illegible] torture —

Name and Medical Designation, J. Pearson M.B.C.

Place of Abode, Southern Counties Asylum [illegible]

DATED this twenty-eighth of March One thousand eight hundred and Sixty-Six years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Smith Kerr 2 Dist.
being (1) Doctor of Medicine & Member Roy. Coll of Surgeons
hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum
in the County of Dumfries, seen and personally examined
Robert Hodgson., and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

William S Kerr M.D.

Dated this 28th day of March One thousand eight hundred and Sixty Six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Alexander Hannay Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dixon
Relieving Officer Longtown Union
Certificates under the hands of William Smith Kerr
and Samuel Grierson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Robert Hodgson, Weaver, Longtown a pauper and that the said
Robert Hodgson is a (5) Person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Robert Hodgson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Hodgson which accompanied the said Petition.

Dated this Second day of April One thousand eight hundred and Sixty Six Years

A Hannay

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

111

Robert Hodgson
28th March
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Shire of Dumfries and his Substitutes.

The Petition of Joseph Critchlow, Inspector, for Canonbie humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Dixon your Petitioner's (3) charge is at present in a state of Mental Derangement and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Dixon to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

J. Critchlow

DATED this Thirtieth (4) day of March One thousand eight hundred and Sixty six.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Elizabeth Dixon
2. Sex and Age,	Female, 35
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Muncaster
7. Place where Found and Examined,	Hollinhurst Canonbie
8. Length of time Insane,	One month
9. Whether first Attack,	Second
10. Age (if known) on first Attack,	34
11. When and where previously under Examination and Treatment,	Manchester
12. Duration of existing Attack,	Nine hours
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	~~No~~ Yes
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Canonbie
18. Date of becoming Chargeable,	31st March 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mary Young Hollinhurst Canonbie Mother- None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirtieth day of March One thousand eight hundred and Sixty Six.

(To be signed by Party applying) J. Critchlow

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Arthur Macaulay being a (1) Member of the College of Surgeons of Eng and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Hollinhurst in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Dixon, Dumfries and that the said Elizabeth Dixon is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Appearance & behaviour - Constantly threatening to destroy her life.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Arthur Macaulay

Place of Abode, Canonbie

DATED this 31st day of March One thousand eight hundred and Sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Samuel Grierson being a (1) Member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Dixon from Hollinhurst, Canonbie, a pauper and that the said Elizabeth Dixon is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Great depression — Constantly whinging and weeping — [illegible] herself of having been the means of [illegible] to several families; and dreading that this loss [illegible]

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) reason (her own expression) is but a part, or [illegible] of retributive justice praying the doc[illegible] to assure her that there is yet hope — that it be otherwise occupied.

Name and Medical Designation, J. Grierson. M.D.

Place of Abode, Southern Counties Asylum

DATED this 31st day of March One thousand eight hundred and Sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Aeneas Macaulay being (1) a Surgeon hereby certify, on soul and conscience, that I have this day, at (2) Hollinhirst in the County of Dumfries, seen and personally examined Elizabeth Dickson, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Aeneas Macaulay

DATED this 30th day of March One thousand eight hundred and Sixty Five

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

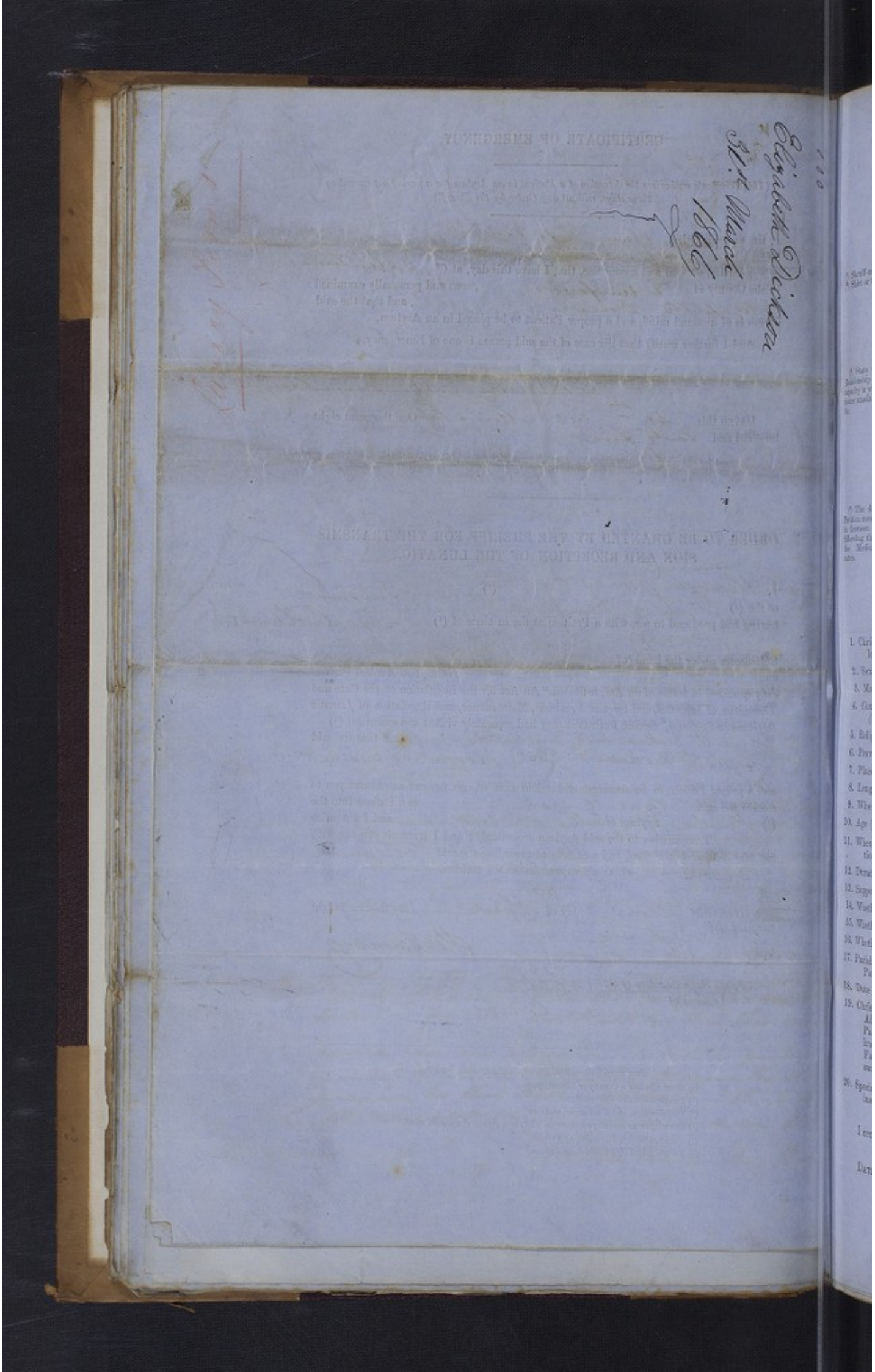
I, Alexander Hannay Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Joseph Crichton Inspector of Poor Canonbie Certificates under the hands of Aeneas Macaulay and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Dickson, Hollinhirst, Canonbie, a pauper and that the said Elizabeth Dickson is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Dickson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Dickson which accompanied the said Petition.

DATED this Second day of April One thousand eight hundred and Sixty Five

Alex Hannay

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.



N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap. 54, Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable, the (1) Sheriff *of the* (2) County of ~~Dumfries~~ ~~Stewartry~~ *and his Substitutes,—*

The Petition of Alexander Reid Windsor House, Wardie humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Eliza Christian Reid, Windsor House Wardie your Petitioner's (3) Mother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Eliza Christian Reid to the Crichton Royal Institution Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Alex Reid.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this twenty ninth (4) day of March One thousand eight hundred and Sixty Six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Eliza Christian Reid.
2. Sex and Age,	Female. 56 next May.
3. Married, Single, or Widowed,	Widow.
4. Condition of Life, and previous Occupation (if any),	None
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Windsor House, Ferry Road, Wardie, Edinburgh
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	About 12 Months with a lucid interval of
9. Whether first attack,	2½ months. Not first attack.
10. Age (if known) on first Attack,	About 26
11. When and where previously under Examination and Treatment,	Mr Whitehouse Private Asylum, Inverness.
12. Duration of existing Attack,	About 12 months with 2½ months lucid interval
13. Supposed Cause,	Anxiety about leaving her last House
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Not to my knowledge.
16. Whether Dangerous to others,	Has threatened violence when excited
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not Pauper.
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James R. Reid, Bengal Civil Service. Nawabgunge. Son.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this twenty ninth day of March One thousand eight hundred and Sixty Six

(*To be signed by Party applying*) Alex Reid.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, James Dunsmure being a (1) Physician & Fellow of the Royal Coll Surgeons and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Windsor Cottage - Wardie in the County of Edinburgh separately from any other Medical Practitioner visited and personally examined (4) Mrs Eliza Christian Reid and that the said Eliza Christian Reid is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Melancholia & occasional excitement
Distress about money matters —

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Occasional threatened violence —

Name and Medical Designation, James Dunsmure

Place of Abode, 53. Queen Street - Ed

DATED this 29th day of March One thousand eight hundred and Sixty Six —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, Hugh Grainger Stewart being a (1) graduate in medicine of the University of Edinb and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mrs Eliza Christian Reid of Windsor Cottage Wardie and that the said Eliza Christian Reid is a (5) Person of unsound mind and a lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Is much excited weeps, says she is ruined and that her family is ruined. Says she will be murdered and is in great mental distress —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Informed of her son Alexander Reid Medical Student that she escaped out of her house partially dressed, & that she has threatened violence

Name and Medical Designation, H G Stewart M.D.

Place of Abode, Crichton Royal Institution,

DATED this 2nd day of April One thousand eight hundred and Sixty six —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James Dunsmure being (1) Physician & Fellow of the Royal College of Surgeons hereby certify, on soul and conscience, that I have this day, at (2) Windsor Cottages, Lyardie, in the County of Dumfries, seen and personally examined Mrs Eliza Christian Reid, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

James Dunsmure

DATED this 29th day of March One thousand eight hundred and Sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexander Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Alexander Reid Windsor House, Lyardie Certificates under the hands of James Dunsmure and Hugh Grainger Stewart, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Eliza Christian Reid, Windsor House Lyardie and that the said Eliza Christian Reid is a (5) Person of unsound mind and a lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Eliza Christian Reid as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Eliza Christian Reid which accompanied the said Petition.

DATED this Third day of April One thousand eight hundred and Sixty six

John A. Trotter

To the Superintendent of the (7) Asylum of Public Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1034

Eliza Christian Reid

2/14/66

1034. Rec. 8. Oct. 2/4/1864

CRICHTON ROYAL INSTITUTION,

SOUTHERN COUNTIES' ASYLUM,

FOR THE SHIRES OF DUMFRIES AND WIGTOWN, AND STEWARTRY OF KIRKCUDBRIGHT.

Trustees.

Mrs CRICHTON of Friars' Carse.
Lieut.-Colonel GRIERSON of Barndennoch.
J. MACALPINE LENY, Esq. of Dalswinton.

Extraordinary Trustees.

His Grace the Duke of Buccleuch.
The Right Hon. the Earl of Galloway.
The Right Hon. the Earl of Selkirk.
The Lord-Lieutenant of the Shire of Dumfries.
The Member for the County of Dumfries.
The Sheriff of the Shire of Dumfries.
The Minister of St. Michael's Church, Dumfries.

Directors.

Thomas Simpson, Esq. of Dalswoodie.
M. C. Maxwell, Esq. of Terregles.
P. Dudgeon, Esq. of Cargen.
Thomas Stewart Gladstone, Esq. of Capenoch.
James Hotchkis, Esq., Summerville.

Officers.

James Gilchrist, M.D., Resident Physician.
H. G. Stewart, M.D., Medical Assistant.
Mrs Hearder, Matron.
And. Henderson, Superintendent.

R. Adamson, Esq.,
S. Adamson, Esq., } Treasurers.

Rev. G. Cowans, Chaplain.

Patients will be received on presenting or transmitting at the time of, or previous to, their admission, the following documents:—A written application from the nearest of kin, guardians, or Inspector of Poor, to the Resident Medical Officer, Dr Gilchrist; certificates of lunacy and a warrant from the Sheriff, as required by law; also an obligation from the Inspector of Poor, or other satisfactory Obligant, to pay the board of Patients, which includes clothes and bedding, and to comply with all rules and regulations as to their removal and burial.

All applications for admission should be forwarded at least three days before the arrival of the Patient, that time may be given for correspondence, and that due preparation may be made for his or her reception. Patients will be received between 8 A.M. and 8 P.M. upon every lawful day.

The board must, in all cases, be paid to the Treasurer in advance, quarterly, at the terms of Whitsunday (15th May), Lammas (1st August), Martinmas (11th November), and Candlemas (2d February); and when the Patient first enters, a full quarter's board, and the proportion of the quarter current at the time, will be required; and there will be no return nor repayment of the board so advanced. It shall include charges of all kinds; no fees being exigible by the Medical or any other Officers on admission or discharge, or at any other time, or upon any pretext whatever.

Visitors will be permitted to see all parts of the House on Wednesdays, between the hours of ten and twelve o'clock, on presenting an order, signed by a Trustee, Director, or one of the Medical Officers, but at no other time; and they are strictly prohibited from seeing or mingling with Patients of any class, without the express sanction of the Resident Medical Officer. The friends or guardians of Patients will be permitted to have free and private communication with them, if convalescent, between ten and twelve o'clock every lawful day; and, in all cases, to see and converse with them in presence of an officer, should such intercourse be considered safe or salutary; but no visitor, friend, or guardian, can be allowed to convey to the Patients any article of food or dress, books, newspapers, &c., without the knowledge and approbation of the Resident Medical Officer.

Patients are not allowed to have a right to any remuneration for their labour; but small rewards will be occasionally given as an encouragement during residence, or a provision on dismissal.

Patients when admitted will be provided with all articles of clothing by the Institution; their own clothes being retained until dismissal or death, when they will be returned to the friends or guardians. Patients when recovered are discharged on the representation of the Resident Medical Officer to the Trustees and Directors, but he is required to communicate with the persons by whom the obligation for board, &c., is signed, before the dismissal of any Patient; should they neglect or refuse to comply with the request for a week after the time fixed for removal in the notice, the rate of board for which they are responsible may be doubled, or the Patient sent to his or her home or parish at their expense.

A fortnight's notice of the intention of friends or guardians to remove a Patient must be forwarded to the Resident Medical Officer.

The Patients will be, under every variety of circumstances, and under every aspect of the malady, visited by the Resident Medical Officer, Matron, and Medical Assistant, always once or twice a-day, and in general they will be inspected, almost every hour, by these or the other Officers. The grand principles of moral treatment upon which the Institution will be conducted are justice, kindness, and occupation; and, by the application of these, the Patients, in so far as is consistent with their condition, will be induced to regard the Asylum as a home, and those to whose care they are entrusted as friends and companions.

Answers to the following Queries are solicited in all cases, if possible, from the MEDICAL ATTENDANT :—

QUERIES.	ANSWERS.
1. Name age, condition, occupation, disposition, amount of education, and general deportment of the Patient.	Eliza Christian Reid - 56 Scotch Widow. Lady. ordinary education for La
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	Cannot answer this
3. Before the incursion of the disease, were there observed any unusual depression or elevation of spirits, any marked alterations in the functions of the body, or in the temper, opinions, conduct, sleep, &c.?	Temper more irritable before the incursion of the disease -
4. Has the Patient been subject to epilepsy, or other convulsive affections, previous to or during the existence of insanity; and for what other diseases or accidents has medical or surgical treatment been at any time required?	No. Always healthy -
5. What have been, and are, the prominent symptoms of the malady? has any obvious change in its form occurred; and does it appear to be increasing, declining, or stationary?	Melancholia about her circumstances - Stationary -
6. Mention the present state of the external senses; of the appetite, digestion, and evacuations; of the pulse, respiration; and of all other functions, so far as they can be ascertained.	Good -
7. Is this the first attack, or a relapse? by what peculiarity of constitution or manner was it ushered in—if a relapse, of what duration was the lucid interval? and what has been the number of previous attacks?	A relapse after 2½ months of lucid interval - Not the first attack - This is the 4th
8. What have been, and are, the delusions, habits, peculiarities, and pursuits of the Patient, during the night as well as the day, since the invasion of insanity?	No distinct delusion, except distress of mind from her supposed bad circumstances - very restless and irritable during both day & night -
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	Not to my knowledge -
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid tenin of thought excited by any particular subject or event?	Has under excitement threatened violence to persons -
11. Is the Patient or his relatives subject to any hereditary, nervous, or periodical disease, and what? or have they manifested any peculiarity, eccentricity, or preeminent propensity, or tendency to crime?	Not to my knowledge
12. What treatment has been resorted to, for what length of time, and with what success?	5 months in a private asylum Partial Cure
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	17 months -

20 & 21 *Vict., Cap.* 71. *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) ~~Steward~~ Sheriff of the (2) ~~Stewartry~~ Shire of Kirkcudbright and his Substitutes,—

The Petition of John Mc Watson, Inspector of Poor of the Parish of Twynholm

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Sarah Crosbie is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Sarah Crosbie to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Watson

(3) The date of the Petition must be within-mentioned clear days following the dates of the Medical Certificates.

DATED this 31st (3) day of March one thousand eight hundred and Sixty Six

STATEMENT.

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

1.	Christian Name and Surname of Patient at length,	Sarah Crosbie
2.	Sex and Age,	Female — 14 years
3.	Married, Single, or Widowed,	Single
4.	Condition of Life, and previous Occupation (if any),	Servant
5.	Religious Persuasion, so far as known,	Protestant Church of Scotland
6.	Previous Place of Abode,	Twynholm Village
7.	Place where Found and Examined,	Do.
8.	Length of time Insane,	2 or 3 Months
9.	Whether first Attack,	Yes
10.	Age (if known) on first Attack,	14 years
11.	When and where previously under Examination and Treatment,	—
12.	Duration of existing Attack,	2 or 3 Months
13.	Supposed Cause,	A Question for a Doctor
14.	Whether subject to Epilepsy,	No.
15.	Whether Suicidal,	No certain symptoms
16.	Whether Dangerous to others,	Yes
17.	Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Twynholm
18.	Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Alexander Crosbie, Father Twynholm Village. No insanity in the family.
19.	Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, John Watson

DATED this 31st day of March one thousand eight hundred and Sixty Six

* To be Signed by the Party applying.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Shand
being a (1) Physician
and being in actual practice as a (2) a General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Tweynholm in the County
Kirkcudbright separately from any other Medical Practitioner
visited and personally examined (4) Sarah Crosbie and
the said Sarah Crosbie pauper is a (5) person
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6)
Incoherency & confusion of manner, laughs without a cause.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
stubbornness & excitability of temper occasionally she
has evil & obscene language, at times destructive
may do. (By parents) Laughing without reason & doing various
things foolishly without any cause (By Inspector)

(SIGNED) Name and Medical Designation, John Shand J.P.

Place of Abode, Kirkcudbright

DATED this 29th day of March One thousand
hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Cummin
being a (1) Doctor of Medicine
and being in actual practice as a (2) General practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Twynholm in the County
Kirkcudbright separately from any other Medical Practitioner
visited and personally examined (4) Sarah Crosbie a pauper and
the said Sarah Crosbie is a (5) person
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) She is at
times refuses to answer questions,
at other times she answers quite willingly
and when speaking on any subject gets
incoherent, and mixes two or three others stories, as

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
By the Parents, That she has within the last
months entirely changed in character and disposition
From being of a pleasant temper she has got sullen, mor-
dacious, and violent, she cries by the day, and quite incoherently
By her former mistresses, that she was subject to occasional fits of laughing without
any cause whatever, & apparently enjoying no
of the mischief she was

(SIGNED) Name and Medical Designation, William Cummin
M.D. Cant.

Place of Abode Kirkcudbright

DATED this 30th day of March one thousand
hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that is a (1) hereby further certify that the Case of the said is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of one thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar (1) Geo. Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) John Watson Certificates under the hands of John Shand and William Cumming, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Sarah Crosbie a pauper and that the said Sarah Crosbie is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Sarah Crosbie as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Sarah Crosbie which accompanied the said Petition.

(SIGNED) W H Dunbar

DATED this Second day of April one thousand eight hundred and Sixty six.

To the Superintendent of the (7) Southern Counties *Asylum of* Dumfries.

---

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

Sarah Crosbie

5th April

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Shire of Dumfries and his Substitutes,—

The Petition of Joseph Welsh Inspector of Poor Dalgarnock humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Gibson High Street Dumfries your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Isabella Gibson to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Joseph Welsh Inspector of Poor

Dated this Sixth (4) day of April One thousand eight hundred and Sixty Six Years

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Isabella Gibson
2. Sex and Age,	Female aged 75 years
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Housekeeper Widow
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	No High Street Dumfries
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	more or less for the last 3 years
11. When and where previously under Examination and Treatment,	Not under treatment or Examination till now
12. Duration of existing Attack,	more or less for the last 3 years
13. Supposed Cause,	decline of body
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Dalgarnock
18. Date of becoming Chargeable,	4th September 1863
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Sixth day of April One thousand eight hundred and Sixty Six

(To be signed by Party applying) Joseph Welsh Inspector of Dalgarnock

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation, and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, *or* a person of unsound mind.

I, the undersigned, Patrick Dunan
being a (1) Graduate of the University of Edin
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) 64 High
Dumfries
Dumfries in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Isabella Gibson Pau
and that
the said Isabella Gibson is a (5) an idiot and
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Person entirely
talks incoherently, rambling from one thing
to other, cannot perform toilet properly
occupies herself mineparably by putting the chair
furniture out of room, & then down again

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The person with whom she stays
says that if she were left alone she would
be afraid may be liable to be burned, & I am informed
by Mrs Lochhead Inspector of Poor that she has been in the habit of throwing herself

Name and Medical Designation, P. Dunan M.D.

Place of Abode 22 Buccleuch St Dumfries

DATED this 5th day of April One thousand eight hundred and 66

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an Idiot, *or* a person of unsound mind.

I, the undersigned, Alexander Ferguson
being a (1) Graduate of the University of Edinbu
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) 64 High Stree
Dumfries in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Isabella Gibson a Pau
and that
the said Isabella Gibson is a (5) an Idiot and
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks and sin
is a childish & incoherent rambling kind
mind wanders at once from any topic introd

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Gibson the Daughter in law states that she can
be left alone with safety as she is so destructive
and disposed to wander about

Name and Medical Designation, Alex. Ferguson M.D.

Place of Abode Dumfries

DATED this 5th day of April One thousand eight hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexander Rotter Esquire (1) Advocate Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Joseph Welch Inspector of Poor Dumfries Certificates under the hands of Patrick Murray M.D. and Alexander Barbrick M.D., being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Isabella Gibson High Street Dumfries a pauper and that the said Isabella Gibson is an (5) insane person and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Isabella Gibson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Isabella Gibson which accompanied the said Petition.

DATED this Sixth day of April One thousand eight hundred and sixty six years

J. Alex. Rotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Isabella Gibson
6th April
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(*) Sheriff or Steward.
(*) Shire or Stewartry.

Unto the Honourable the (*) Sheriff of the (*) Shire of Dumfries and his Substitutes,—

The Petition of Joseph Welsh Inspector of Poor Froguer

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Warnock your Petitioner's (§) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Warnock to the Southern Counties Asylum and to sanction Her admission into the the said Asylum.

(§) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Joseph Welsh

DATED this Seventeenth (*) day of April One thousand eight hundred and Sixty Six

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mary Warnock
2. Sex and Age,	Female 19 Years of Age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Single & resided with Her parents
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Cargenbridge Froguer
7. Place where Found and Examined,	Cargenbridge Froguer
8. Length of time Insane,	Twenty Months
9. Whether first Attack,	First Attack
10. Age (if known) on first Attack,	17 years of Age
11. When and where previously under Examination and Treatment,	Cargenbridge Froguen, Occasionly
12. Duration of existing Attack,	Twenty Months
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Dangerous of late
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Froguer
18. Date of becoming Chargeable,	16th April 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Warnock Stone Mason Cargenbridge Froguer Her Father
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 17th April day of April One thousand eight hundred and Sixty Six

(*To be signed by Party applying*) Joseph Welsh

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Murray being a (1) Graduate of the University of Edin and being in actual practice as a (2) Physician hereby certify on soul and conscience, that I have this day, at (3) Largon Bu Shrubbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Warnock a pau and that the said Mary Warnock is a (5) an unsa and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks incohe ed often speaking to herself; cannot answer questions put to her, seems m minded

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Sir Walter Scott the state that she the asylum in the house, imagines the the last bottle (which I am, but do see for time) pa

Name and Medical Designation, P. Murray.

Place of Abode, Breadalbane Dum

DATED this day of April One thousand eight hundred and 66

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Fenwick being a (1) Graduate of the University of Edinbur and being in actual practice as a (2) Physician Regg comp hereby certify on soul and conscience, that I have this day, at (3) Largon Bui Shrubbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Warnock a Pauper and that the said Mary Warnock is a (5) an insane p and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks to herse a good deal, and is incoherent and ill minded in her conversation

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Parents state that she is sometimes dejec at other times excited, violent, destructive and constant watching

Name and Medical Designation, Alex Fenwick M.D.

Place of Abode, Dumfries

DATED this 4th day of April One thousand eight hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Joseph Welsh
Inspector of Poor Ecquier
Certificates under the hands of Patrick Murray
and Alexander Borthwick, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Mary Warnock Cargen Bridge Ecquier (a pauper) and that the said
Mary Warnock is a (5) an insane person
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Warnock as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Warnock which accompanied the said Petition.

DATED this Seventeenth day of April One thousand eight hundred and sixty six

John P. Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/192

Mary Warnock

17/4/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) *of the* (2) *of* *and his Substitutes,*—

Carlisle

The Petition of Elizabeth Fisher Nunfield humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Fisher your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Fisher to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Elizabeth Fisher

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 20th (4) day of April One thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Thomas Fisher
2. Sex and Age,	Male. 29
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Yeoman & Farmer
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Nunfield
7. Place where Found and Examined,	Nunfield
8. Length of time Insane,	three or four months
9. Whether first attack,	yes
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	three or four months
13. Supposed Cause,	Received a wound on his head
14. Whether subject to Epilepsy,	Has been excited [illegible]
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	no
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Elizabeth Fisher. Mother Nunfield. Cumwhitton Carlisle
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	No relative insane.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 20th day of April One thousand eight hundred and sixty six

(*To be signed by Party applying*) Elizabeth Fisher

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robert Brown
being a (1) Fellow of the College of Surgeons of
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Nunfie
in the Coun
Cumberland separately from any other Medical Practiti
visited and personally examined (4) Thomas Fisher. Yeoma
and
the said Thomas Fisher is a (5) person
Unsound mind and a proper person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

States that he has a craving after the fle
Believes that he has committed some great wron
& wishes to escape —

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

His mother says that he has attempt
several times to escape, breaking through
window & was violent when restrained

Name and Medical Designation, Robert Brown Surg

Place of Abode, 5 Devonshire Street

DATED this 20th day of April One thousand
hundred and sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Stewart Lockie
being a (1) Doctor of Medicine (Edinburgh)
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Nunfie
in the Coun
Cumberland separately from any other Medical Practiti
visited and personally examined (4) Thomas Fisher, Yeoma
and
the said Thomas Fisher is a (5) person of
unsound mind and a proper person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Says that when he jumped through the
he wanted to go to death, to be clear,

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

His Mother says he constantly wants to escape from his
friends, in order to transact some in
business —

Name and Medical Designation, Stewart Lockie

Place of Abode, 7 Devonshire Street, Ca

DATED this 20th day of April One thousand
hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Robert Brown being (1) Fellow of the College of Surgeons of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Kirkfield in the County of Cumberland, seen and personally examined Thomas Fisher, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Robert Brown

DATED this 20th day of April One thousand eight hundred and Sixty Six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Fisher Esquire (1) Advocate Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Elizabeth Fisher Kirkfield near Carlisle Certificates under the hands of Robert Brown Surgeon and Stewart Lockie M.D., being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Thomas Fisher, Yeoman, Son of Petitioner and that the said Thomas Fisher is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Fisher as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize His Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Fisher which accompanied the said Petition.

DATED this twenty third day of April One thousand eight hundred and sixty six years.

John P Fisher

To the Superintendent of the (7) Public Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Thomas Fiske

21/4/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Shire of Dumfries and his Substitutes,—

The Petition of Thomas Davidson Insp.r Dumfries

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Mc Millan by Name & Glasgow

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Patient is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Mc Millan to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

Thomas Davidson

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 24th (4) day of April One thousand eight hundred and Sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Mc Millan
2. Sex and Age,	Female 25 –
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Glasgow
7. Place where Found and Examined,	Glasgow & Dumfries
8. Length of time Insane,	A few days
9. Whether first Attack,	Second attack
10. Age (if known) on first Attack,	19 or 20
11. When and where previously under Examination and Treatment,	1865 Asylum
12. Duration of existing Attack,	A few days
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	23 April 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Mc Millan Father, Enterkin Post – none
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 24th day of April One thousand eight hundred and Sixty six.

(*To be signed by Party applying* Thomas Davidson

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Smith Kerr being a (1) Doctor of Medicine and Licentiate of the Royal Coll of Surgeons of Edinburgh and being in actual practice as a (2) Medical Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Agnes Mc Millan, a domestic servant, a pauper. and that the said Agnes Mc Millan is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

There is great incoherency. Great restlessness and excitement, and refuses constantly to be looked after.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Attendant states that she has taken no food for some days.

Name and Medical Designation, William S Kerr MB

Place of Abode, Buccleuch St. Dumfries

DATED this 24th day of April One thousand eight hundred and Sixty Six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an Idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Gilchrist MB being a (1) Graduate of the University of Edinburgh & American and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Agnes McMillan Domestic servant a pauper and that the said Agnes McMillan is a (5) person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is excited and incoherent

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Her attendant says she has taken no food for some

Name and Medical Designation, Gilchrist M

Place of Abode, Ruthven House

DATED this 24th day of April One thousand eight hundred and Sixty Six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Smith Kerr
being (1) a Doctor of Medicine and Lic. Roy. Coll Surgeons, Edinr.
hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum
in the County of Dumfries, seen and personally examined
Agnes McMillan, a pauper, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

William S Kerr MD.

Dated this 24th day of April One thousand eight hundred and Sixty Six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Thomas Davidson
Inspector of Poor Burrieder
Certificates under the hands of William Smith Kerr
and James Gilchrist, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Agnes McMillan lately in Glasgow (a pauper) and that the said
Agnes McMillan is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes McMillan as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes McMillan which accompanied the said Petition.

Dated this Twenty fifth day of April One thousand eight hundred and sixty six

J H P Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Agnes McMillan
24 April
1866

Crichton Royal Institution at Dumfries.

~~(Glasgow Royal Asylum for Lunatics, Gartnavel)~~

[20 & 21 *Vic. Cap.* 71, *Sect.* 34.]

PETITION TO THE SHERIFF
TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(1) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (1) County of Dumfries *and his Substitutes,*—

State the relationship of the Petitioner to the Patient.

The PETITION of James Crawford Coal Merchant residing at Townhead Glasgow humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Eliza Ellice Crawford my daughter residing at ~~Town Head~~ 47 Glebe Street Townhead Glasgow is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorise the transmission of the said Eliza Ellice Crawford to the Crichton Institution for lunatics at Dumfries ~~GLASGOW ROYAL ASYLUM FOR LUNATICS, AT GARTNAVEL~~, and to sanction ~~his~~ admission into the said Asylum.

(SIGNED) James Crawford

(2) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this First (2) day of May One Thousand Eight Hundred and Sixty Six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Eliza Ellice Crawford
2. Sex and Age,	Female aged 30.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Teacher
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	47 Glebe Street Townhead Glasgow
7. Place where Found and Examined,	At the above address
8. Length of time Insane,	About 8 years
9. Whether first Attack,	no
10. Age (if known) on first Attack,	23 years
11. When and where previously under Examination and Treatment,	At Gartnaval & Crichton Royal Institution
12. Duration of existing Attack,	Change in the phase of the lunacy days
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy or Palsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	The Petitioner Patients father no
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	The patient has been Continuously ill for several years

I Certify that, to the best of my knowledge, the above Particulars are correctly stated.

(SIGNED)* James Crawford

DATED this First day of May One Thousand Eight Hundred and Sixty Six

[4.]

* To be Signed by the Party applying.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the Street and Number of the House (if any), or other like particulars.*

(4) *Insert Designation and Residence; and if a Pauper, state so.*

(5) *Lunatic, or an Insane Person, or an Idiot, or a Person of Unsound Mind.*

I, the undersigned, Henry Robertson Howatt being a (1) Fellow of the Faculty of Physicians and Surgeons Glasgow and being in actual practice as a (2) General Practitioner do hereby Certify, on soul and conscience, that I have this day, at (3) 47 Glebe Street Glasgow — in the County Lanark separately from any other Medical Practitio visited and personally examined (4) Elina Ellice Crawford residing at 47 Glebe Street Glasgow and the said Elina Ellice Crawford is a (5) person of unsound mind and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.—

(6) *State the facts.*

I. Facts indicating Insanity observed by myself: (6) Looking and gestulating wildly, talk incoherent, with oaths & fm dangerous herself and others. I have on previous occasions certified her & be a fit patient for a Lunatic Asylum

(7) *State the information, and from whom derived*

II. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr Crawford her mother residing at 47 Glebe Street tells me she has been very troublesome for some days tearing every-thing and cannot be left a moment alone

(SIGNED) *Name and Medical Designation,* H. R. Howatt M.D.

Place of Abode, 1 Apsley Place Glasgow

DATED this twentysixth day of April One Thousand Eig Hundred and sixtysix years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the Certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the Street and Number of the House (if any), or other like particulars.*

(4) *Insert Designation and Residence; and if a Pauper, state so.*

(5) *Lunatic, or an Insane Person, or an Idiot, or a Person of Unsound Mind.*

I, the undersigned, [illegible] M.D. being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician do hereby Certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County Dumfries separately from any other Medical Practitione visited and personally examined (4) Elsa Ellice Crawford residing at 47 Glebe Street Glasgow and th the said Elsa Ellice Crawford is in a (5) state of unsound mind and a proper person to be detaine under Care and Treatment, and that I have formed this opinion upon the followin grounds, viz.—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Is in a state of violent excitement and [illegible] incoherent

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Has been excited since Thursd last as stated by her father

(SIGNED) *Name and Medical Designation,* [illegible] M.D.

Place of Abode, Crichton House Dum

DATED this Fourt day of May One Thousand Eight Hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in Cases in which the Urgency of the Symptoms renders hazardous the delay necessary to procure a second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further Certify that the Case
of the said is one of Emergency, and I recommend the immediate Removal of the said
to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of One Thousand Eight Hundred and

(1) Lunatic, or an Insane Person, or an Idiot, or a Person of Unsound Mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) James Crawford
Coal merchant Townhead Glasgow,
Certificates under the hands of Henry Robertson Howatt
and James Gilchrist , being two Medical Persons
duly qualified in terms of an Act, entituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Eliza Ellice Crawford, 47 Glebe Street Townhead Glasgow and that the said
Eliza Ellice Crawford is a (5) person of unsound mind
and a proper person to be detained and taken care of, DO HEREBY AUTHORISE you to receive the said Eliza Ellice Crawford as a Patient into the X
~~Glasgow Royal, Asylum for Lunatics, of Gartnavel~~, and I authorise her
Transmission to the said Asylum accordingly; and I transmit to you herewith the said Medical Certificates, and a Statement regarding the said Eliza Ellice
Crawford which accompanied the said Petition. Eight words deleted

(SIGNED) J. Pitc. Trotter

DATED this First day of May One Thousand Eight Hundred and Sixty five

To the Superintendent of
the (6) Public Asylum of Crichton Institution
Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him; and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of Unsound Mind.
(6) Public, District, or Private.

GLASGOW: Printed by JAMES HEDDERWICK & SON, Queen's Printers.

CERTIFICATE OF EMERGENCY.

(This Certificate authorises the detention of a Patient in an Asylum for a period not exceeding three days, without any order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Dated this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

1/195.
Eliza Ellies Crawford
1/5/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) ~~Stewartry~~ Shire *of* ~~Kirkcudbright~~ Dumfries *and his Substitutes,—*

Lochrutton The Petition of James McConchie Inspector humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Gracie is considered by your Petitioner's (3) James McConchie Insp. of Poor Lochrutton that She is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Gracie to the Southern Counties Asylum and to sanction Her admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

James McConchie

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this First (4) day of May One thousand eight hundred and Sixty Six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jane Gracie
2. Sex and Age,	Female & Fifty years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Easthill Lochrutton
7. Place where Found and Examined,	Cleughbrae Terregles
8. Length of time Insane,	One year
9. Whether first attack,	Not
10. Age (if known) on first Attack,	Forty seven years
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
12. Duration of existing Attack,	Four Days
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	Not
16. Whether Dangerous to others,	Not
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Elizabeth Gracie & Cleughbrae Terregles, Sister None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 1st day of May One thousand eight hundred and Sixty Six

(*To be signed by Party applying*) James McConchie Insp. Lochrutton

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

I, the undersigned, John Cunningham
being a (1) Licentiate of the Faculty of Physicians & Surgeons. Glasgow.
and being in actual practice as a (2) Surgeon.
hereby certify, on soul and conscience, that I have this day, at (3) Slaughhouse
in the Coun
separately from any other Medical Practitio
visited and personally examined (4) Jane Gracie
and
the said Jane Gracie is a (5) Lunatic
and a proper person to be deta
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

imagines that she is about to be murdered by every person that comes ne

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, John Cunningham, L. F. P. and S. G

Place of Abode, Coldfoot Lochrutton

DATED this 1st day of May One thousand ei
hundred and eighty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

I, the undersigned,
being a (1)
and being in actual practice as a (2)
hereby certify, on soul and conscience, that I have this day, at (3)
in the County
separately from any other Medical Practition
visited and personally examined (4)
and t
the said
is a (5)
and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation,

Place of Abode,

DATED this day of One thousand eigh
hundred and

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,*—

The Petition of James McConchie Inspector Lochrutton humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Gracie is considered by your Petitioner's (3) James McConchie Inspector of Poor Lochrutton that (She is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Gracie to the Southern Counties Asylum and to sanction Her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

James McConchie Insp.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 7th (4) day of May One thousand eight hundred and Sixty Six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jane Gracie
2. Sex and Age,	Female, Fifty years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	East Hill Lochrutton
7. Place where Found and Examined,	Cleughbrae Torregles
8. Length of time Insane,	~~[illegible]~~ Four Days
9. Whether first attack,	No
10. Age (if known) on first Attack,	Forty seven years
11. When and where previously under Examination and Treatment,	Drumslect Traqueer and Southern Counties Asylum
12. Duration of existing Attack,	~~Four Days~~ One year
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Elizabeth Gracie Cleughbrae Torregles Sister None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 7th day of May One thousand eight hundred and Sixty Six

(*To be signed by Party applying*) James McConchie

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualifications entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, John Dickson being a (1) graduate of the Edinburgh Univ and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southe Counties Asylum in the Coun separately from any other Medical Practitio visited and personally examined (4) Jane Grace. Labou - Pauper. Lunatic. and the said Jane Grace is a (5) Lunat and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is at present in a State of Mania, & expressi herself incoherently. Is in constant fear of people coming & murder her

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The Medical Superintendent informs m that she has been in the excitement de- -parture admission three days ago.- and refus food

Name and Medical Designation, John Dickson (

Place of Abode, Bucgleuch Street

DATED this 3rd day of May One thousand ei hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Gilbert McC being a (1) Graduate of the Universi of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the County Dumfries separately from any other Medical Practitio visited and personally examined (4) Jane Grace a Pauper and Labourer Lunatic and th the said Jane Grace is a (5) person of unsound Mind and a proper person to be detain under Care and Treatment, and that I have formed this opinion upon the followi grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is ex cited and violent. Frequent injures her head.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) She has been in the above Institution for two days visited by the attendants

Name and Medical Designation, Gilbert McC

Place of Abode, Crichton House Dg

DATED this 3rd day of May One thousand eig hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned John Dickson.
being (1) a Graduate of the Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum
in the County of Dumfries, seen and personally examined
Jane Grace, Labourer, Torreglen, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this 3rd day of May One thousand eight hundred and sixty six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) James M'Conchie
Inspector of Poor Lochrutton
Certificates under the hands of John Dickson
and James Gilchrist, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Jane Gracie Labourer Torreglen (a pauper) and that the said
Jane Gracie is a (5) Lunatic and a person of
Jane Gracie
unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Gracie as a Patient into the (6) Public Asylum of Southern Counties and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Gracie which accompanied the said Petition.

DATED this Eighth day of May One thousand eight hundred and sixty six

John E Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Jane Lucie
1 May 1851

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of Janet Hogg, Hillowton Nursery near Castle Douglas humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Charles Hogg, gardener & nurseryman at Hillowton your Petitioner's (3) brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Charles Hogg to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Janet Hogg

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this eleventh (4) day of May, One thousand eight hundred and Sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Charles Hogg
2. Sex and Age,	Male – 47 years
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Gardener & nurseryman
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Hillowton near Castle Douglas
7. Place where Found and Examined,	Hillowton
8. Length of time Insane,	5 weeks
9. Whether first attack,	first attack
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	never and nowhere
12. Duration of existing Attack,	5 weeks
13. Supposed Cause,	Intemperance
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Janet Hogg, Hillowton nursery his sister – Mary Grindeller Hogg his mother, also at Hillowton – Has a brother & Cousin in the Dumfries asylum
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this eleventh day of May One thousand eight hundred and Sixty six –

(*To be signed by Party applying*) Janet Hogg

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Thomson
being a (1) L. R. C. S. Edin.
and being in actual practice as a (2) general practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Killowton
in the Parish of Lerwick
Kirkcudbright
separately from any other Medical Practitioner
visited and personally examined (4) Charles Hogg, nursery man
the said Charles Hogg
is a (5) person of
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) His conduct and
manner have undergone a complete change, he was
an active and industrious man, constantly at work in
nursery — he now does nothing, but goes about muttering to
himself, taking heed of nothing in a way unlike what he used to do
and also an unusual inability for collecting his ideas when
2. Other facts (if any) indicating Insanity communicated to me by others: (7)
his brother informs me that he struck him on the face
flooring a severe blow, causing considerable bleeding
his forehead —

Name and Medical Designation, Dr. P. Thomson L.R.

Place of Abode, Castle Douglas

Dated this eleventh day of May One thousand e
hundred and Sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualifications entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Samuel Pierson
being a (1) Member of the Royal College of Surgeons
of England
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) The Asylum
Counties Asylum, Dumfries in the County
Dumfries,
separately from any other Medical Practitioner
visited and personally examined (4) Charles Hogg. Gardener
Nursery man at Willowton and
the said Charles Hogg
is a (5) person of
unsound mind,
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is very
restless & confused in manner & when spoken
to answering ask — nothing from corner to corner
objectless. His habits are slovenly and
2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
and he shows much irritability & disposition
at the efforts made to prevent him
from stripping himself and indecently exposing
self.

Name and Medical Designation, J. Pierson M.R.C.S.

Place of Abode, Southern Counties Asylum, Dumfries

Dated this 12th day of May One thousand eight
hundred and Sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Patrick Anderson
being (1) a L.R.C.S.Edin and General Practitioner
hereby certify, on soul and conscience, that I have this day, at (2) Hillowton Nursery
in the County of Kirkcudbright, seen and personally examined
Charles Hogg, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Patk. Anderson

Dated this fourth day of May One thousand eight hundred and Sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esqure (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Janet Hogg, Hillowton Nursery, near Castle Douglas
Certificates under the hands of Patrick Anderson
and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Charles Hogg Gardener & Nurseryman, Hillowton aforesaid and that the said Charles Hogg is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Charles Hogg as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Charles Hogg which accompanied the said Petition.

Dated this Fourteenth day of May One thousand eight hundred and Sixty Six years

John P. Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/198

Charles Hogg

11/5/66

Charles Hogg

May 1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Lanark *and his Substitutes,—*

The Petition of Mrs Agnes Fraser or Dunsmore Sport Merchant Govan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Fraser Sport Merchant Govan your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander Fraser Dumfries to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Henry Dunsmore
X Mrs Agnes Fraser or X Dunsmore Mother

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this thirtieth (4) day of August One thousand eight hundred and sixty-five.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Alexander Fraser
2. Sex and Age,	Male - 20 years -
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Kept a shop -
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Renfrew.
7. Place where Found and Examined,	Glasgow Royal Asylum Gartnavel
8. Length of time Insane,	About 15 months.
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	19 years.
11. When and where previously under Examination and Treatment,	Glasgow Royal Asylum Gartnavel
12. Duration of existing Attack,	About 15 months.
13. Supposed Cause,	Sequelae of small pox & scarlet fever.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No - But at times apt to injure himself
16. Whether Dangerous to others,	At times suddenly. —
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	His mother who resides at 162 Paisley Road Glasgow none
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this thirtieth day of August One thousand eight hundred and sixty-five

Henry Dunsmore

(*To be signed by Party applying*) X Mrs Agnes Fraser or Dunsmore X Mother

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Alexander Mackintosh M.
being a (1) Licentiate of the Faculty of Physicians and
of Glasgow
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Glasgo
Asylum Gartnavel in the County
Lanark,
separately from any other Medical Practitio
visited and personally examined (4) Alexander Fraser pa
patient in the Glasgow Royal Asylum Gartnavel and t
the said Alexander Fraser is a (5) person
unsound mind and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is qu
incoherent; and often very absent
mind, and unconscious of his action

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Alexander Mackintosh M.

Place of Abode, Gartnavel, Glasgow

DATED this twenty-sixth day of August One thousand eigh
hundred and sixty-five.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Robert Blair M.D.
being a (1) Graduate of the Glasgow Universit
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Glasgo
Royal Asylum Gartnavel in the County o
Lanark
separately from any other Medical Practitioner
visited and personally examined (4) Alexander Fraser, at present a
patient in the Glasgow Royal Asylum Gartnavel and that
the said Alexander Fraser is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is in a ver
confused and stupid state; talks incoherent
and incapable of governing his actions.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Robert Blair M.D.

Place of Abode, Gartnavel, Glasgow

DATED this twenty-sixth day of August One thousand eight
hundred and sixty-five.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Alexander Eushine Murray Sheriff & substitute
of the (2) County of Lanark
having had produced to me, with a Petition at the instance of (3) Mrs Agnes Fraser or Dunsmore Spirit Merchant Govan
Certificates under the hands of Alexander Mackintosh
and Robert Blair, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexander Fraser presently in the Public Asylum of Glasgow at Gartnavel and that the said Alexander Fraser is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Fraser as a Patient into the Public Crichton Royal Institution Dumfries (6) Asylum of and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Fraser which accompanied the said Petition.

DATED this twenty first day of August One thousand eight hundred and sixty five

A Eushine Murray

To the Superintendent of the (7) Public Crichton Royal
Asylum of Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/199 ~~1013~~ – 1015

Alisct. Frazer

Sept. 4th 1865

Transferred to

S.G.A.

16/5/66

2

Alexander Frazer
16. May 1866

Transfer

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (1) Shire of Dumfries *and his Substitutes,—*

The Petition of Robert McLellan, Inspector of Poor, of the parish of Annan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Wilson, a poor person on the Poors ~~your Petitioner's~~ (2) Roll of the parish of Annan aforesaid is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Wilson to the Southern Counties Asylum, Dumfries and to sanction her admission into the the said Asylum.

(2) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Robert McLellan, Insp. of Poor, Annan

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Fourteenth (4) day of May One thousand eight hundred and sixty six Years

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mary Wilson
2. Sex and Age,	Female:- aged 68. Years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Single:- Previously a "Housekeeper"
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	
7. Place where Found and Examined,	Watchhill near Annan
8. Length of time Insane,	Said to be about 15. Years
9. Whether first Attack,	Not known
10. Age (if known) on first Attack,	Supposed to be about 53 Yrs at time of first attack
11. When and where previously under Examination and Treatment,	Watchhill, aforesaid
12. Duration of existing Attack,	Continuous for about 15 Years.
13. Supposed Cause,	Not known.
14. Whether subject to Epilepsy,	Not subject to Epilepsy
15. Whether Suicidal,	Not suicidal
16. Whether Dangerous to others,	Quite Harmless.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Annan
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mr. Andrew Wilson residing at Watchhill near Annan:- No Member of the Family has been known to be Insane, at any time
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Fourteenth day of May One thousand eight hundred and Sixty six Years

(To be signed by Party applying) Robert McLellan
Inspector of Poor, parish of Annan P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexr Robt Boyle
being a (1) Physician Licentiate of the Royal College of Physicians of Edinburgh
and being in actual practice as a (2) Licensed Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Amaud in the Parish of Dunsyre in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (4) Mary Wilson and that the said Mary Wilson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Is very reserve: often conversing with herself about her Rights to Landed Est. Being an Earls Daughter. Dresses meanly altho' she has good dresses in store, but refuses to wear them until she obtains

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Delusions about Wealth and Rank. Habits, frequently using Cast off Candles or smoke her Candles from home.

Further Facts in Law —

Name and Medical Designation, A. R. Boyle, M.D. &c.

Place of Abode, Twins East, Amaun

DATED this fourteenth day of May One thousand eight hundred and Sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Thomas Williamson
being a (1) Licentiate of Roy Col Surgeons of Ed
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Watchhill near Amaun in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mary Wilson a pauper residing at Watchhill Near Amaun and that the said Mary Wilson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She labours under delusions on many subjects, pretended as to Status in Society and Expectations of fortune

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) She is the habit of secluding herself from her person in whose charge she is by locking her door and refusing them access to her house when necessary Spare can told so by Mrs Wilson

Name and Medical Designation, Thomas Williamson

Place of Abode, Church St Amaun

DATED this fifteenth day of May One thousand eight hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Thomas Williamson
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Robert McLellan
Inspector of Poor of the Parish of Annan
Certificates under the hands of Agnew Black Boger
and Thomas Williamson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Wilson, Watchhill, a Pauper and that the said Mary Wilson is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Wilson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Wilson which accompanied the said Petition.

DATED this Fifteenth day of May One thousand eight hundred and Sixty Six

John P Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.
(6) Public, District, Parochial, *or* Private.
(7) Public, District, Parochial, *or* Private.

1/200

Mary Wilson

15/5/66

20 & 21 *Vict., Cap.* 71. *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Andr. Wales Inspector of Poor Glencaple

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margt. Copeland is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margt. Copeland to the Southern Counties' Asylum and to sanction his admission into the said Asylum.

(SIGNED) Andr. Wales Inspector of Poor

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this fourteenth (3) day of May one thousand eight hundred and sixty six years.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Margaret Copeland
2. Sex and Age,	Female aged 50 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Pauper. Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Resided nearly all her life in the parish of Old Luce
7. Place where Found and Examined,	Glenluce
8. Length of time Insane,	6 months
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	50 years
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	6 months
13. Supposed Cause,	Ill treatment in early youth. Blows on the head. Low living before becoming a pauper. Imbecility and Delusion about the loss of a little money.
14. Whether subject to Epilepsy,	Doubtful
15. Whether Suicidal,	Has not appeared so but at times she seems to obey imaginary beings, it is uncertain.
16. Whether Dangerous to others,	Old Luce
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	[redacted] James Copeland residing at Meaklemore — Half Brother — None known to be insane
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* Andr. Wales Insp. of Poor

DATED this fourteenth day of May one thousand eight hundred and sixty six years.

[4]

* To be Signed by the Party applying.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William McDonnell being a (1) General Practitioner and Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Glenluce Parish of Old Luce Wigtown in the County of separately from any other Medical Practitioner visited and personally examined (4) Margaret Copeland Pauper residing with Walter Hood in the village of Glenluce and that the said Margaret Copeland is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Gets easily into a fury Laughs unmotivated at times, converses with imaginary objects fancies at times that she has a large sum of money talks obscenely says that she has stones or little animals in her hand and always does so. Wh-re. of- 11-

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Edward Spratt Shoemaker residing next door to pauper that in obedience to the voice heard. She says God tells her to do it. sweeps it again and again and says as a reason that a witch or the voice heard thinks one has to punch them up nice my - 7c 7e

(Signed) Name and Medical Designation, Wm McDonnell LRCS Ed

Place of Abode, Glenluce

Dated this fourth day of March One thousand eight hundred and forty six years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, David Easton being a (1) Doctor of Medicine & Licentiate of the Royal College of Surgeons Edinburgh. and being in actual practice as a (2) general practitioner hereby certify, on soul and conscience, that I have this day, at (3) Glenluce parish of old Luce Wigtown in the County of separately from any other Medical Practitioner visited and personally examined (4) margaret Copeland. pauper residing at Glenluce - and that the said margaret Copeland is a (5) person of unsound mind. and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) her general appearance that - I am means person, dark. very excitable her eyes rolling about her countenance is incoherent and very obscene she ~~suppose~~ labours under strong delusion. supposing she has been deprived of large sums of money, personally injured and is about to be poisoned by some of her neighbours, formerly her next-door

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mrs McDonnell Glenluce states that she (Copeland) barricades the door at night is in terror of being attacked during the and supposes that her father was killed by his neighbours &c &c

(Signed) Name and Medical Designation, David Easton M.D.

Place of Abode Stranraer

Dated this fourteenth day of May one thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that is a (1) hereby further certify that the Case of the said is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of one thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John P. Ocairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Andrew Wales Inspector of Poor Glenluce Certificates under the hands of William McCormick and David Easton, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret Copeland, Glenluce, a pauper and that the said Margaret Copeland is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Copeland as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Copeland which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this Fifteenth day of May one thousand eight hundred and Sixty Five

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

---

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

1/201

Margaret Copeland

15/5/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A.]

20 & 21 *Vict., Cap.* 71., *Sect,* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,*—

The Petition of John Hope, Inspector, Tundergarth humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Graham or Howatson, a pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Graham or Howatson to the ~~Crichton Royal Institution~~ Crichton Countess Asylum and to sanction her admission into the said Asylum.

(Signed) John Hope, Inspector

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 26th (3) day of May One thousand eight hundred and sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mary Graham or Howatson
2. Sex and Age,	Female. 43.
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	. . .
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Wylehole, Tundergarth
7. Place where Found and Examined,	Wylehole, Tundergarth
8. Length of time Insane,	Six days.
9. Whether first attack,	First.
10. Age (if known) on first Attack,	43.
11. When and where previously under Examination and Treatment,	never
12. Duration of existing Attack,	six days.
13. Supposed Cause,	Unknown.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Tundergarth
18. Date of becoming Chargeable,	26th May 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	George Graham, Bogside, Brother. no.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signed)* *Name,* John Hope.

Dated this 26th day of May One thousand eight hundred and 66.

* To be signed by the Party applying.

P. p.

1
203

Mary Graham or Howatson
26/5/66

Mary Graham or Howatson
May 1866

20 & 21 *Vict., Cap.* 71. *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries and his Substitute,—

The Petition of James Wright, Minister of Parr, Hutton

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Moffat, medical practitioner, a Pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Moffat —— to the Southern Counties Asylum, Dumfries and to sanction his admission into the said Asylum.

(SIGNED) James Wright

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty Sixth (3) day of May one thousand eight hundred and sixty six years

STATEMENT.

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

. Christian Name and Surname of Patient at length,	William Moffat
. Sex and Age,	Male 63 Years
. Married, Single, or Widowed,	Single
. Condition of Life, and previous Occupation (if any),	Medical Profession
. Religious Persuasion, so far as known,	Protestant
. Previous Place of Abode,	Milliggs Par. of Hutton
. Place where Found and Examined,	Do — Examined at Dumfries
. Length of time Insane,	about 9 or 10 years in Wale
. Whether first Attack,	Several Attacks
. Age (if known) on first Attack,	About 24 Years
. When and where previously under Examination and Treatment,	Dumfries Infirmary & Asylum and Asylum in England
. Duration of existing Attack,	a few Months
. Supposed Cause,	Perhaps Somewhat hereditary
. Whether subject to Epilepsy,	No
. Whether Suicidal,	No
. Whether Dangerous to others,	No
. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Hutton
. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Sister Mary Moffat Wife of William Brownlee, resides in Carlisle — Some of his Ancestors somewhat imbecile
. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, James Wright.

DATED this 26th day of May one thousand eight hundred and sixty six

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—2500.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Murray
being a (1) Graduate of the University of Edin
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Court
Dumfries
Dumfries
in the County
separately from any other Medical Practitioner
visited and personally examined (4) William Moffat, from
and the
the said William Moffat is a (5) person
unsound mind
and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) States that
he is imagining religious things that he
does not possess, that he
can be from time to time. Violent, that he
that he had Visions about the Immaculate

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr Mc Knight the superintendent,
on Sometimes before Mr Moffat
about at night, Mr Moffat
him in the Institution
Institution sometimes

(SIGNED) *Name and Medical Designation,* P Murray M

Place of Abode, Buccleuch St Dumfries

DATED this 26 day of May One thousand eight
hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Smith Kerr
being a (1) Member of the Faculty of Physicians in Glasgow
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Court House
Dumfries
Dumfries
in the County
separately from any other Medical Practitioner
visited and personally examined (4) William Moffat, from
Sutton a pauper
and that
the said William Moffat is a (5) person
of unsound mind
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He is full of
delusions regarding religious matters,
Immersion &c. He is at times excitable, tem-
perament, and has mental eccentricities at

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
He is now & then very excitable, complains
to the police of ill usage from wife, and has
written to Queen about imaginary grievances

(SIGNED) *Name and Medical Designation,* William S Kerr

Place of Abode Buccleuch St Dumfries

DATED this 26th day of May one thousand eight
hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that is a (1) hereby further certify that the Case of the said is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of one thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Wright Inspector of Poor of Hutton Certificates under the hands of Patrick Murray and William Smith Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Moffat from Hutton a pauper and that the said William Moffat is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Moffat as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Moffat which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this 26th day of May one thousand eight hundred and Sixty six

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

---

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District or Private.

1/204

William Shoffatt.

26/5/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict., Cap.* 71., *Sect*, 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitute*—

The Petition of William Graham Inspector of Poor, Hoddam Parish humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Archibald Harkness, weaver is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Archibald Harkness to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Wm Graham

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty fifth (3) day of May One thousand eight hundred and Sixty Six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Archibald Harkness
2. Sex and Age,	Male — 26 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Handloom Cotton weaver
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Ecclefechan
7. Place where Found and Examined,	do
8. Length of time Insane,	3 weeks
9. Whether first attack,	
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	3 weeks
13. Supposed Cause,	
14. Whether subject to Epilepsy,	Yes
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes if annoyed
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Hoddom Parish
18. Date of becoming Chargeable,	15 Oct 1859
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	John Harkness Brother
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	The Questions unanswered not Known His insanity only came to my Knowledge 8 day

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, Wm Graham

DATED this Twenty fifth day of May —— One thousand eight hundred and Sixty six

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Young being a (1) Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) Surgeon &c hereby certify, on soul and conscience, that I have this day, at (3) Ecclefechan in the Parish of Hoddom in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Archibald Harkness Ecclefechan Pauper person and that the said Archibald Harkness is a (5) of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

General delirium & excitement

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Rose during the night and attacked his brother & sister and used threatening language — from his brother

(SIGNED) *Name and Medical Designation,* William Young

Place of Abode, Ecclefechan

DATED this Twenty fifth day of May One thousand eight hundred and sixty six

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Pierson being a (1) member of the Royal College of Surgeons, Eng[illegible] and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Archibald Harkness, weaver and a pauper. from the parish of Hoddam and that the said Archibald Harkness is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) There is great stiff[illegible] and hesitancy of manner and speech at [illegible] and his memory appears very weak.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

He lays all the blame of his faults of man[illegible] & mind upon the "fits" which are the only [illegible] in conversation to which it is just and possible

(SIGNED) *Name and Medical Designation,* S. Pierson M.R.C.[illegible]

Place of Abode, Southern Counties Asylum

DATED this 26th day of May One thousand eight hundred and sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Fotheringham (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) William Graham Inspector of Poor, Hoddam Parish
Certificates under the hands of William Young
and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Archibald Harkness Weaver, Hoddam, a Pauper and that the said Archibald Harkness is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Archibald Harkness as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Archibald Harkness which accompanied the said Petition.

(SIGNED) J. P. Fotheringham

DATED this Twenty Sixth day of May One thousand eight hundred and Sixty Six

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

1/202

Archibald Hankness

26/5/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes*—

The Petition of William S. Cranstoun humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Humphrey Cranstoun my brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Humphrey Cranstoun to the Crichton Institution and to sanction his admission into the said Asylum.

(Signature) Wm S. Cranstoun

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 26th (3) day of May One thousand eight hundred and sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Humphrey Cranstoun
2. Sex and Age,	Male: 31
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Over looking farm work
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Moffat
7. Place where Found and Examined,	Moffat
8. Length of time Insane,	2 months
9. Whether first attack,	No
10. Age (if known) on first Attack,	22
11. When and where previously under Examination and Treatment,	in the year 1857. Crichton Institution
12. Duration of existing Attack,	2 months
13. Supposed Cause,	Excitement for Mother being very ill
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	William S. Cranstoun. Buccleuch Hotel Moffat. Brother No
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signature)* Name, Wm S. Cranstoun

Dated this 26th day of May One thousand eight hundred and sixty six

* To be signed by the Party applying.

P. 1

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, James Munro being a (1) Graduate of the University of Edinr. & Lect. of the Royal College of Surgeon of Edinr. and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Buccleuch Hotel. Moffat in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Humphrey Cranstoun Buccleuch Hotel Moffat and that the said Humphrey Cranstoun is a (5) person of Unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) refusing to take food - standing vacantly looking about he thinking always he is doing wrong

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) the above facts & getting out of bed at night & wandering about the house

(SIGNED) *Name and Medical Designation,* James Munro. M.D. & Surg.

Place of Abode, Moffat

DATED this 26th day of Mar One thousand eight hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, J. Gilchrist M.D. being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Humphrey Cranstoun a former Moffat and that the said Humphrey Cranstoun is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is restless and timid. Is afraid to act lest he should do what is wrong. Is depressed and stupid

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Has been in much the same condition for two or three months as affirmed by his Medical attendant

(SIGNED) *Name and Medical Designation,* J. Gilchrist M.D.

Place of Abode, Crichton House Dumfries

DATED this 27th day of May One thousand eight hundred and ~~sixty~~ six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Humphrey Cranstoun is a (1) Person of Unsound mind hereby further certify that the Case of the said Humphrey Cranstoun is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, James Munro M.D. Surgeon

Place of Abode, Moffat

DATED this 26th day of May One thousand eight hundred and sixty six

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (2) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William S. Cranstoun Buccleuch Hotel, Moffat, Certificates under the hands of James Munro and James Gilchrist, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Humphrey Cranstoun, Buccleuch Hotel, Moffat and that the said Humphrey Cranstoun is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Humphrey Cranstoun as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Humphrey Cranstoun which accompanied the said Petition.

(SIGNATURE) John P. Trotter

DATED this Twenty Ninth day of May One thousand eight hundred and Sixty Six

To the Superintendent of the (7) Public *Asylum of* Crichton Institution Dumfries.

---

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

1036

J Humphrey Cranstown

26/5/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~the~~ (2) Wigtown and ~~Kirkcudbright~~ Stewartry of Kirkcudbright *and his Substitutes,*— for the Stewartry of Kirkcudbright The Petition of John Hannah Inspector of Poor for the

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Johnston Writer in Castledouglas

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

~~your Petitioner's~~ (3) a Pauper of the parish of Kirkcudbright is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Johnston to the Southern Counties Asylum and to sanction his admission into the said Asylum.

John Hannah Insp.r of Poor Kirkcudbright

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Twenty Ninth (4) day of May One thousand eight hundred and Sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Johnston
2. Sex and Age,	Male Aged 33
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Writer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Kirkcudbright
7. Place where Found and Examined,	Not Known
8. Length of time Insane,	Yes
9. Whether first attack,	
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkcudbright
18. Date of becoming Chargeable,	29th May 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Johnston Mother of Lunatic residing in Kirkcudbt
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 29th day of May One thousand eight hundred and Sixty six

(*To be signed by Party applying*) John Hannah Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, John Shand
being a (1) Fellow of Royal College of Physicians Edinburgh
and being in actual practice as a (2) Consulting Physician
hereby certify, on soul and conscience, that I have this day, at (3) 12 Forres Street Kirkcaldy in the County of Kirkcaldy separately from any other Medical Practitioner visited and personally examined (4) Mr John Johnston and the said Mr John Johnston is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Extravagant conduct

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Change of conduct & behaviour
markedly objectable
& not to be had identity committed assaults

Name and Medical Designation, John Shand M.D. D.P.H.

Place of Abode, Kirkcaldy

DATED this 29th day of May One thousand eight hundred and sixty-six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, J Aldcroft M.D.
being a (1) Graduate of the University of Edinburgh & Physician
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Cumledge Lane Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mr & Mrs Johnston Miller at Burnhead Cottage Pauper and the said John Johnston is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) General mental excitement & loss of control with a disposition to exaggerate every thing, self control impaired

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) As stated by Mr Johnston excitement has been increasing for upwards of 3 months as indicated by the Person above Mary & Thos Williams

Name and Medical Designation, J Aldcroft M.D.

Place of Abode, Cumledge Lane Dumfries

DATED this 29th day of May One thousand eight hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Wm Stark being (1) a Fellow of the Royal College of Physicians Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Kirkcudbright in the County of Kirkcudbright, seen and personally examined Mr John Johnston Solicitor, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Wm Stark

Dated this 29th day of May One thousand eight hundred and sixty one.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar (3) Steward Substitute of the (4) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (5) John Hannah Inspector of Poor of the Parish of Kirkcudbright Certificates under the hands of John Stark and James Gilchrist, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) John Johnston a Pauper and that the said John Johnston is a (7) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Johnston as a Patient into the (8) ~~Southern Counties~~ Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Johnston which accompanied the said Petition.

Dated this Thirtieth day of May One thousand eight hundred and Sixty six years.

W. H. Dunbar

To the Superintendent of the (8) Southern Counties Asylum of Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1037

John Johnston

29/5/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of Peter Muir, Inspector of Poor, Dalry humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Quintin Forrester, Tailor, and pauper your Petitioner's (3) Charge is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Quintin Forrester to the Southern Counties Asylum, Dumfries and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Peter Muir Inspector Dalry

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this first (4) day of June One thousand eight hundred and sixty six years

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Quintin Forrester.
2. Sex and Age,	Male. 74 years
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	Tailor
5. Religious Persuasion, so far as known,	U.P.
6. Previous Place of Abode,	Dalry
7. Place where Found and Examined,	London & Dumfries
8. Length of time Insane,	3 months
9. Whether first attack,	no
10. Age (if known) on first Attack,	64 or 65 years
11. When and where previously under Examination and Treatment,	never and no where
12. Duration of existing Attack,	3 months
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	No
16. Whether Dangerous to others,	at times very violent & would be dangerous if opposed in any whim
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dalry -
18. Date of becoming Chargeable,	1st June 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Jane Forrester, Dalry, his wife and Mary Ann Wallace or Forrester his daughter - This daughter was under Treatment in the Dumfries Asylum about a year & half ago. None.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Second day of June One thousand eight hundred and 66 years

(*To be signed by Party applying*) Peter Muir Inspector Dalry

P. p.

MEDICAL CERTIFICATE, No. 1.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, John Dickson being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) High St Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Lunatic Forrester, Tailor, in the roof of the parish of Dalry and the said Lunatic Forrester is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(1) *State the facts.*

1. Facts indicating Insanity observed by myself: (1) He is incoherent in conversation, is restless and excited in manner. His mind is filled with delusions: he believes that he is dying, that he is commissioned to expose the Freemasons, that he has connection with the Royal Family, that he has control over the Police

(1) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (1) His Son in Law informs me that he started suddenly for London very recently, under the idea that he was commissioned to do so, that he was constantly spending his money foolishly, was placed under restraint by the Police

Name and Medical Designation, John Dickson

Place of Abode, Buccleuch Street Dumfries

DATED this 1st day of June One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Samuel Fairrow being a (1) Member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Lunatic Forrester, Tailor in and a pauper the said Lunatic Forrester is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(1) *State the facts.*

1. Facts indicating Insanity observed by myself: (1) He labours under a variety of delusions especially as to money, Inheritance, and the dignity of his person. His manner he is restless. He speak rambles and incoherent and is irritable and easily excitable as to cause him dangerous.

(1) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (1) His son-in-law, and Mr Lewis the Inspector of Police lately he has become erratic in his habits and wanders under some proxy that he was to obtain considerable property the Cattle plague he had made his way to London where he made discoveries to the Police &c &c

Name and Medical Designation, S. Fairrow M.R.C.S.

Place of Abode. Southern Counties Asylum, Dumfries

DATED this Second day of June One thousand eight hundred and Sixty Six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson
being (1) a Graduate of the Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) High Street Dumfries
in the County of Dumfries, seen and personally examined
Quintin Forrester, Tailor & Pauper Dalry, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this 1st day of June One thousand eight hundred and sixty six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Peter Muir
Inspector of Poor Dalry
Certificates under the hands of John Dickson
and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Quintin Forrester Tailor and Pauper Dalry and that the said Quintin Forrester is a (5) Lunatic and a person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Quintin Forrester as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Quintin Forrester which accompanied the said Petition.

DATED this Fourth day of June One thousand eight hundred and Sixty Six

John P Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/205

Quintin Forrester

1/6/66

It is requested that in any further communication on this subject, the Number and Date of this Letter may be quoted.

Metropolitan Police Office,

No. 469

4, Whitehall Place, S.W.

31st March 1866

Mrs Wallace,

I have to acknowledge the receipt of your Letter of the 29th Inst, and to acquaint you in reply that inquiry has been made, and the Superintendent reports that a man answering the description of "Quintin Forrester" slept on the night of the 11th Inst, at Mr Brewer's, Coffee House, 37 Drummond St, Euston Square. He was a Scotchman & said he came to London to cure the Cattle Plague. He had no money to pay for his lodging, and left a coat behind as security. They have not seen him since

Zabalmondeue
Assistant Commissioner

Daley
New Galloway

[5435.] E. & S.—300.—17/65.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict., Cap.* 71., *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes.*

The Petition of William Graham, Inspector of Poor Hoddam Parish humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ann Scott, a pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Ann Scott to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) Wm Graham Inspector of Poor Hoddam

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Fourth (3) day of June One thousand eight hundred and Sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Ann Scott
2. Sex and Age,	Female — 54 Years
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Pauper — Domestic Servant
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Ecclefechan
7. Place where Found and Examined,	Do —
8. Length of time Insane,	10 Years at intervals
9. Whether first attack,	No
10. Age (if known) on first Attack,	43 Years
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
12. Duration of existing Attack,	14 days
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Hoddam
18. Date of becoming Chargeable,	25 Nov. 1855
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Agnes Scott daughter Ecclefechan — Father & Mother
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* Wm Graham Insp.

DATED this Fourth day of June One thousand eight hundred and Sixty six

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Young being a (1) Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Ecclefechan Parish of Hoddom in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Ann Scott, Pauper and that the said Ann Scott is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Restless excited state of mind, but much the same as when she attempted to commit suicide some years ago

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Restless and sleepless.
From Daughter

(SIGNED) *Name and Medical Designation,* William Young

Place of Abode, Ecclefechan

DATED this Third day of June One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Gierson being a (1) Member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Ann Scott, a pauper from the Parish of Hoddam. and that the said Ann Scott is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Great ~~deep~~ [illegible] of spirits, and fullness of such gloomy [illegible] anent the future that they seem to shut out [illegible] ray of hope yet a craving for relief even at the [illegible] of life itself. She has been under Asylum restraint on more than one occasion previously.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Andrew Trotter Ecclefechan, states that for the past [illegible] days she has been very unsettled, and had created [illegible] suspicion among the neighbours that she lacked but the opportunity do herself grievous bodily harm

(SIGNED) *Name and Medical Designation,* J. Gierson M.R.C.S.

Place of Abode, Southern Counties Asylum, Dumfries

DATED this fourth day of June One thousand eight hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Ann Scott Pauper is a (1) person of unsound mind hereby further certify that the Case of the said Ann Scott is One of Emergency, and I recommend the immediate removal of the said Ann Scott to an Asylum accordingly.

Name, William Young

Place of Abode, Ecclefechan

DATED this Fourth day of June One thousand eight hundred and sixty six

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Foster Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Graham Inspector of Poor Hoddam Certificates under the hands of William Young and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Ann Scott, Ecclefechan, a pauper and that the said Ann Scott is a (5) person of unsound Mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ann Scott as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ann Scott which accompanied the said Petition.

(SIGNED) John P. Foster

DATED this Fourth day of June One thousand eight hundred and Sixty Six

To the Superintendent of the (7) Asylum of Public Southern Counties Dumfries

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

Ann Scott
4th June
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable ~~the~~ (1) *the Sheriff* of ~~the~~ (2) *Wigtown and the Stewartry of Kirkcudbright and his Substitutes,—for the County of Wigtown.*

The Petition of *William Macrie, Inspector of Poor, Wigtown*

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that *William Thomson, pauper Lunatic in Wigtown*

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

~~your Petitioner's~~ (3)

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said *William Thomson* to the *Southern Counties Asylum, Dumfries* and to sanction *his* admission into the said Asylum.

Wm Macrie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this *fourth* (4) day of *June* One thousand eight hundred and *sixty six years*

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	*William Thomson*
2. Sex and Age,	*Male – age 40 years*
3. Married, Single, or Widowed,	*Married*
4. Condition of Life, and previous Occupation (if any),	*possibly a pauper, – a Sailor*
5. Religious Persuasion, so far as known,	*Protestant*
6. Previous Place of Abode,	*Wigtown*
7. Place where Found and Examined,	*High St. Wigtown*
8. Length of time Insane,	*a few days*
9. Whether first attack,	*Supposed to be so*
10. Age (if known) on first Attack,	*40*
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	—
13. Supposed Cause,	*not known*
14. Whether subject to Epilepsy,	*no*
15. Whether Suicidal,	
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	*Wigtown in the meantime*
18. Date of becoming Chargeable,	*4 June, 1866*
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	*Brother, Samuel Thomson, Wool miller Stranraer – rest not known*
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this *fourth* day of *June* One thousand eight hundred and *sixty six years*

(*To be signed by Party applying*) *Wm Macrie Insp of Poor*

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Samuel Snowdon being a (1) Doctor of Medicine of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Wigtown in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) William Thomson Pauper residing in Wigtown and that the said William Thomson is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is very [illegible] in his conduct, is labouring under the [illegible] that he is about to be hanged — is in general [illegible] dressed of [illegible] around him — without reason

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) He considers he has committed a [illegible] Sin —

Name and Medical Designation, Samuel Snowdon [illegible]

Place of Abode, Wigtown

DATED this Fourth day of June One thousand eight hundred and Sixty Six —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Robert D. Rose being a (1) Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Wigtown in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) William Thomson Pauper residing in Wigtown and that the said William Thomson is a (5) Lunatick and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) I have attended William Thomson for sometime back, he has been sleepless, irritable, excitable, he labours under the delusion that people are come to take him away to take his life, he is rambling & perfectly [illegible] of talking rationally —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) He informed me that he was afraid he would be come some monster. His wife who has been constantly with him being mentally weak cannot give any information

Name and Medical Designation, Rob D. Rose [illegible]

Place of Abode, Wigtown

DATED this fourth day of June One thousand eight hundred and Sixty Six Years —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Thomas Murray Esqure (1) Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) William Mackie
Inspector of Poor Wigtown
Certificates under the hands of Samuel Snowdon M.D.
and Robert D. Rose Surgeon , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
William Thomson, pauper and that the said
William Thomson is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Thomson as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize Dumfries Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Thomson which accompanied the said Petition.

DATED this fourth day of June One thousand eight hundred and sixty six

Thos Murray

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries.

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

William Thomson
5th June
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Joseph Crichton Inspector of Poor for the parish of Lanombie humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ann Jardine, Loaningshead, Parish of Lanombie your Petitioner's (3) Charge is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Ann Jardine as a patient to the Southern Counties Asylum, Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

J. Crichton

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Eighth (4) day of June One thousand eight hundred and Sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Ann Jardine
2. Sex and Age,	Female - 46 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Loaningshead
7. Place where Found and Examined,	Do.
8. Length of time Insane,	Eight days
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	46 years
11. When and where previously under Examination and Treatment,	Loaningshead
12. Duration of existing Attack,	
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Lanombie
18. Date of becoming Chargeable,	Fourth of June
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mary Jardine, her Mother. The Mother
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Eighth day of June One thousand eight hundred and Sixty six

(*To be signed by Party applying*) J. Crichton

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, *or* a person of unsound mind.

I, the undersigned, Thomas Greenlees
being a (1) Member of the College of Surgeons of Glasgow
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Lesmurdy in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Ann Gardiner, Lesmurdy, Cummertrees, a pauper and that the said Ann Gardiner is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Her appearance - talking incoherently - attempting to destroy herself with knife

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

She required to be constantly watched for fear of setting the house on fire, which she frequently attempted to do - Communicated by her brother James Gardiner and Mrs Carlyle Ellisland

Name and Medical Designation, Thomas Greenlees, Surgeon

Place of Abode, Cummertrees

DATED this 7th day of June One thousand eight hundred and Sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Grierson
being a (1) Member of the Royal College of Surgeons, England
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) The Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Ann Gardiner, Ann Loraine Gardiner, Annandale, Cheapside. and that the said Ann Gardiner is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She labours under considerable excitement - is incoherent, rambling, constant in speech - believes herself to be suffering from many nameable diseases and to have been the victim of conspiracy on every hand -

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Her brother James Gardiner says that she has been quite changed of late and that instead of being able after the work and an invalid mother she has latterly been unmanageable - Cheerful at home

Name and Medical Designation, S. Grierson M.R.C.S.

Place of Abode Southern Counties Asylum, Dumfries

DATED this Seventh day of June One thousand eight hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Aenas Macaulay
being (1) Surgeon
hereby certify, on soul and conscience, that I have this day, at (2) Lanmuirhead
in the County of Dumfries, seen and personally examined
Ann Jardine, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Aenas Macaulay

DATED this 7th day of June One thousand eight hundred and Sixty Six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Malcolm Trotter Esqr (3) Sheriff Substitute
of the (4) County of Dumfries
having had produced to me, with a Petition at the instance of (5) Joseph Cuckton
Inspector of Poor of the Parish of Canonbie
Certificates under the hands of Aenas Macaulay
and Samuel Grierson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Ann Jardine Lanmuirhead, Canonbie, a Pauper and that the said Ann Jardine is a (7) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ann Jardine as a Patient into the (8) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ann Jardine which accompanied the said Petition.

DATED this Eighteenth day of June One thousand eight hundred and Sixty Six

J Malcolm Trotter

To the Superintendent of the (9) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/208

Ann Jardine

7/6/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*—

The Petition of John Dinwoodie Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Young residing at Infirmary Dumfries your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Young to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

(4) The date of the Petition must be within a fourteen clear days following the dates of the Medical Certificates.

Dated this Eighth (4) day of June One thousand eight hundred and Sixtysix

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Young
2. Sex and Age,	Male – 58
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	do, Blacksmith
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Sign Post, Lochthara
7. Place where Found and Examined,	Dumfries Infirmary
8. Length of time Insane,	Two days
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	50 years
11. When and where previously under Examination and Treatment,	Dumfries Infirmary
12. Duration of existing Attack,	About two days
13. Supposed Cause,	Supposed to be owing to a brother having lately committed Suicide –
14. Whether subject to Epilepsy,	No –
15. Whether Suicidal,	doubtful
16. Whether Dangerous to others,	No –
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	8th June 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Not Known

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Eighth day of June One thousand eight hundred and Sixtysix

(*To be signed by Party applying* John Dinwoodie, Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Scott
being a (1) Graduate of the University of Edin
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Infirma
Dumfries, in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) James Young a Pau
and that
the said James Young is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has delusio
that he was the cause of his brothers
says his brain has since gone
2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His brother and sister in Law
gave statement as above

Name and Medical Designation, Wm Scott MD

Place of Abode, Dumfries

DATED this 8th day of June One thousand eight hundred and Sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Mac Ball
being a (1) Surgeon & Graduate of the Faculty of Physicians
Surgeons & Glasgow and Fellow of the Medical
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Infirmary
Dumfries in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) James Young a Pauper
and that
the said James Young is a (5) Person of
Unsound mind and proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has delusions
by having had something to do with his
Book. Talks in a generally melancholy state
and alleges that he has been a great sin
2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
The attendants give much the same
information

Name and Medical Designation, Wm Mac Ball Ch. Surg

Place of Abode, Dumfries

DATED this 8th day of June One thousand eight hundred and Sixty six Years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Alexander Hannay Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dinwoodie
Inspector of Poor for the parish of Dumfries
Certificates under the hands of William Scott
and William Marshall , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
James Young Dumfries Infirmary (a pauper) and that the said
James Young is a (5) Lunatic and a person
of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Young as a Patient into the (6) Public Asylum of Southern Counties and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Young which accompanied the said Petition.

DATED this Eighth day of June One thousand eight hundred and sixty six

Alex Hannay

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

James Young
8th June 1866

20 & 21 *Vict. Cap.* 71, *Sect.* 37.

NOTICE OF ADMISSION.

I HEREBY GIVE NOTICE, That (1)

was received into this House as a (2)

Patient on the (3) day of

and I hereby transmit a Copy of the Order and Medical Certificates and Statement on which he was received.

Subjoined is a Report with respect to the mental and bodily condition of the above-named Patient.

(SIGNED) *Superintendent.*

DATED at this (4) day of

one thousand eight hundred and

To the Secretary of the
General Board of Lunacy.

REPORT.

I HAVE this day (4) seen and personally examined

the Patient named in the above Notice,

and hereby report and certify, with respect to mental state, that (5)

and with respect to bodily health and condition, that (6)

(SIGNED)

(7)

DATED this day of one thousand eight hundred and

(1) Name and Designation.
(2) Private or Pauper.
(3) Some day within fourteen days after the date of the Order of the Sheriff; or within twenty-one days, if the Order be granted by the Sheriff of Orkney and Shetland.
(4) Some day not less than two clear days after the admission of the Patient, and before the expiration of fourteen clear days after admission.
(5) Insert particulars.
(6) Insert particulars.
(7) Add Designation.

(*Copies.*)

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Wigtown *and his Substitutes,*—

The Petition of Henry Watt Inspector of Poor Stranraer humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James McLean is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James McLean to the Crichton Institution Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Henry Watt Inspector

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty fifth (3) day of May one thousand eight hundred and sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James McLean
2. Sex and Age,	Male 69 Years
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Joiner
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	17 Greenvale Street
7. Place where Found and Examined,	At home
8. Length of time Insane,	Four Months
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	~~F~~
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	Four Months
13. Supposed Cause,	Personal bereavement
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Has made no attempt but repeatedly [illegible]
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Stranraer
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	John McLean (his son) Her Maj Customs London Docks
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,*

DATED this 25th day of May one thousand eight hundred and sixty six

* To be Signed by the Party applying. Henry Watt Inspector

(Copies.)

MEDICAL CERTIFICATE, No. I.

the undersigned, John Orgill

ing a (1) Licentiate of the Faculty of Physicians & Surgeons Glasgow

d being in actual practice as a (2) General Practitioner

reby certify, on soul and conscience, that I have this day, at (3) 17 Greenvale St Stranraer in the County of Wigtown separately from any other Medical Practitioner,

ited and personally examined (4) James McLean residing there and that

e said James McLean pauper is a (5) person of unsound mind and a proper Person to be detained

der Care and Treatment, and that I have formed this opinion upon the following

ounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He speaks incoherently of the extent of his business having given almost all his orders elsewhere, & spoke of having large sums on wood which he does not possess. Also he considers great improvements in his garden, he wheels stones, plants &c. All these actions are quite contrary to what would be considered quite demented.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His daughters & Father says he frequently becomes violent, & has threatened to injure the inmates of the house, & in particular to cut up with a knife, which he was obliged to hide, & which he is now known to get into his possession. He wanders about the house at night, puts out the fire, & thinks he is working upon Industrial cards, but in reality has done no work for 7 months past. Says Mr McLean another daughter contemplates

(SIGNED) Name and Medical Designation, John Orgill Surgeon

Place of Abode, Stranraer

DATED this 22d day of May One thousand eight hundred and Sixty six

(1) *Set forth the qualifications entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

the undersigned, Ebenezer Fleming

ing a (1) Doctor of Medicine and a Licentiate of the Royal College of Surgeons of Edinburgh

d being in actual practice as a (2) General practitioner

reby certify, on soul and conscience, that I have this day, at (3) 17 Greenvale Street Stranraer in the County of Wigtown separately from any other Medical Practitioner,

sited and personally examined (4) James McLean and that

e said James McLean, pauper is a (5) person of unsound mind and a proper person to be detained

nder Care and Treatment, and that I have formed this opinion upon the following

rounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) His manner is quite changed from being quiet inoffensive and of abstemious habits he now appears and gets abusive & violent & his language is filthy & obscene in ordinary conversation. He has become very dirty and careless of his person. Talks incessantly about employing a large number of men & doing business & other transactions on a great scale, and altogether conducts himself in a very extravagant manner.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) He is Sleepless, and frequently wanders about the whole night, orders large quantities of Medicines of all kinds which is seriously involving his friends in debt. He at times is very violent and has on several occasions threatened his own life and the lives of his nearest friends. Facts Communicated by his two daughters & Son-in-Law

(SIGNED) Name and Medical Designation, Ebenezer Fleming M.D. L.R.C.S.E.

Place of Abode 17 Princes St Stranraer

DATED this Twenty third day of May one thousand eight hundred and Sixty six years

(1) *Set forth the qualifications entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

(Copies.)

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1)
of the said
hereby further certify that the Case is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of one thousand eight hundred and

(1) Lunatic, or an Insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Thomas Murray Esquire Sheriff Substitute (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Henry Watt Inspector of Poor Stranraer
Certificates under the hands of John Orgill, Surgeon, and Ebenezer Fleming M.D. , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Mc Lean Pauper, and that the said James Mc Lean is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Mc Lean as a Patient into the (6) Crichton Asylum of Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Mc Lean which accompanied the said Petition.

(SIGNED) Thos Murray

DATED this twenty eighth day of May one thousand eight hundred and sixty six

To the Superintendent of the (7) Crichton Asylum of Dumfries.

3

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

20 & 21 *Vict. Cap.* 71, *Sect.* 37.

NOTICE OF ADMISSION.

I HEREBY GIVE NOTICE, That (1)

was received into this House as a (2)

Patient on the (3) day of

and I hereby transmit a Copy of the Order and Medical Certificates and Statement on which he was received.

Subjoined is a Report with respect to the mental and bodily condition of the above-named Patient.

(SIGNED) *Superintendent.*

DATED at this (4) day of

one thousand eight hundred and

To the Secretary of the
General Board of Lunacy.

REPORT.

I HAVE this day (4) seen and personally examined

the Patient named in the above Notice,

and hereby report and certify, with respect to mental state, that (5)

and with respect to bodily health and condition, that (6)

(SIGNED)

(7)

DATED this day of one thousand eight hundred and

(1) Name and Designation.
(2) Private or Pauper.
(3) Some day within fourteen days after the date of the Order of the Sheriff; or within twenty-one days, if the Order be granted by the Sheriff of Orkney and Shetland.
(4) Some day not less than two clear days after the admission of the Patient, and before the expiration of fourteen clear days after admission.
(5) Insert particulars.
(6) Insert particulars.
(7) Add Designation.

[4*]

(*Copies.*)

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Wigtown *and his Substitutes,—*

The Petition of Henry Watt. Insp.r of Poor. Stew[illegible] humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Cameron is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Cameron to the Crichton Royal Asylum. Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Henry Watt. Insp.r

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 14th (3) day of June one thousand eight hundred and sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	George Cameron
2. Sex and Age,	Male 44 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Blacksmith
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Greenvale Street
7. Place where Found and Examined,	North Strand Street
8. Length of time Insane,	About two weeks
9. Whether first Attack,	Yes – but has been subject to fits of de[illegible]
10. Age (if known) on first Attack,	Vide Supra.
11. When and where previously under Examination and Treatment,	Vide Supra.
12. Duration of existing Attack,	Two weeks
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes, & Becoming more So
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Shawdaer –
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	James Cameron, Cow Keeper, Kessock St. [illegible] a brother –
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* H. Watt Insp.r

DATED this 14th day of June one thousand eight hundred and sixty six

* To be Signed by the Party applying.

(Copies.)

MEDICAL CERTIFICATE, No. I.

the undersigned, Wm Orgill

ng a (1) Licentiate of the Faculty of Physicians & Surgeons of Glasgow

d being in actual practice as a (2) General Practitioner

reby certify, on soul and conscience, that I have this day, at (3) North Strand Street Stranraer in the County of Wigtown separately from any other Medical Practitioner, ited and personally examined (4) George Cameron, a pauper residing there and that e said George Cameron is a (5) person of unsound mind and a proper Person to be detained der Care and Treatment, and that I have formed this opinion upon the following ounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He constantly walks ... forwards in the room in a restless & responding state ... to take food as being of no use; as it is, he says, all over him. He has various delusions such as being constantly watched ... the police &c. Though usually an industrious man he has quite ... up working; and is quite altered in conduct and language

2. Other facts (if any) indicating Insanity communicated to me by others: (7) He says he declares that nothing will do him good. He refuses food ... not allow his family to eat as the food is poisoned, he says. He drives the children out of ... very early in the morning & frequently knocks her about as he never did before. The ... in constant dread of him, and he has several times threatened violence to them. He has various ... His son George corroborates his mother says he has threatened to kill him; and has several times struck & kicked him

(SIGNED) Name and Medical Designation, Wm Orgill Surgeon

Place of Abode, Stranraer

DATED this 12th day of June One thousand eight undred and Sixty six

(1) Set forth the qualification entitling the person certifying to grant the certificate; e. g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a Pauper state so.

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

(6) State the facts.

(7) State the information, and from whom derived.

MEDICAL CERTIFICATE, No. II.

the undersigned, Ebenezer Fleming

ing a (1) Doctor of Medicine and a Licentiate of the Royal College of Surgeons of Edinburgh

d being in actual practice as a (2) General Practitioner

reby certify, on soul and conscience, that I have this day, at (3) North Strand Street, Stranraer in the County of Wigtown separately from any other Medical Practitioner, ited and personally examined (4) George Cameron Pauper and that e said George Cameron is a (5) person of unsound mind and a proper person to be detained der Care and Treatment, and that I have formed this opinion upon the following ounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Labours under various delusions imagines that his movements are watched by means of large magnifying glasses, that carriages are in pursuit of him. Is restless and excited in manner. Is much averse to take food and takes it in such small quantity, that his strength is daily becoming impaired.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His wife and son inform me, that his manner is quite changed & that he has been subject to great depression of spirits for the last ten or three weeks. Is restless & does not sleep at night. Has threatened them on several occasions & exclaims against the use of food either for himself or family

(SIGNED) Name and Medical Designation, Ebenezer Fleming M.D.

Place of Abode 17 Princes Street, Stranraer,

DATED this Twelfth day of June one thousand eight undred and Sixty Six years.

(1) Set forth the qualification entitling the person certifying to grant the certificate; e. g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a Pauper state so.

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

(6) State the facts.

(7) State the information, and from whom derived.

(*Copies.*)

CERTIFICATE OF EMERGENCY.

(*This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.*)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of one thousand eight hundred and

(1) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Macduff Rhind, Esquire Advocate, Sheriff Substitute (1)
of the (2) County of Midlothian
having had produced to me, with a Petition at the instance of (3) Henry Watt Inspector of Poor Stramar
Certificates under the hands of John Argill, Surgeon
and Ebenezer Fleming M.D., being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
George Cameron, Pauper and that the said
George Cameron is a (5) Person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Cameron as a Patient into the (6) Crichton Asylum of Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Cameron which accompanied the said Petition.

(SIGNED) M. Rhind

DATED this fifteenth day of June one thousand eight hundred and sixty six.

To the Superintendent of the (7) Crichton
Asylum of Dumfries.

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Perth, *and his Substitute,—*

The Petition of Miller Berrie

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Berrie your Petitioner's (3) brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander Berrie to the Dumfries Asylum and to sanction his admission into the said Asylum.

Miller Berrie

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 18th (4) day of June One thousand eight hundred and Sixty Six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Alexander Berrie
2. Sex and Age,	Fifty-six
3. Married, Single, or Widowed,	Widower
4. Condition of Life, and previous Occupation (if any),	Flax Spinner
5. Religious Persuasion, so far as known,	Member of Free Church of Scotland
6. Previous Place of Abode,	Isle Kilsh - Monyhty Fenny.
7. Place where Found and Examined,	Bridge of Earn
8. Length of time Insane,	by Several Months
9. Whether first attack,	first attack
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	Upwards of a year an invalid -
13. Supposed Cause,	Loss of his wife
14. Whether subject to Epilepsy,	No —
15. Whether Suicidal,	No —
16. Whether Dangerous to others,	Occasional tendencies in that direction
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	On becoming an Inmate of Asylum
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Miller Berrie - Monyhty. Fenny Mother - No
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 18th day of June One thousand eight hundred and Sixty-six.

(*To be signed by Party applying*) Miller Berrie

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Laing being a (1) M. D. Marischal College Aberdeen, and C. S. Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Bridge of Earn in the County Perth separately from any other Medical Practitioner visited and personally examined (4) Mr. Alexander Berrie, Manufacturer Ida Bank, Broughty Ferry. and the said Alexander Berrie is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Fancies that his soul is lost; that there is a conspiracy on the part of his friends & others to poison him; that if he takes any food he is to die instantaneously; that all the natural passages in his body are blocked up and that nothing will pass through it.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brother and sister inform me that for upwards of a [illegible] he has been subject to religious depression; that he has been more or less restless and excited both night and day; that seldom could sit at meals and that he has been subject to manner of morbid ideas

Name and Medical Designation, } Jas Laing M. D. [illegible]

Place of Abode, Bridge of Earn

DATED this 18th day of June One thousand eight hundred and Sixty-six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Francis J. White MD being a (1) Member of the Royal College of Physicians of London and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Bridge of Earn in the County Perth separately from any other Medical Practitioner visited and personally examined (4) Mr Alexander Berrie Manufacturer. Ida Bank Broughty Ferry and the said Alexander Berrie is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) — Various [illegible] believes that there is a plot to poison him that if he takes food he is to die immediately afterwards — &c

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) In the last two days has ~~[illegible]~~ refused all food — his sister & attendants inform me.

Name and Medical Designation, } J. J. White

Place of Abode, Athol Place — Perth

DATED this 18th day of June One thousand eight hundred and Sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Hugh Barclay Sheriff Substitute
of the (2) County of Perth
having had produced to me, with a Petition at the instance of (3) Miller Berrie Broughty Ferry but found at Bridge of Earn Pallidum
Certificates under the hands of James Laing M.D. Surgeon Bridge of Earn
and Francis Whyte M.D. Perth, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexander Berrie Ida Bank Broughty Ferry and that the said Alexander Berrie is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Berrie as a Patient into the (6) Public Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Berrie which accompanied the said Petition.

DATED this Nineteenth day of June One thousand eight hundred and Sixty six

Hugh Barclay

To the Superintendent of the (7)
Public *Asylum of* Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1038
Adopt Bessie
19/6/60

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of William Carlyle Inspector of the Poor Gratney humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Gap residing at Barkhill is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Gass to the Southern Counties asylum and to sanction his admission into the said Asylum.

(SIGNATURE) William Carlyle

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twentieth (3) day of June One thousand eight hundred and Sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	George Gap
2. Sex and Age,	Thirty nine years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Skipton England,
7. Place where Found and Examined,	Barkhill Eretna
8. Length of time Insane,	about four years
9. Whether first attack,	second
10. Age (if known) on first Attack,	Thirty five
11. When and where previously under Examination and Treatment,	Skipton England,
12. Duration of existing Attack,	Eighteen Months
13. Supposed Cause,	The death of a Child,
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	
16. Whether Dangerous to others,	Threatens his wife
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Gratney
18. Date of becoming Chargeable,	19 June 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	John Gap - Barkhill None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNATURE)* *Name,* William Carlyle

DATED this Twentieth day of June One thousand eight hundred and Sixty six

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Carruthers being a (1) Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Birkhill in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) George Gass at present residing at Birkhill and that the said George Gass is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Melancholy and restless Says he sleeps badly and is quite discontented

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Passionate Threatens to strike his wife Frowns and is apparently miserable So says his wife & his sister Helen

(SIGNED) *Name and Medical Designation,* James Carruthers, L.R.C.S.E.

Place of Abode, Kirkpatrick Fleming

DATED this nineteenth day of June One thousand eight hundred and Sixty Six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Thomas Williamson being a (1) Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) General Medical Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Birkhill in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mr George Gass presently residing at Birkhill and that the said George Gass is a (5) lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) his irritable unsettled State, and appearance

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His brother John says he has threatened to strike him with the tongs, and has actually struck him and that he labours under delusions as to seeing spirits floating about him in the air and that he believes he occupies the throne of Eden

(SIGNED) *Name and Medical Designation,* Mr Williamson Surgeon

Place of Abode, Church Street annan

DATED this nineteenth day of June One thousand eight hundred and Sixty Six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
. to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Andrew Barrie Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) William Carlyle Inspector of the Poor Gretna
Certificates under the hands of James Carruthers
and Thomas Williamson , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) George Gass, residing at Birkhill, Dumfriesshire and that the said George Gass is a (5) person of Unsound Mind and a Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Gass as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Gass which accompanied the said Petition.

(SIGNATURE) A Barrie

DATED this Twelfth day of June One thousand eight hundred and Sixty Six

To the Superintendent of the (7) Public
Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A.]

20 & 21 *Vict., Cap.* 71., *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of William Purdie Inspector of Poor of Dornock Parish humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Mullins, a pauper from Dornock Parish is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Mullins to the Southern Counties Asylum, Dumfries and to sanction his admission into the said Asylum.

(Signed) Wm Purdie

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this twenty first (3) day of June One thousand eight hundred and Sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	George Mullins
2. Sex and Age,	Male - about 60 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Independent
6. Previous Place of Abode,	Dornock
7. Place where Found and Examined,	Dornock
8. Length of time Insane,	about 3 months
9. Whether first attack,	first attack
10. Age (if known) on first Attack,	about 60 years
11. When and where previously under Examination and Treatment,	never - nowhere
12. Duration of existing Attack,	about 3 months
13. Supposed Cause,	Religion - Revivalism
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no - "Has said that he would go and drown himself"
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dornock
18. Date of becoming Chargeable,	Since April 866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Margaret Mullins his wife and George Mullins his son, working in Manchester. none
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signed)* *Name,* Wm Purdie

Dated this twenty first day of June One thousand eight hundred and Sixty-six

P. p.

* To be signed by the Party applying.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Thomas Williamson Junr
being a (1) Licentiate of the Royal College of Surgeons of Edinburgh
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Bonnock
in the County of Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Geo. Mullans residing at Bonnock a pauper and that
the said Geo. Mullans is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He generally passes all his time in bed singing the clothes about from side to side as if swimming some tunes of Psalms or Spiritual hymns singing songs mixed up together, he threatens violence to persons coming near him for interrupting him obtains from his

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
his Wife says he has frequently threatened to do her an injury, and has struck her, like she dare not remain with him without keepers to protect her

(SIGNED) *Name and Medical Designation,* Thomas Williamson

Place of Abode, Church Street Annan

DATED this Nineteenth day of June One thousand eight
hundred and Eighty Six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Kenn Blackburn, Annan,
being a (1) Physician & surgeon of the University & Royal College of Surgeons of Edinburgh
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Bonnock
in the County of Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Geo. Mullans, existing at Bonnock a pauper and that
the said Geo. Mullans — is a (5) person
of unsound mind — and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Is very impulsive in manner — threatening violence at times; dirty in his habits at times. Religious delusion seems to be his principal hallucination. Religious topics excite him much

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mrs Mullans says she has often threatened to strike her. Mr Purdie & Mrs Young say he has frequently violent more than usually violent

(SIGNED) *Name and Medical Designation,* K. Blackburn, M.D.

Place of Abode, Bridge Path, Annan.

DATED this twentieth day of June One thousand eight
hundred and eighty six.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of One thousand eight hundred and

(1) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pearson Trotter Esqr. (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) William Purdie Inspector of Poor of the Parish of Dornock —
Certificates under the hands of Thomas Williamson
and Agnew Black Boyd —, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) George Mullins from Dornock, a Pauper — and that the said George Mullins — is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Mullins as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Mullins — which accompanied the said Petition.

(SIGNED) John P Trotter

DATED this Twenty first day of June One thousand eight hundred and Sixty Six

To the Superintendent of the (7) Public
Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

George Mullins
21st June
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of George Thomas Dixon of Drutton Holme humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Ann Dixon your Petitioner's (3) wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Ann Dixon to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

George T. Dixon

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 26 (4) day of June One thousand eight hundred and sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mary Ann Dixon, wife of George Thomas Dixon,
2. Sex and Age,	
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	Her Husband, no Profession
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Carlisle
7. Place where Found and Examined,	D°
8. Length of time Insane,	about 2 weeks
9. Whether first attack,	The first it is supposed
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	not under any previous treatment
12. Duration of existing Attack,	
13. Supposed Cause,	Been subject to pains and has taken Laudanum, no other cause known.
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	not at present
16. Whether Dangerous to others,	Do some symptoms shown yet
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Her Husband George Thomas Dixon of Drutton Holme Carlisle Gentleman.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 26 day of June One thousand eight hundred and sixty six.

(*To be signed by Party applying*) George T. Dixon

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, William Bousfield Page
being a (1) Fellow of the Royal College of Surgeons of Eng
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3)
Milburn Street, Carlisle in the County of Cumberland separately from any other Medical Practitio
visited and personally examined (4) Mary Anne Dixon and
the said Mary Anne Dixon is a (5) person of
unsound mind and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Talked in a very excited way of an organized
persons, physicians and Mrs being constantly in attendance at
house: told me she had thrown a pillow at her attendant –

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
that she had been in the habit for many weeks
acting with great violence to her husband and to
servant: I learned this from her husband & from her atte

Name and Medical Designation, Wm B Page F.R.C.S.Eng

Place of Abode, 24 Milburn Street, Carlisle

DATED this 25 day of June One thousand eig
hundred and sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Robert Walker
being a (1) Licentiate of the College of Physicians and S
Edinburgh
and being in actual practice as a (2) Physician and Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) No 1 Richar
Terrace Botcherby Carlisle in the County
Cumberland separately from any other Medical Practition
visited and personally examined (4) Mary Ann Dixon
and th
the said Mary Ann Dixon is a (5) person of un
mind and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the followi
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She talks in an
and incoherent manner, and is employed in tearing bed
cape without any purpose or order

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) H
Husband and Sister state that she is very violen
her Husband and attendants, and when she can get out of
large large quantities of unnecessary articles, and carries them
and pulls up the flowers.

Name and Medical Designation, Robert Walker M.R.C.P. 1866

Place of Abode, 23 Fountain Hill Carlisle

DATED this 25th day of June One thousand eig
hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Hugh Grainger Stewart being (1) Graduate in medicine of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Crichton Institution in the County of Dumfries, seen and personally examined Mary Ann Dixon, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Hugh Stewart M.D.

DATED this 25th day of June One thousand eight hundred and Sixty five.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pearson Trotter Esqre (3) Sheriff Substitute of the (4) County of Dumfries having had produced to me, with a Petition at the instance of (5) George Thomas Dixon of Shelton Holme Carlisle Certificates under the hands of William Bousfield Page and Robert Walker, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Mary Ann Dixon, Petitioners wife and that the said Mary ann Dixon is a (7) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Ann Dixon as a Patient into the (8) Public Asylum of Crichton Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Ann Dixon which accompanied the said Petition.

DATED this Twenty eighth day of June One thousand eight hundred and Sixty five.

John P Trotter

To the Superintendent of the (9) Public *Asylum of* Crichton Institution Dumfries

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(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1039

Mary Ann Dixon

2/6/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Stewart.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Joanna Walker Barnaby bumbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Walker your Petitioner's (3) Husband is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Walker to the Royal Edinburgh Asylum and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Joanna Walker

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this twenty eighth (4) day of June One thousand eight hundred and sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	William Walker
2. Sex and Age,	Male 52
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	Staff Sergeant Royal Cumberland Militia
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	whitehaven
7. Place where Found and Examined,	whitehaven
8. Length of time Insane,	three weeks
9. Whether first attack,	yes
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	three weeks
13. Supposed Cause,	mental excitement
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of the Family known to be or to have been Insane,	Johanna Walker wife not known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this twenty eighth day of June One thousand eight hundred and sixty six

(*To be signed by Party applying*) Johanna Walker

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, J P H Harris
being a (1) Member of the Royal College of Physicians Edinburgh & a Member of the R C S of Ireland
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Militia Barracks Whitehaven in the County Cumberland separately from any other Medical Practitioner visited and personally examined (4) William Stalker Staff Sergt R C M residing in said Barracks and that the said William Stalker is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Violence & mental aberration

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

See Coherent Conversation about religion & money

Name and Medical Designation, J P H Harris Physician

Place of Abode, Whitehaven

DATED this 23rd day of June One thousand eight hundred and 66

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, John Dixon Fuller
being a (1) Doctor of Medicine, University of Aberdeen and Member of the Royal College Surgeons England
and being in actual practice as a (2) Physician and Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Militia Barracks in Whitehaven in the County Cumberland separately from any other Medical Practitioner visited and personally examined (4) William Stalker Staff Sergt Royal Cumberland Militia and that the said William Stalker is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Rambling incoherent talk about Religion — An idea that he was to effect the end of the world which has now come

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Rambling restlessness — exaggerate talk about religion — an idea that he was to be shot for Anderpest

Name and Medical Designation, John Dixon Fuller

Place of Abode, Whitehaven

DATED this twenty eighth day of June One thousand eight hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, J. Pitcairn M.D. being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum in the County of Dumfries, seen and personally examined William Walker Militia man, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

J. Pitcairn M.D.

DATED this 28th day of June One thousand eight hundred and sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Stoller Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Joanna Walker Barracks Whitehaven Cumberland Certificates under the hands of J. Pitcairn and John Dixon Fidler, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Walker Staff Sergeant Militia Barrack Whitehaven and that the said William Walker is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Walker as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Walker which accompanied the said Petition.

DATED this Twenty ninth day of June One thousand eight hundred and sixty six

John Stoller

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

William Stalker
~~[illegible]~~
28th June
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(*) Sheriff or Steward.
(*) Shire or Stewartry.

Unto the Honourable the (*) Sheriff *of the* (*) Shire of Dumfries *and his Substitutes*—

The Petition of Jessie Ronald 5-3 St Street Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Ronald your Petitioner's (*) Sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Helen Ronald to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(*) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Jessie Ronald.

Dated this First (*) day of July One thousand eight hundred and sixty six

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Helen Ronald
2. Sex and Age,	Female — Age Twenty-five years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Dressmaker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	53 Irish Street Dumfries
7. Place where Found and Examined,	53 Irish Street do
8. Length of time Insane,	Six months
9. Whether first attack,	First
10. Age (if known) on first Attack,	Twenty five
11. When and where previously under Examination and Treatment,	Placed as above
12. Duration of existing Attack,	Six months
13. Supposed Cause,	general weakness of system
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	None
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Winifred Ronald, mother of the above residing at 53 Irish Street Dumfries None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this First day of July One thousand eight hundred and Sixty-Six years

(*To be signed by Party applying*) Jessie Ronald

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James M: McCulloch, M: being a (1) Graduate of the University of Edinb and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) 53 Irish Dumfries, in the Count Dumfriesshire separately from any other Medical Practitio visited and personally examined (4) Helen Ronald and the said Helen Ronald is a (5) person of unsound mind and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Says she sees the Devil, that the spirit of a man wants to a her &c. – Almost sleepless, excited &c.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Similar to the above

Name and Medical Designation, James M: McCulloc

Place of Abode, 38 Castle Street, Dumf

DATED this 1st day of July One thousand eig hundred and sixty six years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Alexander Thomson being a (1) Doctor of Medicine of the University of Glas and Licentiate of the Faculty of Physicians & Surgeo and being in actual practice as a (2) Physician and Surge hereby certify, on soul and conscience, that I have this day, at (3) 53 Irish Dumfries in the County Dumfries separately from any other Medical Practitio visited and personally examined (4) Helen Ronald and the said Helen Ronald is a (5) person of unsound mind and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Thinks she is foll and persecuted by a bad man – sees bright lights in bedroom and heads sometimes with and sometimes horns & other appearances – also hears voices threate her during the night.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Told by her mother and sister that she is restl and sleeps little and eats little; and the above app ances make her start of bed screaming and hurt in a state of alarm

Name and Medical Designation, Alex Thomson

Place of Abode, 14 Castle St Dumfries

DATED this First day of July One thousand eig hundred and Sixty six years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James M: McCulloch M: D: &c.
being (1) a physician
hereby certify, on soul and conscience, that I have this day, at (2) 53 Irish Street
in the County of Dumfriesshire, seen and personally examined
Helen Ronald, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

James M: McCulloch M: D: &c.

DATED this 1st day of July One thousand eight hundred and sixty six years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Jessie Ronald
53 Irish Street Dumfries
Certificates under the hands of James Murray McCulloch
and Alexander Thomson —, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Helen Ronald 53 Irish Street Dumfries — and that the said
Helen Ronald — is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Helen Ronald — as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Helen Ronald — which accompanied the said Petition.

DATED this Third — day of July One thousand eight hundred and Sixty Six

John P. Trotter

To the Superintendent of the (7) Asylum of Public Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1
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v. Helen Ronald
1/7/66

20 & 21 *Vict., Cap.* 71. *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Wigtown *and his Substitutes,*—

The Petition of Henry Watt, Insp.r of Poor Stranraer humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Morrow is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Morrow to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) H. Watt Inspector

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twentyeight (3) day of June one thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mrs Margaret Morrow
2. Sex and Age,	Female aged 75 years
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Domestic
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	George Street
7. Place where Found and Examined,	present abode. 19 Fisher Street
8. Length of time Insane,	Since the beginning of the present year
9. Whether first Attack,	no. previously in an asylum in Glasgow
10. Age (if known) on first Attack,	about 44 years.
11. When and where previously under Examination and Treatment,	an Asylum at Glasgow
12. Duration of existing Attack,	very ill since March
13. Supposed Cause,	Child dying suddenly during the night in her arms
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Stranraer
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	William Murray (Son) Tailor 14 St Andrew St Kilmarnock, no friend ever known to be insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* H. Watt Inspector

DATED this twentyeight day of June one thousand eight hundred and sixty six

[4]

* To be Signed by the Party applying.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, John Orrell being a (1) Licentiate of the Faculty of Physicians and Surgeons of Glasgow and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) 19 Fisher Street Stranraer in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Margaret Thorburn or Morrow a Pauper and the said Margt Thorburn or Morrow is a (5) Lunatic and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) I found her sitting up in bed. making a great noise & noise, cursing and threatening violence in a very excited manner

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Elizabeth Morrow or Mc Lean her daughter residing with her that she is almost constantly screaming and destroying everything around her and frequently uses violence to those around her. She expects unseen parties entering. that comes in her way whether persons or things & striking in the room corroborates the statement

(SIGNED) Name and Medical Designation, John Orrell Surgeon

Place of Abode, Stranraer

DATED this Twenty Eighth day of June One thousand eight hundred and Sixty Six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Hugh Flaming being a (1) Doctor of Medicine and a Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) 19 Fisher Street Stranraer in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Mrs Margaret Morrow Pauper and the said Mrs Margaret Morrow is a (5) Insane person and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) I found her lying almost in a state of nudity. Shouting in a most vociferous manner would not answer any questions. Her General appearance betokened Insanity.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her daughter Elizabeth Morrow and her attendant Margaret Stobie state that She is often very violent breaks windows, crockery &c at one time Scratched Herself Food for days and at another time Refuses to take food for days. Has attempted to make violent attacks with a hammer & other weapons

(SIGNED) Name and Medical Designation, Hugh Flaming Md Lond.

Place of Abode 17 Princes St Stranraer

DATED this Twenty Seventh day of June one thousand eight hundred and Sixty Six Years.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of one thousand eight hundred and

(1) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Macduff Rhind Esquire Advocate (1) Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Henry Watt Inspector of Poor Stranraer
Certificates under the hands of John Orgill Surgeon Stranraer
and Ebenezer Fleming M.D. Stranraer, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Mrs Margaret Morrow Stranraer a pauper and that the said
Mrs Margaret Morrow is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Margaret Morrow as a Patient into the (6) Crichton Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Morrow which accompanied the said Petition.

(SIGNED) M. Rhind

DATED this 29th day of June one thousand eight hundred and sixty six -

To the Superintendent of the (7) Asylum of Dumfries Crichton

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

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Margaret Morrow

2/7/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*—

The Petition of John Dinwoodie. Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Bridget Connally residing at Dumfries Poorhouse your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Bridget Connally to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Second (4) day of July One thousand eight hundred and Sixtysix

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Bridget Connally
2. Sex and Age,	Female – 61 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Single – Hawker
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	Dumfries —
7. Place where Found and Examined,	— do —
8. Length of time Insane,	about a week.
9. Whether first Attack,	yes —
10. Age (if known) on first Attack,	61 years
11. When and where previously under Examination and Treatment,	Dumfries Poorhouse
12. Duration of existing Attack,	about a week —
13. Supposed Cause,	Paralysis
14. Whether subject to Epilepsy,	No —
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	1 July 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not Known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Second day of July One thousand eight hundred and Sixtysix

(*To be signed by Party applying* John Dinwoodie, Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Mary Hall
being a (1) Graduate of the University of Edinburgh
Licentiate of the College of Physicians
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) North Street
Dumfries in the County of
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Bridget Connelly a Pauper,
and that the said Bridget Connelly is an (5) insane person
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks incoherently & tries to make to speak in any way to be understood. When up & moves quickly after her dressing gives me a perfect fit. She is a continual state of excitement

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The matron and attendants give an account much the same as above

Name and Medical Designation, Mary Hall M.D.

Place of Abode, Dumfries

Dated this 4 day of July One thousand eight hundred and Sixty six years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Brunas
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) North Street
Dumfries in the County of
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Bridget Connelly a Pauper
and that the said Bridget Connelly is a (5) person of
unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Will not answer any question put to her; is crying day, and repeats what I conclude to be Loch-a-ree, incoherently

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
The matron told me, that she takes off her clothes & whenever she is left alone endeavours to undress herself. Being one of the most violent patients in the room just

Name and Medical Designation, P. Brunas M.D.

Place of Abode, 22 Buccleuch Street

Dated this 6th day of July One thousand eight hundred and 66

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pilegrim Fetler Esquire Advocate(1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dinwoodie
Inspector of Poor for the parish of Dumfries
Certificates under the hands of William Marshall M.D.
and Patrick Murray M.D. , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Bridget Conally Dumfries Poorhouse a pauper and that the said
Bridget Conally is a (5) insane person and a person
of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Bridget Conally as a Patient into the (6) public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Bridget Conally which accompanied the said Petition.

DATED this Second day of July One thousand eight hundred and sixty six.

John P Fetler

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Budget Committee

2/7/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of John Dinwoodie Inspector of Poor Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Aitkin your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Aitkin to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Jno John Dinwoodie

Dated this Seventh (4) day of July One thousand Inspr eight hundred and sixty six.

R. Dinwoodie Inspr of Poor

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	James Aitkin
Sex and Age,	Male 23 years of Age
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Not known
Religious Persuasion, so far as known,	Free Church of Scotland
Previous Place of Abode,	Kilbarken, Glasgow
Place where Found and Examined,	Dumfries
Length of time Insane,	a few days
Whether first attack,	Not known
Age (if known) on first Attack,	—
When and where previously under Examination and Treatment,	Not known
Duration of existing Attack,	a few days
Supposed Cause,	Not known
Whether subject to Epilepsy,	Not known
Whether Suicidal,	Not known
Whether Dangerous to others,	supposed to be
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Glasgow
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not known
Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Seventh day of July One thousand eight hundred and 66

(*To be signed by Party applying*) Jno John Dinwoodie

Robt Dinwoodie Inspr of Poor

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualifications entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, William Scott being a (1) Graduate of the University of Edinb
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Priso
in Dumfries in the County
Dumfries separately from any other Medical Practitio
visited and personally examined (4) James Aitken a Pau
and
the said James Aitken is a (5) Lunati
and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is incoh
rattlep. hay delusions as to pe
Breathing to apaulz and drown
&c — —

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The Governor of the Prison pre
Similar Statement to the ab

Name and Medical Designation, Wm Scott M.D

Place of Abode, Dumfries

DATED this Seventh day of July One thousand eig
hundred and Sixty Six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualifications entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, William Marshall
being a (1) Graduate of the Faculty of Physicians a
Surgeons Glasgow and College of St Andrew
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Dumfries
Prison in the County
Dumfries separately from any other Medical Practitio
visited and personally examined (4) James Aitken, a Pauper
and
the said James Aitken is a (5) Lunatic
and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Talks incoherently, - makes use of wicked and
language, declines Something incomprehensible
regard to the sisters his mother and sisters —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
The Attendants state that he has appear
to be partly imbecile

Name and Medical Designation, Wm Marshall M.D.

Place of Abode, Buccleuch Street Dumfries

DATED this Seventh day of July One thousand eig
hundred and Sixty Six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Ritchie Rotherham (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Donnovdie
Inspector of Poor Dumfries
Certificates under the hands of William Scott
and William Marshall , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Aitken, Dumfries, a Pauper and that the said
James Aitken is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Aitken as a Patient into the (6) Public Asylum of Southern Counties Dumfries, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Aitken which accompanied the said Petition.

DATED this Seventh day of July One thousand eight hundred and Sixty Six

John R Rotherham

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

s James Aitken
7th July 1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes.*

The Petition of John Hiddleston Kirkton Kirkmahoe humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Hiddleston your Petitioner's (3) father is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Hiddleston to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

John Hiddleston

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 13th (4) day of July One thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Hiddleston
2. Sex and Age,	Male 5
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Joiner
5. Religious Persuasion, so far as known,	Estate Church
6. Previous Place of Abode,	Kirkton Kirkmahoe
7. Place where Found and Examined,	Do Do & Dumfries
8. Length of time Insane,	Three months
9. Whether first attack,	
10. Age (if known) on first Attack,	5
11. When and where previously under Examination and Treatment,	Three months
12. Duration of existing Attack,	Bad healthy
13. Supposed Cause,	No
14. Whether subject to Epilepsy,	Yes
15. Whether Suicidal,	No
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Hiddleston Son Kirkton Kirkmahoe
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 13th day of July One thousand eight hundred and sixty six

(*To be signed by Party applying*) John Hiddleston

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, J. Gilchrist M.D.
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Crichton House Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) John Middleston Joiner Kirkton Kirkmahoe and that the said John Middleston is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Naughty confused believes himself unfit for work and dying wishes to die

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Is alternately depressed & excited — sometimes refuses food is restless and sleepless as [illegible]

by his son

Name and Medical Designation, J. Gilchrist M.D.

Place of Abode, Crichton House Dumfries

DATED this ~~nineteenth~~ day of July One thousand eight hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, John Dickson M.D.
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) John Middleston Joiner Kirkton Kirkmahoe and that the said John Middleston is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is depressed and anxious. His mind is confused and occupied continually with ideas about his [illegible] — Believes that he is incurably diseased and that dying. Expresses a wish to die.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His son states that for some time the family have been afraid of his committing [illegible] — that he is sleepless at night & disposed to [illegible] about & that he neglects or refuses to take food

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dumfries

DATED this 14th day of July One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Kirkbrid M.D.
being (1) a Graduate of the University of Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Crichton House Dumfries
in the County of Dumfries, seen and personally examined
John Haddleston, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Kirkbrid M.D.

DATED this 13th day of July One thousand eight hundred and Sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esqr (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Haddleston Kirkton Kirkmahoe
Certificates under the hands of James Gilchrist
and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) John Haddleston Joiner, Kirkton, (Petitioners father) and that the said John Haddleston, Joiner is a (5) person of unsound mind and a Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Haddleston, Joiner as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Haddleston, Joiner which accompanied the said Petition.

DATED this Seventeenth day of July One thousand eight hundred and Sixty six

John P Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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John Middleston
12th July
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) ~~Stewartry~~ Wigton *and of Kirkcudbright and his Substitutes,—*

The Petition of Robert Symington

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jessie Gordon your Petitioner's (3) Wife. is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jessie Gordon to the Crichton Institution, Dumfries and to sanction her admission into the said Asylum. two words deleted. Robert Symington

(3) State degree of Relationship or other Capacity in which Petitioner stands to Lunatic.

DATED this eighteenth (4) day of July One thousand eight hundred and sixty-six.

(4) The date of the Petition must be within fourteen clear days preceding the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Jessie Gordon or Symington
Sex and Age,	Female, Twenty Eight years.
Married, Single, or Widowed,	Married.
Condition of Life, and previous Occupation (if any),	
Religious Persuasion, so far as known,	Presbyterian
Previous Place of Abode,	Canterbury New Zealand, at Kirkcudbright for the last four months.
Place where Found and Examined,	
Length of time Insane,	nine months More or less ill
Whether first attack,	about the end of october 1865.
Age (if known) on first Attack,	Rather over 27 years.
When and where previously under Examination and Treatment,	from oct 65 to March 66, in New Zealand In July 66 at Edinburgh Examined as aforesaid in H.R.
Duration of existing Attack,	
Supposed Cause,	Puerperal disease.
Whether subject to Epilepsy,	no.
Whether Suicidal,	no
Whether Dangerous to others,	no
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Penelope Gordon, Kirkcudbright her mother, none.
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this eighteenth day of July. One thousand eight hundred and sixty six

(To be signed by Party applying) Robert Symington.

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, J Thompson M.D.
being a (1) Fellow of the Royal Coll of Physicians Ed
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) 52 Queen St Edinburgh in the County Edinburgh separately from any other Medical Practitioner visited and personally examined (4) Mrs Symington and that the said Mrs Symington is a (5) lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Smiling & simpering without reason for it; occasional startled appearance & look in the midst of general conversation; irrelevant observations &c

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Muttering & talking often when left to herself &c; occasional incoherence of words & acts &c

Name and Medical Designation, J Thompson M.D.

Place of Abode, 52 Queen Street Edinburgh

DATED this twelfth day of July One thousand eight hundred and sixty-six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Wm Johnstone M.D. Edinr
being a (1) Member of the College of Surgeons
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Castle Ct Kirkcudbright in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Mrs Symington and that the said Mrs Symington is a (5) lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Startled appearance in general conversation. adequately in Kirkcudbright her mind fixed on any subject of conversation. Sudden nervous starting, &c &c

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) From her friends statements. Incoherent ing when left by herself &c &c

Name and Medical Designation, Wm Johnstone M.D.

Place of Abode, Kirkcudbright

DATED this 18th day of July One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar (1) Jun. Steward Substitute
of the (2) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3)
Robert Symington
Certificates under the hands of James Y. Simpson
and William Johnston , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Jessie Gordon or Symington and that the said
Jessie Gordon or Symington is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jessie Gordon or Symington as a Patient into the (6) Crichton Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jessie Gordon or Symington which accompanied the said Petition.

DATED this eighteenth day of July One thousand eight hundred and Sixty six years.

W H Dunbar

To the Superintendent of the (7) Crichton
Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1040

Jessie Gordon or Symington

20/7/66

[FORM B²]

25 *and* 26 *Vict. Cap.* 54, *Sect.* 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned William McLean being desirous to transfer Margt Hannah at present a Patient in Gurugal Asylum Glasgow, and (¹) detained at my instance from the said Asylum to the Royal Institution for Lunatics at Dumfries hereby request the authority of the Board to such transfer; and I subjoin a Statement of Particulars regarding the said Margaret Hannah and a Medical Certificate with respect to her mental and bodily condition.

(¹) *If Lunatic is not a Pauper:* detained at my instance, or whose nearest known relative I am. *If Lunatic is a Pauper:* a Pauper Lunatic of the Parish of which I am Inspector of Poor.

William McLean
² Brother in Law

(²) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED at Glasgow this 11th day of July One thousand eight hundred and Sixty Six

STATEMENT.

1. Christian Name and Surname of Patient at length,	Margaret Hannah
2. Sex and Age,	Female — Age 33 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	no occupation
5. Religious Persuasion, so far as known,	Church of Scotland
6. Date of Admission into Asylum,	October 1864
7. Length of time Insane,	ten years
8. Whether first Attack,	yes
9. Age (if known) on first Attack,	23
10. Duration of existing Attack,	10 years
11. Supposed Cause,	Hereditary
12. Whether subject to Epilepsy,	no
13. Whether Suicidal,	no
14. Whether Dangerous to others,	no
15. Parish to which the Lunatic (if a Pauper) is Chargeable,	
16. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of Family known to be, or to have been Insane,	Janet Hannah or McLean 301 Stirling Road Glasgow. Mrs Mary Pettigrew and Mrs Jane McCallay both Sisters of the Patient were Insane

I certify that, to the best of my knowledge, the above particulars are correctly stated.

(*To be signed by the Applicant*) William McLean

DATED this 11th day of July One thousand eight hundred and Sixty Six

N.B.—The foregoing particulars are required for the information of the authorities to whose care the Patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned David Walker,

(1) State Medical Qualifications.
(2) Name Asylum.

being (1) Sic. of the Fac. of Physicians and Surg
hereby certify that I have this day at (2) Garnqad Asylum. Glasgo
personally examined Margaret Hannah at present a
Patient in said Asylum, and with respect to her Mental State that She labours
under delusions regarding the amount of money
is known to possess. She believes that several young
are eager to obtain her in marriage. She has the mos
extravagant notions regarding dress and altogether
ideas on matters relating to herself are erroneous; and with respect to her
Bodily Health and Condition that On the whole she possesses
good General health; personally she is active and
willing to assist in domestic matters but always
under superintendence

and I further certify that, in my opinion, there is nothing in the Mental or Bodily Condition of the Patient to contraindicate removal to the ~~Asylum~~ Crichton Roy
Institution for Lunatics. Dumfries

David Walker Sc

DATED this tenth day of July One thousand eight hundred and Sixty Six

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SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

(3) Insert at whose instance the Lunatic is detained, or the nearest known Relative of the Lunatic, or the Inspector of the Parish by which the expense of the maintenance of the Lunatic is defrayed.

Application having been made to the Board by (3) William McLaren

to authorize the transfer of Margaret Hannah
from Garnqad Private Asylum to The Crichton Ro
Institution Dumfries, and the Board having considered such application and the accompanying Medical Certificate, do hereby authorize the transfer of the said Margaret Hannah as requested.

W. A. F. Browne Commissioner.

DATED at Edinburgh, this 12th day of July One thousand eight hundred and Sixty Six

320
Margaret Hannah
23 July 1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of Edward Byers Kirkconnel Hall

Lockfechan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Byers

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Wife

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Byers to the Crichton Royal Institution and to sanction her admission into the the said Asylum.

Edward Byers

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this twenty sixth (4) day of July One thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Janet Byers
2. Sex and Age,	Female 63 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Church of Scotland
5. Religious Persuasion, so far as known,	Kirkconnel Hall
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	2 months
8. Length of time Insane,	No
9. Whether first Attack,	62 years
10. Age (if known) on first Attack,	1865 at Home
11. When and where previously under Examination and Treatment,	2 months
12. Duration of existing Attack,	not known
13. Supposed Cause,	No
14. Whether subject to Epilepsy,	Rather
15. Whether Suicidal,	No
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this twenty sixth day of July One thousand eight hundred and

(*To be signed by Party applying*) Edward Byers

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Peter R Murray
being a (1) [illegible] of the University of E[illegible]
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Cruchet
Royal Institution in the County
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Janet Murray a Byres and t
the said Janet Murray a Byres is a (5) Person
unsound mind and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Excited
melancholy, Says that [illegible] from Hell [illegible] a great desire an
attempted to commit Suicide

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
John Ewin tells me, that she go
away from home, and was caught
attempting to commit Suicide

The reason not taken out of Penland

Name and Medical Designation, P Murray

Place of Abode, Brecken[illegible] St Dumf

DATED this 24th day of July One thousand eig
hundred and 67

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Young
being a (1) licentiate of the Royal College of Surgeons Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Golden Bull
Dumfries in the County
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Janet Byers, residing at Hall
Kirkconnell in the Parish of Holywood and the
the said Janet Byers is a (5) person of
unsound Mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Great depression of Spirits, and a total Change in her
Mind and Conduct from her usual habits. A desire to commit
Suicide

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, William Young, Surgeon

Place of Abode, Ecclefechan

DATED this twenty fourth day of July One thousand eigh
hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Patrick Murray being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal in the County of Dumfries, seen and personally examined Institution Janet Murray or Byers and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

P. Murray M.D.

Dated this 24th day of July One thousand eight hundred and 66

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexander Inglis Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Edward Byers Kirkconnell Hall Eccleftechan Certificates under the hands of Patrick Murray Jr and William Young, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Byers Petitioners wife and that the said Janet Byers is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Byers as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Byers which accompanied the said Petition.

Dated this Twenty sixth day of July One thousand eight hundred and sixty six

J. Alex. Inglis

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1041

Janet Ryan

24/7/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Stewart.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries and his Substitutes,—

The Petition of John Dinwoodie, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Nicholson your Petitioner's (3) Pauper residing at Murkinds Hospital Dumfries is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander Nicholson to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

Dated this Twentysixth (4) day of July One thousand eight hundred and Sixtysix

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Alexander Nicholson
2. Sex and Age,	Male – 73 years
3. Married, Single, or Widowed,	Widower
4. Condition of Life, and previous Occupation (if any),	do – Shoemaker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	do
8. Length of time Insane,	About a week
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	73 years
11. When and where previously under Examination and Treatment,	Murkinds Hospital, Dumfries
12. Duration of existing Attack,	About a week.
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No –
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	26 July 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not Known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twentysixth day of July One thousand eight hundred and Sixtysix

(*To be signed by Party applying*) John Dinwoodie, Inspector

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, William Jno Scott
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Poor House
in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Alex Nicholson a Pauper and that
the said Alex Nicholson is a (5) insane person
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks incoherently
raves on religious matters, is violently excited
imagines that he preaches before Queen
through funny pictures for which he is
paid

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) I
have heard much the same report
the matron

Name and Medical Designation, W Marshall M.D.

Place of Abode, Buccleuch Street Dumfries

Dated this 26th day of July One thousand eight
hundred and sixty six years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, William Scott
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Poor House
of St Michael of Dumfries
in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Alexander Nicholson
a Pauper and that
the said Alexander Nicholson is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) The matron told me
one of the inmates of the Hospital for imagined
insults to his late wife, has delusions and
talks incoherently

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
The matron and servants of the Poor
House resident similar to the above

Name and Medical Designation, Wm Scott M.D.

Place of Abode, Dumfries

Dated this 26th day of July One thousand eight
hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I John Citcairn Trotter Esqre (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dinwoodie Inspector of Poor, Dumfries
Certificates under the hands of William Marshall
and William Scott , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexander Nicholson, Muirheads Hospital Dumfries, a Pauper and that the said Alexander Nicholson is an (5) insane person and a Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Nicholson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Nicholson which accompanied the said Petition.

DATED this Twenty Sixth day of July One thousand eight hundred and Sixty Six years

John C Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/221

Alexander Nicholson

26/7/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) county of Dumfries and his Substitute,—

The Petition of D. Clapperton Interim Inspector.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Douglas. Pauper.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

~~your Petitioner's (3)~~ is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Douglas to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

D. Clapperton. Int. Insp.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Twenty third (4) day of July One thousand eight hundred and Sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Janet Douglas.
2. Sex and Age,	Female. age 30 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Residing to her fathers house
5. Religious Persuasion, so far as known,	Protestant-
6. Previous Place of Abode,	Murray St, Annan.
7. Place where Found and Examined,	Bellsprings parish of Annan.
8. Length of time Insane,	10 weeks,
9. Whether first Attack,	no.
10. Age (if known) on first Attack,	Twenty three years old
11. When and where previously under Examination and Treatment,	7 years ago in her fathers house at Bellsprings parish of Annan.
12. Duration of existing Attack,	10 weeks,
13. Supposed Cause,	none.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Annan.
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Douglas Bellsprings Parish of Annan. Father. No member of family known to have been insane.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twenty third day of July One thousand eight hundred and sixty six.

(To be signed by Party applying) Duncan Clapperton.
Interim Inspector of Poor Annan.

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Wilson Ewart being a (1) Licentiate of the Royal College of Surg in Edinbgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Bellsprings in the Parish of Annan in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Janet Douglas a pauper and that the said Janet Douglas is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her general appearance; vacant Expression of Conn-ance &c

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Father thinks that she had an attack of aberration of mind about 7 years ago but cannot assign any cause for either att

Name and Medical Designation, Wilson Ewart, Surgeon

Place of Abode, Edinburgh Street Annan

DATED this 17th day of July One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Little being a (1) Doctor of Medicine & Licentiate of the Coll of Surgeons of Edinburgh and being in actual practice as a (2) General practitioner hereby certify, on soul and conscience, that I have this day, at (3) Bellsprings in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Janet Douglas a pauper and that the said Janet Douglas is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her raving and incoherent talking, restless unsteady actions, vacant countenance, & her appearance generally.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Was told by her Father that she has frequent paroxisms of excitement especially after sleep & that she tears & destroys her clothes.

Name and Medical Designation, James Little M.D.

Place of Abode, Bridge Place Annan

DATED this Nineteenth day of July One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Duncan Clapperton Interim Inspector of Poor Annan
Certificates under the hands of William Ewart
and James Little , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Douglas, Bellsprings Annan, a pauper and that the said Janet Douglas is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Douglas as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Douglas which accompanied the said Petition.

DATED this Twenty fifth day of July One thousand eight hundred and Sixty Six Years

John P. Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/222

Janet Douglas

26/7/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,*—

The Petition of John Crosby one of the Relieving Officers of the Berwick upon Tweed Union humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Elliot a pauper Inmate of the Berwick upon Tweed Union Workhouse is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Elliot ——— to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(2) State degree of relationship or other society in which Petitioner stands to Lunatic.

John Crosby Relieving Officer

Dated this Twenty fourth (3) day of July One thousand eight hundred and Fifty six

(3) The date of the Order must be within fourteen clear days following the dates of Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Janet Elliot
Sex and Age,	Female - 57 Years
Married, Single, or Widowed,	Married
Condition of Life, and previous Occupation (if any),	Wife of George Elliot - a Fisherman
Religious Persuasion, so far as known,	Presbyterian
Previous Place of Abode,	Spittal
Place where Found and Examined,	Spittal - Workhouse Berwick on Tweed
Length of time Insane,	Seven Weeks
Whether first attack,	yes
Age (if known) on first Attack,	57 years
When and where previously under Examination and Treatment,	The last three weeks in Berwick Workhouse
Duration of existing Attack,	Seven Weeks
Supposed Cause,	Not known
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	yes
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Berwick upon Tweed Union
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	George Elliot Spittal, Berwick on Tweed Husband
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 24th day of July One thousand eight hundred and Fifty Six

(*To be signed by Party applying*) John Crosby

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Colville Brown
being a (1) Doctor of Medicine of Edinburgh Univ
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Workhouse, T
in the County
the Borough and Town of Berwick on Tweed separately from any other Medical Practitio
visited and personally examined (4) Janet Elliot - wife of George E
Fisherman Spittal - a pauper and t
the said Janet Elliot is a (5) person of
mind and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Incoherency of conversation, inability to sustain a sho
conversation with correctness, assertions of having a co
fine within her, and general appearance of me

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Attempts to kick and strike her attendants

Name and Medical Designation, Colville Brown, Doctor of Medi
Edinbro' University

Place of Abode, Berwick on Tweed

DATED this 23rd day of July One thousand eig
hundred and sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robert Carr Flinker
being a (1) Licentiate of Royal College of Physici
in Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Workhouse
Berwick, upon Tweed in the County
of the Borough and Town of Berwick on Tweed separately from any other Medical Practitione
visited and personally examined (4) Janet Elliot - wife of George Elliot
Fisherman Spittal - a pauper and th
the said Janet Elliot is a (5) person of
unsound mind and a proper person to be detaine
under Care and Treatment, and that I have formed this opinion upon the followin
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Whilst visiting her she
up a continual rambling of nonsense, expressing a feel
if she was sinking into the Earth, and a great dread of
she could not describe and was likely to injure her

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Sleepness, restless and noisy at nights gets out of the
and this morning in the water closet with all her ab
off, requires continued watching to prevent her injuring
self and others - Communicated by Master of Workh

Name and Medical Designation, Robert Carr Flinker - Licentiate
Royal College of Physicians Edi

Place of Abode, ~~Robert Carr Flinker~~ - Sandgate Berw
who

DATED this 24th day of July One thousand eight
hundred and Sixty - Six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pilcairn Trotter Esqr (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Crosby one of the Relieving Officers of the Berwick upon Tweed Union
Certificates under the hands of Colville Brown
and Robert Carr Fluker , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Elliot Berwick upon Tweed Union workhouse a Pauper and that the said
Janet Elliot is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Elliot as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Elliot which accompanied the said Petition.

DATED this Twenty Sixth day of July One thousand eight hundred and Sixty Six years

John P Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Janet Elliott
31st July 1866.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Stewart. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries — *and his Substitutes,—*

The Petition of John Crosby one of the Relieving Officers of the Berwick upon Tweed Union humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ann Alexander a Pauper inmate ~~your Petitioner's~~ (3) of the Berwick upon Tweed Union Workhouse is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Ann Alexander to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(3) State degree of relationship or other parity in which Petitioner stands to Lunatic.

John Crosby Relieving Officer

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Twenty fourth (4) day of July One thousand eight hundred and fifty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Ann Alexander
2. Sex and Age,	Female - 40 Years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Wife of Thomas Alexander - Coalminer
5. Religious Persuasion, so far as known,	United Presbyterian
6. Previous Place of Abode,	Spittal
7. Place where Found and Examined,	Spittal - Workhouse Berwick on Tweed
8. Length of time Insane,	Four Years
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	36 Years
11. When and where previously under Examination and Treatment,	Workhouse Berwick on Tweed
12. Duration of existing Attack,	Four Years
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Berwick upon Tweed Union
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Thomas Alexander, Spittal Berwick on Tweed - Husband None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 24th day of July One thousand eight hundred and fifty six

(*To be signed by Party applying*) John Crosby

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, being a (1) Cobille Brown Doctor of Medicine

and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) The Workhou in the County o

Berwick on Tweed of the Borough and Town of Berwick on Tweed separately from any other Medical Practitioner visited and personally examined (4) Ann Alexander, wife of Thomas and tha

coal Miner Spittal – a pauper the said Ann Alexander is a (5) person of un

mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Melancholia strongly marked in her appea
Apertions of receiving personal injuries: when it
quite impossible for her to do so

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Singing of hymns at all hours of the night
occasional attempts to leave the Workhouse
night

Name and Medical Designation, Cobille Brown, Doc
Medicine

Place of Abode, Berwick on Tweed

DATED this 23rd day of July One thousand eigh
hundred and sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualifications entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, or a person of unsound mind.

I, the undersigned, being a (1) Robert Dan Fletcher Licentiate of the Royal College of Physicians in Edinburgh

and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Workhouse Berwick on Tweed in the County o

the Borough and Town of Berwick on Tweed separately from any other Medical Practitioner visited and personally examined (4) Ann Alexander – wife of Thomas Alexander and tha

Coal Miner Spittal – a pauper the said Ann Alexander is a (5) person of

unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Melancholia very
visible in her general appearance apparently sullen and
moves, could with difficulty ~~p~~ persuading her to answer
any question.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

At times very excited singing and dancing and in
any hands threating and struggling when assisted by
her by the Master of the Workhouse

Name and Medical Designation, Robert Dan Fletcher Le
of the Royal College of Physic

Place of Abode, Sandgate Berwick upon Tweed

DATED this 24th day of July One thousand eigh
hundred and sixty six

CERTIFI[illegible]

[illegible] the keeping of the [illegible] the Ord[illegible]

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(2) State medical qualification. (3) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esqre (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Crosby one of the Relieving Officers of the Berwick upon Tweed Union
Certificates under the hands of Colville Brown
and Robert Carr Fluker , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Ann Alexander, Berwick upon Tweed Workhouse, a Pauper and that the said Ann Alexander is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ann Alexander as a Patient into the (6) Public Asylum of Southern Counties, Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ann Alexander which accompanied the said Petition.

DATED this Twenty Sixth day of July One thousand eight hundred and Sixty Six years

John P Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

MEDICAL CER

Ann Alexander
Berwick on Tweed
31st July 1886

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,*—

The Petition of Joseph Crichton Inspector of Poor of Canonbie humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Little Longtown Parish of Dunthrot is at present in a state of Mental Derangement and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Little as a patient to the Southern Counties asylum and to sanction her admission into the said Asylum.

(SIGNATURE) Jo Crichton

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Thirty first (3) day of July one thousand eight hundred and Sixty Six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mary Little
2. Sex and Age,	Female aged 27
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Longtown
7. Place where Found and Examined,	Longtown
8. Length of time Insane,	Three years
9. Whether First Attack,	Not known aged 24
10. Age (if known) on First Attack,	Always at home
11. When and where previously under Examination and Treatment,	Not of that character
12. Duration of Existing Attack,	Hereditary Irregular menstruation
13. Supposed Cause,	No
14. Whether subject to Epilepsy,	Yes
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	Canonbie
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	May 1865
18. Date of becoming Chargeable,	Mary Armstrong Mother one Cousin
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	No

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNATURE)* *Name,* Jo Crichton

DATED this Thirty first day of July one thousand eight hundred and Sixty Six

* To be Signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Francis Beattie Graham being a (1) L R C E Edinburgh and being in actual practice as a (2) Practitioner of Medicine hereby certify, on soul and conscience, that I have this day, at (3) Longtown in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) Mary Little, residing with mother in Longtown, a pauper and that the said Mary Little is a (5) Lunatic and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She fancies when in the paroxysm that she is ar[illegible] to be violated. at that time she abuses [illegible] body and is very violent and dangerous to [illegible]

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Oth[illegible] She cannot be controlled by them. the statements confirm my observations, in regard to [illegible] delusion she labours under.

(SIGNED) *Name and Medical Designation,* F. B. Graham L[illegible]

Place of Abode, Longtown

DATED this 31st day of July One thousand eight hundred and sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Grierson being a (1) member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mary Little, from Longtown — a pauper chargeable to Cumberland and that the said Mary Little is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is [illegible] dull, stupid, incoherent and seeming [illegible] comprehending — untidy in person and [illegible] alike of comfort or discomfort or even [illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her brother states that she is at time violent.

(SIGNED) *Name and Medical Designation,* S. Grierson M.R.C.[illegible]

Place of Abode Southern Counties Asylum, Dumfries

DATED this first day of August one thousand eight hundred and sixty six

date

CERTIFICATE OF EMERGENCY.

(This certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Mary Little is a (1) Lunatic hereby further certify that the Case of the said Mary Little is one of Emergency, and I recommend the immediate removal of the said Mary Little to an Asylum accordingly.

Name. F. B. Graham

Place of Abode. Longtown

DATED this 31st day of July One thousand eight hundred and Sixty six.

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Andrew Barrie Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Joseph Crichton Inspector of Poor Annandale Certificates under the hands of Francis Beattie Graham and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Little in Longtown a pauper and that the said Mary Little is a (5) Lunatic and a Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Little as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Little which accompanied the said Petition.

(SIGNATURE) A Barrie

DATED this First day of August one thousand eight hundred and sixty six. years ~~Two words delete~~

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

A Barrie

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.

Mary Little
31st July 1776

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of Peter William Shewen of Whitehaven

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Richard Shewen Jalen your Petitioner's (3) Nephew is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Richard Shewen Jalen to the Crichton Royal Institution and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Peter W Shewen

DATED this fourth (4) day of August One thousand eight hundred and Sixty six

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Richard Shewen Jalen
2. Sex and Age,	Male Thirty
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Gentleman
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Est Meads in the Parish of Bray the Do
7. Place where Found and Examined,	Do
8. Length of time Insane,	Twelve Years or thereabouts
9. Whether first Attack,	No
10. Age (if known) on first Attack,	Eighteen Years or thereabouts
11. When and where previously under Examination and Treatment,	Nowhere
12. Duration of existing Attack,	About a Fortnight
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	no
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a Pauper
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Anne Jalen, Mother Yes
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this first day of August One thousand eight hundred and sixty six

(*To be signed by Party applying*) Peter W Shewen

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Thomas Watson Hudson being a (1) Member of the Royal College of Surgeons Lond and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Eskmeal Booth in the County of Cumberland separately from any other Medical Practitioner visited and personally examined (4) Richard Sherwen Falcon and that the said Richard Sherwen Falcon is (5) of Unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Illusions, thinks is being poisoned by those about him

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) he threatened the lives of those about him particularly his Mo

Name and Medical Designation, Thos. W. Hudson

Place of Abode, Booth Cumberland

DATED this 1st day of August One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Richard Rogers being a (1) Member of the Royal College of Surgeon and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Eskmeals Booth in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) Richard Sherwen Falcon and that the said Richard Sherwen Falcon is of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) His violent, & dangerous behaviour, to his mother, Believing he is going to be castrated, persons around him

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Threating to injure those around him

Name and Medical Designation, William R Rogers

Place of Abode, Holborn Hill, Nr Broughton Lancaster

DATED this 1st day of August One thousand eight hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Thomas Watson Hudson being (1) a Surgeon hereby certify, on soul and conscience, that I have this day, at (2) Eskmeals Boothe in the County of Cumberland, seen and personally examined Richard Sherwen Falcon, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Thos. W. Hudson

DATED this 15th day of August One thousand eight hundred and sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Andrew Barrie Esquire (1) Sheriff-Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Peter William Sherwen of Whitehaven Certificates under the hands of Thomas Watson Hudson and William Richard Rogers, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Richard Sherwen Falcon Eskmeals St Boothe – and that the said Richard Sherwen Falcon – is a (5) of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Richard Sherwen Falcon as a Patient into the (6) Public Asylum of Crichton Royal Institution – and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Richard Sherwen Falcon which accompanied the said Petition.

DATED this Second day of August One thousand eight hundred and sixty six years.

A Barrie

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe Him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1042

S. Richd. Sherwen Falcon

1/8/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,*—

The Petition of Andrew Morrison, Farmer, Landican, Cheshire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret ~~Morrison~~ Morrison your Petitioner's (3) wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Morrison to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Andrew Morrison

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this first (4) day of August One thousand eight hundred and Sixty-six years

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Margret Morrison
2. Sex and Age,	Female 62 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Wife of a Farmer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Landican Cheshire England
7. Place where Found and Examined,	
8. Length of time Insane,	about 12 years
9. Whether first attack,	first
10. Age (if known) on first Attack,	50 years
11. When and where previously under Examination and Treatment,	See Brook Liverpool Asylum
12. Duration of existing Attack,	about 12 years
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Andrew Morrison Landican Cheshire, her husband
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this first day of August One thousand eight hundred and Sixty Six

(*To be signed by Party applying*) Andrew Morrison

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Alexander Morrison being a (1) Doctor of Medicine of the University of Glasgow and Licentiate of the Faculty of Physicians Surgeons and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) Margaret Morrison Farmer's wife from Landican Cheshire and the said Margaret Morrison is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Appearance - Excited - maniacal and raves and talks incoherently.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Told by her husband, that she has been under treatment formerly - has not been well for 12 years sis getting worse that she is restless at night - sleeps little - and is continuing getting up at night & moving about the house - cannot attend to her duties, and is troubled with Spiritual Appearances

Name and Medical Designation, Alex Thomson M.D. & Surgeon

Place of Abode, Dumfries -

DATED this First day of August One thousand eight hundred and Sixty-six years

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson being a (1) graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Margaret Morrison Farmer's Wife from Landican Cheshire and the said Margaret Morrison is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) - She is at in a state of maniacal excitement - incoherent restless and talkative.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Told by the Medical Officer at the that she expresses herself as lost and damned to all eternity

Name and Medical Designation, John Dickson

Place of Abode, Dumfries (Castle

DATED this 3rd day of August One thousand eight hundred and Sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Alexander Thomson being (1) a Doctor of Medicine of the University of Glasgow hereby certify, on soul and conscience, that I have this day, at (2) the Southern Counties Asylum in the County of Dumfries, seen and personally examined Margaret Morrison, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Alex Thomson

DATED this First day of August One thousand eight hundred and sixty six years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Andrew Morrison Farmer, Landican, Cheshire Certificates under the hands of Alexander Thomson and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret Morrison, the Petitioners wife and that the said Margaret Morrison is a (5) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Morrison as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Morrison which accompanied the said Petition.

DATED this Fourth day of August One thousand eight hundred and Sixty Six

John P. Trotter

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Margaret Morrison
1st August
1866

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,*—

The Petition of Charles Grieve Farmer humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Grieve or Common your [illegible] is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Common to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(Signed) Ch. G. Grieve

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 19 (3) day of April 19 one thousand eight hundred and

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mary Common
2. Sex and Age,	Female – 29
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Shepherds Wife
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Kennis Water – Wester Kirk
7. Place where Found and Examined,	Albyrig
8. Length of time Insane,	Four days
9. Whether first Attack,	Third Attack
10. Age (if known) on first Attack,	25 years
11. When and where previously under Examination and Treatment,	Crichton Royal Institution
12. Duration of existing Attack,	Four days
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	—
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	James Common – Shepherd Albyrig Husband —
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signed)* *Name,* Ch. G. Grieve

Dated this 19th day of April one thousand eight hundred and sixty six

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1200.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Johnstone Carlyle M.D. Edinb being a (1) Licentiate of the Royal College of Surgeons in and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Albyrig in the Parish of Canonbie in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mary Common and that the said Mary Common is a (5) Person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Much depression and delusion with great incoherence, is exceeding violent, and obliged to be placed under restraint

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The above facts have also been communicated by her Father & Mother

(SIGNED) *Name and Medical Designation,* W. J. Carlyle M.D. Edinb

Place of Abode, Langholm

DATED this 18th day of April One thousand eight hundred and Sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Hugh Grainger Stewart being a (1) Graduate of the University of Edinburgh in Medicine. and a Surgeon and being in actual practice as a (2) physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mrs Mary Common from Albyrigg and that the said Mary Common is a (5) lunatic and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Is in a state of deep depression of mind unable to recognise any one — is evidently suffering from want of food. Has been twice before a patient in

2. Other facts (if any) indicating Insanity communicated to me by others. (7)

Informed by her father Chas Grieve farmer Albyrigg that she has been without food for 3 days

(SIGNED) *Name and Medical Designation,* H. G. Stewart M.D.

Place of Abode, Crichton Institution D.

DATED this 19th day of April one thousand eight hundred and Sixty six years

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Mary Common is a (1) person of unsound mind hereby further certify that the Case of the said Mary Common is One of Emergency, and I recommend the immediate removal of the said Mary Common to an Asylum accordingly.

Name, Wm. Carlyle M.D. Surgeon

Place of Abode, Sanquhar

DATED this 18th day of April one thousand eight hundred and sixty six

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Charles Grieve Farmer Albyrig Canonbie Certificates under the hands of William Johnstone Carlyle and Hugh Grainger Steuart, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Grieve or Common Albyrig Canonbie and that the said Mary Grieve or Common is a (5) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Grieve or Common as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise her Transmission to the said Asylum accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Grieve or Common which accompanied the said Petition.

(SIGNED) J Trotter

DATED this Nineteenth day of April one thousand eight hundred and sixty six

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

1035 - 1/227

Mary Common

19/4/66

Transferred to

S.C.A.

4/8/66

Mary Common

1st August

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict., Cap.* 71., *Sect,* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(*) Sheriff or Steward.
(*) Shire or Stewartry.

Unto the Honourable the (*) Sheriff — *of the* (*) Shire of Dumfries *and his Substitutes,*—

The Petition of Alex Ferguson, Insp. of Poor of Dryfesdale, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jessie Gladstone, residing in Lockerbie, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jessie Gladstone — to the Southern Counties Asylum, Dumfries and to sanction her admission into the said Asylum.

(SIGNED) Alex Ferguson, Insp. of Dryfesdale.

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Seventh — (*) day of August — One thousand eight hundred and Sixty-six years.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jessie Gladstone —
2. Sex and Age,	Female — 44 years of age —
3. Married, Single, or Widowed,	Single —
4. Condition of Life, and previous Occupation (if any),	Domestic Servant —
5. Religious Persuasion, so far as known,	Protestant —
6. Previous Place of Abode,	In Constantinople for some years —
7. Place where Found and Examined,	Lockerbie —
8. Length of time Insane,	Peculiar & irritable for many years —
9. Whether first attack,	Supposed to have been of unbalanced mind when abroad
10. Age (if known) on first Attack,	Not known —
11. When and where previously under Examination and Treatment,	Not known, unless at Constantinople —
12. Duration of existing Attack,	Generally getting worse for some weeks —
13. Supposed Cause,	Not known —
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No, but showing violence to Medical Officer —
16. Whether Dangerous to others,	Dryfesdale Parish —
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	July 23d 1866 —
18. Date of becoming Chargeable,	Walter Gladstone, Mason, Lockerbie
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	No Member of the Family known to have been insane —
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* Alex Ferguson, Insp.

DATED this Seventh — day of August — One thousand eight hundred and Sixty-six years —

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, William Rucendal
being a (1) Doctor of Medicine of the
University of Glasgow Physician
and being in actual practice as a (2) Physician Whyte Pl
hereby certify, on soul and conscience, that I have this day, at (3) in the County of
Forkerbri Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Jesse Gladstone, Dumfries and that
the said Jesse Gladstone is a (5) person
of Moorland Street and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) There is derangement of the intellectual and moral faculties, accompanied at times with a great deal of excitement and violent fury, which manifests itself principally towards bystanders, persons.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She has a strong hatred and suspicion of me; I am told by a policeman, that she met her on the day carrying in a pair of tongs under her cloak & after ~~[illegible]~~ in court she threatened me. She has

(SIGNED) Name and Medical Designation, William Rucendal Doctor

Place of Abode, Forkerbri

DATED this sixth day of August One thousand eight hundred and sixty five

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, William Smith Kerr.
being a (1) Doctor of Medicine, and Licentiate of Royal
of Surgeons Edinburgh.
and being in actual practice as a (2) Medical Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) the County Buildings in the County of
Dumfries.
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Jesse Gladstone
Spinster and that
the said Jesse Gladstone is a (5) person of
unsound mind. and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is full of delusions, as to persecution of public property in Lockerbie, and her medical officials killing her. She raves & shouts. Her talk is somewhat incoherent.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Sergt Hyslop. Says she is constantly referring to fancied abuse
P.O. Last Sunday she kicked in the Free Church congregation
that she is subject to furious attacks & is suspicious

(SIGNED) Name and Medical Designation, William S. Kerr M.D.

Place of Abode, Buccleuch St. Dumfries

DATED this 7th day of August. One thousand eight hundred and sixty six.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that is a (1) hereby further certify that the Case of the said is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Advocate Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Alexander Ferguson Inspector of Poor Dryfesdale Certificates under the hands of William Macindoe and William Smith Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jessie Gladstone residing in Lockerbie (a pauper) and that the said Jessie Gladstone is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jessie Gladstone as a Patient into the (6) public - Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jessie Gladstone which accompanied the said Petition.

(SIGNED) John P Trotter

DATED this Seventh day of August One thousand eight hundred and sixty six years

To the Superintendent of the (7) public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

Jessie Gladstone
7th August 1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of William Southern, 1 Maple Terrace Newcastle upon Tyne humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Wilson Procter, Analytical Chemist your Petitioner's (3) Nephew is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Wilson Procter to the Crichton Royal Institution and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

William Southern

Dated this (4) 4 day of August One thousand eight hundred and Sixty Six

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	William Wilson Procter
2. Sex and Age,	Male aged 28 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Analytical Chemist
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Newcastle upon Tyne
7. Place where Found and Examined,	Newcastle on Tyne (1 Maple Terrace)
8. Length of time Insane,	About Six weeks
9. Whether first Attack,	First time
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	
13. Supposed Cause,	anxiety on seeing his Sister's Excitement
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	Slightly in his present state only
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	none
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Procter, father to the patients. No member of the family ever known to ~~have~~ have been deranged.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 4 day of August One thousand eight hundred and Sixty Six

(*To be signed by Party applying*) William Southern

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Robert Rountree Lyttle M.B.
being a (1) Member of the College of Physicians Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) 1 Maple
Newcastle upon Tyne ——— in the County
Newcastle upon Tyne separately from any other Medical Practitioner
visited and personally examined (4) William Wilson Porter
Workhouse 18 Archbold Terrace and th
the said William Wilson Porter is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Is labouring under the delusion that he is Jesus Christ and that he has power & mission to convert the world

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Medical Officer of Workhouse who informs me that he has delusions in reference to his Mission &c. &c.

Name and Medical Designation, R. R. Lyttle M.B.

Place of Abode, Newcastle upon Tyne

DATED this 7th day of August One thousand eight hundred and Sixty Six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Alfred Wilkinson Rayne
being a (1) Member of the Royal College of Physicians Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) 1 Maple
Terrace Newcastle on Tyne in the County of Newcastle upon Tyne separately from any other Medical Practitioner
visited and personally examined (4) William Wilson Porter
and that
the said William Wilson Porter is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
He is Jealous his conversation is incoherent. He also imagines that he is Christ and that he is sent to save the World —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
He has been very violent to those around him —

Name and Medical Designation, Alfred Wilkinson Rayne

Place of Abode, Newcastle upon Tyne

DATED this 7th day of August One thousand eight hundred and Sixty six —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Samuel Grierson ~~the~~ being (1) Member of the Royal College of Surgeons of England hereby certify, on soul and conscience, that I have this day, at (2) the Crichton Royal Institution in the County of Dumfries, seen and personally examined William Wilson Procter, above designed, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

S. Grierson M.R.C.S.Eng:

DATED this Eighth day of August One thousand eight hundred and sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Andrew Barrie Esquire (3) Sheriff Substitute of the (3) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Southern Newcastle upon Tyne Certificates under the hands of Robert Twentyman Lightfoot and Septimus William Rayne, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Wilson Procter Newcastle on Tyne. and that the said William Wilson Procter is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Wilson Procter as a Patient into the (6) public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Wilson Procter which accompanied the said Petition.

DATED this Eighth day of August One thousand eight hundred and sixty six years.

A Barrie

To the Superintendent of the (7) public *Asylum of* Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1043

William Wilson Preston

8/8/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Shire of Dumfries and his Substitutes,—

The petition of Benjamin Tyerman, master of the Sunderland Workhouse humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Grayson, a pedler, soldier & now your Petitioner's (3) pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Grayson to the Southern counties asylum and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

X Benjamin Tyerman

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eighth (4) day of August One thousand eight hundred and Sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	George Grayson
2. Sex and Age,	Male - 32 years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Late a private in the 33rd Foot Regiment previously a Piddler
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Sunderland Union Workhouse
7. Place where Found and Examined,	Three years
8. Length of time Insane,	First Attack
9. Whether first attack,	29 years of age
10. Age (if known) on first Attack,	No where
11. When and where previously under Examination and Treatment,	Three years
12. Duration of existing Attack,	Sun Stroke in India
13. Supposed Cause,	No
14. Whether subject to Epilepsy,	Yes
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	Sunderland Union
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	His Mother Ann Grayson residing at South Hylton near Sunderland
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Eighth day of August One thousand eight hundred and Sixty six

(*To be signed by Party applying*) X Benjamin Tyerman

P.M.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Alexander Thomson being a (1) Doctor of Medicine of the University of Glasgow and Licentiate of the Faculty of Physicians & Surgeons and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) George Grayson, a Pauper and the said George Grayson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Told by the patient that he suffered from g[illegible] and that he has thought of committing suici[illegible] that he wandered about during the day; and was restless and sleepless at night.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Told by the Sunderland workhouse master that restless, dangerous and suicidal & that friends were afraid of him when at ho[illegible] and that he had threatened to take his life.

Name and Medical Designation, Alex Thomson

Place of Abode, Dumfries

DATED this Eighth day of August One thousand eight hundred and Sixty six years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Samuel Grierson being a (1) Member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) George Grayson, a pauper from Sunderland workhouse and that the said George Grayson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) George Grayson unbecill, pale, incoherent, and cha[illegible] complains much of giddiness and dea[illegible] the "daftness in his head" from which he has much since his return from India.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) From the statement of the medical officer of Sunderland workhouse he suffers periodically [illegible] maniacal attacks during which he is viol[illegible] and dangerous.

Name and Medical Designation, S. Grierson M.R.C.

Place of Abode, Southern Counties Asylum, Du[illegible]

DATED this 11th day of August One thousand eight hundred and Sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Alexander Thomson being (1) a Doctor of Medicine of the Universities of Glasgow hereby certify, on soul and conscience, that I have this day, at (2) the Southern Counties Asylum in the County of Dumfries, seen and personally examined George Grayson, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Alex Thomson

DATED this Eighth day of August One thousand eight hundred and Sixty six years.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Alexander Hannay Esquire (1) ~~Advocate~~, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Benjamin Ingleman Master of the Sunderland Workhouse Certificates under the hands of Alexander Thomson and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) George Grayson a pedlar a pauper and that the said George Grayson is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Grayson as a Patient into the (6) Public Asylum of Southern Counties and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Grayson which accompanied the said Petition.

DATED this Eleventh day of August One thousand eight hundred and sixty six years. Alexander Hannay

Alex Hannay

To the Superintendent of the (7) Public *Asylum of* Southern Counties

Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.
(6) Public, District, Parochial, *or* Private.
(7) Public, District, Parochial, *or* Private.

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George Grayson

8th August

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of James Austen, Inspector of Poor for the Parish of Closeburn humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Irving your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Irving to the Southern Counties Asylum, Dumfries, and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

James Austen Inspector of Poor

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Twelfth (4) day of August One thousand eight hundred and Sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Irving
2. Sex and Age,	Female. age 34 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Shaws - Parish of Closeburn
7. Place where Found and Examined,	Carnple - Closeburn
8. Length of time Insane,	Three days
9. Whether first attack,	No
10. Age (if known) on first Attack,	20 years
11. When and where previously under Examination and Treatment,	Nether Mosshein
12. Duration of existing Attack,	Three days
13. Supposed Cause,	Fever
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Closeburn
18. Date of becoming Chargeable,	August 12th 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Her sister Mrs Watts resides at Carnple - and her brother John Irving resides at Carnple both in Closeburn
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twelfth day of August One thousand eight hundred and Sixty six

(*To be signed by Party applying*) James Austen Inspector of Poor for the parish of Closeburn P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Thomas Boyle Grierson being a (1) Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Cample in parish of Closeburn in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Agnes Irving, a pauper and that the said Agnes Irving is a (5) Insane person and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
altogether without reason; in a state of excited mania

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her sister states that she refuses

Name and Medical Designation, W. Grierson Licentiate of the Royal College of Surgeons Edinburgh

Place of Abode, Thornhill

DATED this twelfth day of August One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Samuel Grierson being a (1) member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the southern Counties Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Agnes Irving from Cample the parish of Closeburn, a pauper and that the said Agnes Irving is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) great excitement, loss of reason and a following of the most extravagant impulses blindly. She is incoherant raving, and restless.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
The night nurse reports her as entirely without sleep during the night — as constantly talking; as frequently in and out of bed, and destructive of her clothing

Name and Medical Designation, S. Grierson M.D.

Place of Abode, Southern Counties Asylum

DATED this thirteenth day of August One thousand eight hundred and sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Thomas Boyle Grierson being (1) Licentiate of the Royal College of Surgeons Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Canonple in the County of Dumfries, seen and personally examined Agnes Irving, a pauper, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

T B Grierson Licentiate Royal College of Surgeons, Edinburgh

DATED this twelfth day of August One thousand eight hundred and sixty-six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Alexander Hannay Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Austin Inspector of Poor Closeburn Certificates under the hands of Thomas Boyle Grierson and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Irving Canonple Closeburn a pauper and that the said Agnes Irving is a (5) lunatic person and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Irving as a Patient into the (6) public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Irving which accompanied the said Petition.

DATED this fifteenth day of August One thousand eight hundred and sixty six

Alex Hannay

To the Superintendent of the (7) public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Agnes Irving
12th August
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Stewart Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (1) Shire of Dumfries *and his Substitutes,*

The Petition of James Austin Inspector of poor for the parish of Closeburn humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Irving your Petitioner's (2) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Irving to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

James Austin Inspector of poor

(2) State degree of relationship or other parity in which Petitioner stands to Lunatic.

(3) The date of the petition must be within fourteen clear days bearing the dates of the Medical Certificates.

Dated this twelfth (3) day of August One thousand eight hundred and Sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Irving Campbell
2. Sex and Age,	Female
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Servant
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Thanes of Closeburn
7. Place where Found and Examined,	Campbell
8. Length of time Insane,	Three days
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	Three days
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Closeburn
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Henrietta Mrs Watt nearest at Campbell Irving and a brother John Irving nearest at Campbell Closeburn
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Both in Closeburn

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this twelfth day of August One thousand eight hundred and Sixty six

(*To be signed by Party applying*) James Austin Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Thomas Boyle Grierson being a (1) Lic R C of Surgeons of Edin and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Camp in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) Agnes Irving, a pauper and that the said Agnes Irving is a (5) insane person and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Altogether without reason in a state of excited manner

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, T. Grierson Lic R C S

Place of Abode, Thornhill

DATED this 1st day of August One thousand eight hundred and Sixty Six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Samuel Grierson being a (1) member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Agnes Irving, a pauper, from Cample in the parish of Closeburn and that the said Agnes Irving is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) great excitement loss of reason and a following of the most extravagant impulses blindly. ~~or without~~ She incoherent, raving, and restless.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

The night-nurse reports her as entirely sleep during the night, as constantly talking, frequently in and out of bed, and as destroying clothing &c &c

Name and Medical Designation, S. Grierson M.R.C.S.

Place of Abode, Southern Counties Asylum,

DATED this thirteenth day of August One thousand eight hundred and Sixty six years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned; Thomas Boyle Grierson
being (1) L.R.C.S. of Surgeons Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Canobie
in the County of Dumfries, seen and personally examined
Agnes Irving, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

T B Grierson L.R.C.S.Ed

Dated this 12th day of August One thousand eight hundred and Sixty Six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, (1)
of the (2)
having had produced to me, with a Petition at the instance of (3)

Certificates under the hands of
and , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
and that the said
is a (5)

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said as a Patient into the (6) Asylum of and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said which accompanied the said Petition.

Dated this day of One thousand eight hundred and

To the Superintendent of the (7)
Asylum of

---

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

A 1/230

Agnes Irving

12th August

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries and his Substitutes,—

The Petition of Ja. Cunningham of 50 Queen St Edinr

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander William Cunningham lately in New Zealand your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander William Cunningham to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Ja. Cunningham

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 16th (4) day of August One thousand eight hundred and Sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Alexander William Cunningham
2. Sex and Age,	Male 25 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Gentleman Settler in New Zealand
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	New Zealand
7. Place where Found and Examined,	Crichton Institution Dumfries
8. Length of time Insane,	18 months
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	24 years
11. When and where previously under Examination and Treatment,	At Crichton Institution
12. Duration of existing Attack,	18 months
13. Supposed Cause,	Intemperance
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No Has been so
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Ja. Cunningham 50 Queen St Edinr
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 16 day of August One thousand eight hundred and 66

(*To be signed by Party applying*) Ja. Cunningham

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, John Dickson being a (1) Member of the Royal College of S[illegible] and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Alexander William Cunningham - Settler - New Zealand and that the said Alexander William Cunningham is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He informs me that for a considerable time he has lost all control over his emotions. He is at present greatly excitable. Has resolved to put himself as a voluntary patient in the asylum

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His friend John Sinclair informs me that on landing at Invercargill from New Zealand he had been noisy and excited, and was apprehended by the police and brought to the asylum.

Name and Medical Designation, John Dickson

Place of Abode, Buccleuch Street D[illegible]

DATED this 15th day of August One thousand eight hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Alexander Boothwick M.D. being a (1) Graduate of the University of Edinb[illegible] and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Institution, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Alexander William Cunning[illegible] Settler New Zealand and that the said Alexander William Cunningham is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) States that he is unable to control himself with regard to stimulants and that he becomes violent and dangerous when under their influence

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) That he was previously an inmate of the Crichton Institution and that for the last [illegible] he has been indulging to excess in spirituous liquors

Name and Medical Designation, Alex Boothwick M.D.

Place of Abode, Dumfries

DATED this 15th day of August One thousand eight hundred and sixty six years

Certified Copies of the above Certificates were given by Dr Boothwick

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson being (1) a Member of the Royal College of Physicians Edinb hereby certify, on soul and conscience, that I have this day, at (2) Crichton Institution in the County of Dumfries, seen and personally examined William Alexander Cunningham, Kennetsland, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this 15 day of August One thousand eight hundred and sixty six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Sinclair Sutter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Cunningham of 50 Queen St Edinburgh Certificates under the hands of John Dickson and Alexander Bothwick, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexander William Cunningham lately in his person and that the said Alexander William Cunningham is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander William Cunningham as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander William Cunningham which accompanied the said Petition.

DATED this Sixteenth day of August One thousand eight hundred and sixty six years

J Sinclair Sutter

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1044
Alex. Wm. Cunningham
15/8/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*—

The Petition of John Dinwoodie, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Matthew Paterson, Dumfries Infirmary your Petitioner's (3) Pauper.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Matthew Paterson to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

John Dinwoodie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Thirteenth (4) day of August One thousand eight hundred and Sixtysix

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Matthew Paterson
2. Sex and Age,	Male — 47 years
3. Married, Single, or Widowed,	Not Known
4. Condition of Life, and previous Occupation (if any),	Baker —
5. Religious Persuasion, so far as known,	Protestant —
6. Previous Place of Abode,	Gatehouse of Fleet
7. Place where Found and Examined,	Dumfries Infirmary
8. Length of time Insane,	Not Known —
9. Whether first Attack,	do — do
10. Age (if known) on first Attack,	do — do —
11. When and where previously under Examination and Treatment,	Gatehouse of Fleet
12. Duration of existing Attack,	About twot days —
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No —
15. Whether Suicidal,	No —
16. Whether Dangerous to others,	Yes —
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries, meantime
18. Date of becoming Chargeable,	13 Augt 1866
19. Christian Name, and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Not known

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Thirteenth day of August One thousand eight hundred and Sixtysix

(*To be signed by Party applying*) John Dinwoodie, Inspector

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Myrtle Hall Faculty of Physicians & Surgeons
being a (1) Graduate of the University of Glasgow and College of Physicians & Surgeons Glasgow and
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Infirmary,
Dumfries, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Mathew Paterson Pauper, and that
the said Mathew Paterson is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks nonsense
does not recognise
Drs. that he knows from last interview for
whereas he was not helpless then for the last
2 days talks but how to answer the questions

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The nurse states that he wanders
very much and becomes violent and attempts
to

Name and Medical Designation, Marshall M.D.

Place of Abode, Barnhyth Street Dumfries

DATED this 13th day of August One thousand eight
hundred and sixty six years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Brown Doctor of Medicine
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Royal Infirmary
Dumfries, in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Mathew Paterson Pauper, and that
the said Mathew Paterson is a (5) Person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Speaks incoherently
at times does not understand the
simplest question but blows, refuses
to take off his clothes &c examined &c

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Dr Smith tells me that he urged
Alison the patients assistant to shave
some of them, but when they began to be violent

Name and Medical Designation, P. Brown M.D.

Place of Abode, Buccleuch St Dumfries

DATED this 16th day of August One thousand eight
hundred and 66

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, being (1) a Physician hereby certify, on soul and conscience, that I have this day, at (2) 14 February in the County of Dumfries, seen and personally examined Matthew Paterson, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

William Marshall M.D. & C.M.

DATED this 13th day of August One thousand eight hundred and sixty six years.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Andrew Barrie Esquire (3) Sheriff Substitute of the (4) County of Dumfries having had produced to me, with a Petition at the instance of (5) John Grierson Inspector of Poor for the parish of Dumfries Certificates under the hands of William Marshall and Patrick Murray, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Matthew Paterson Dumfries Infirmary a pauper and that the said Matthew Paterson is a (7) Lunatic and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Matthew Paterson as a Patient into the (8) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Matthew Paterson which accompanied the said Petition.

DATED this Fourteenth day of August One thousand eight hundred and sixty six

A Barrie

To the Superintendent of the (9) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Mathew Peterson
August
1766

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Ralph Hodgson Relieving Officer Chester le Street Union, Durham humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Burnett, wife of Thomas Burnett, Shoemaker Birtley Durham

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Employer is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Burnett to the Southern Counties Asylum and to sanction her admission into the said Asylum.

Chester le Street

Ralph Hodgson Relieving Officer

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 22nd (4) day of August One thousand eight hundred and Fifty Six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Elizabeth Burnett
2. Sex and Age,	Female - age 53 years
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	wife of shoemaker
5. Religious Persuasion, so far as known,	Wesleyan Methodist
6. Previous Place of Abode,	Birtley, Durham
7. Place where Found and Examined,	do do
8. Length of time Insane,	
9. Whether first attack,	second attack
10. Age (if known) on first Attack,	33 years of age
11. When and where previously under Examination and Treatment,	At Durham Lodge, Durham
12. Duration of existing Attack,	about two weeks
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	violent
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Chester-le-Street Union, Durham
18. Date of becoming Chargeable,	21st August 1856
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Thomas Burnett Grandworth her husband. Sister insane and under treatment for same time
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 22nd day of August One thousand eight hundred and Fifty Six

(*To be signed by Party applying*) Ralph Hodgson. Relieving Officer

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, John Dickson MD E.
being a (1) Member of the Royal College of Physicians
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern Asylum, Dumfries in the County
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Elizabeth Burnett, Shoe Wife, Bartley Durham, a pauper and
the said Elizabeth Burnett is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is at
excited and incoherent - talking incessantly, cf
on religious matters, and giving utterance to a
of various kinds, connected with religion -
She believes herself to be very wealthy, and connected with

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her son informs me that previous to the
present state of excitement she has been
a year and a half in a state of depressed
taciturn, refusing food at times and often contemplating
suicide -

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dumfries

DATED this 22nd day of August One thousand eight
hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Samuel Grierson
being a (1) Member of the Royal College of Surgeons of England
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Elizabeth Burnett, wife of Burnett, great Newworth, and a pauper and
the said Elizabeth Burnett is a (5) person of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) great excitement
constant & incoherent vociferation, and a complete jumble of
ideas - She calls herself God, Lucen, Intercessor, Saviour,
judge, pardon, plead &c with singular earnestness & notes
thro each fancied character.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her son mentioned that Mrs Burnett had suffered
20 years ago from a similar attack and had been
monthly under treatment in an asylum at that time, and
tho greatly bettered thereby she had never been considered quite well

Name and Medical Designation, S. Grierson M.R.C.S.

Place of Abode, Southern Counties Asylum Dumfries

DATED this 22d day of August One thousand eight
hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned John Dickson MD being (1) a Member of the Royal College of Physicians Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) the Southern Counties Asylum in the County of Dumfries, seen and personally examined Elizabeth Burnett, shoemaker wife, Durham, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this 22 day of August One thousand eight hundred and sixty six,

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Gibson Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Ralph Hodgson Relieving officer, Chester le Street Union Durham — Certificates under the hands of John Dickson and Samuel Grierson —, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Burnett wife of Thomas Burnett Shoemaker Durham and that the said Elizabeth Burnett — is a (5) Lunatic and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Burnett — as a Patient into the (6) Public Asylum of Southern Counties Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Burnett — which accompanied the said Petition.

DATED this Twenty third day of August One thousand eight hundred and Sixty six

John G Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Elizabeth Burnett
22 August
1876

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of Janet Johnston Gatehouse on Fleet, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Johnston gentleman your Petitioner's (3) Husband is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Johnston to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

X Janet Johnstone X

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 29th (4) day of August One thousand eight hundred and sixty-six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	William Johnston
2. Sex and Age,	Male
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Gentleman living on funds proper;
5. Religious Persuasion, so far as known,	In Church of Scotland
6. Previous Place of Abode,	Gatehouse
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	3 months
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Crichton Royal Institution Dumfries
12. Duration of existing Attack,	3 months
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	If a fraud so
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Janet Johnston Wife residing at Gatehouse on Fleet
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 29th day of August One thousand eight hundred and sixty-six.

(*To be signed by Party applying*) Janet Johnstone X

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Scott being a (1) Graduate of the University of Ed and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Crich Institution Dumfries in the County o Dumfries separately from any other Medical Practitioner visited and personally examined (4) William Johnstone of no occupation and residing at Gatehouse and tha the said William Johnstone is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is in an extreme state of depression and melancholic. he says he is an to be placed in the Asylum to be taken

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Dr Stewart says he has be formerly a patient in the As

Name and Medical Designation, William Scott M

Place of Abode, Dumfries

DATED this 27th day of August One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson MD being a (1) Graduate of the Edinburgh Univer and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution Dumfries. in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) William Johnston. 9th Gatehouse and that the said William Johnston is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Found in a state of extreme depression. States th he has placed himself under restr voluntarily.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Dr Stewart states that he was very on arriving at the Institution. He has been frequently under restraint at the Cr Asylum, and in the same condition

Name and Medical Designation, John Dickson

Place of Abode, Castle Street. Dum

DATED this 27th day of August One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Scott being (1) a Graduate of the University of Edinburgh & Ex Circleton Institution hereby certify, on soul and conscience, that I have this day, at (2) in the County of Dumfries, seen and personally examined William Johnstone, and that the said William Johnstone person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

William Scott MD Edin

DATED this 24th day of August One thousand eight hundred and Sixty four

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Alexander Hannay (3) Sheriff Substitute of the (4) County of Dumfries having had produced to me with a Petition at the instance of (5) Janet Johnstone Gatekeeper of Sleet Certificates under the hands of William Scott and [illegible], being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) William Johnstone Gatekeeper of Sleet and that the said William Johnstone is a (7) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Johnstone as a Patient into the (8) Public Asylum of Crichton Royal Institution and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Johnstone which accompanied the said Petition.

DATED this Twenty ninth day of August One thousand eight hundred and sixty four

Alex Hannay

To the Superintendent of the (9) Public Asylum of Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

10115

William Johnston

27/8/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries and his Substitutes,—

The Petition of Sophia Hay 30 Regent Terrace Edin.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Hay lately residing in

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Sophia Hay's ~~wife~~ husband is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Hay to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

Sophia Hay.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 1st (4) day of Sept. One thousand eight hundred and sixty five.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Hay
2. Sex and Age,	Male
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Surgeon
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	New Zealand & Regent Terrace Edin.
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	2 months
9. Whether first attack,	No
10. Age (if known) on first Attack,	17 Years
11. When and where previously under Examination and Treatment,	in Crichton Royal Institution frequently
12. Duration of existing Attack,	2 months
13. Supposed Cause,	Intemperance
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Sophia Hay wife 30 Regent Terrace Edinburgh
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 1st day of Sept. One thousand eight hundred and 65.

(*To be signed by Party applying*) Sophia Hay.

P.T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Scott being a (1) Graduate of the University of Edinb[illegible] and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Institution Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) John Hay Regent Terrace Edinburgh, Surgeon, lately returned from New Zealand and the said John Hay is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is furious and violent, breaking windows, kicking at the doors and threatening the attendants; states that he has been drinking for a long period ~~[illegible]~~ all questions by saying Jerusalem Jerusalem

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Informed by Daniel Brown who accompanied him from Edinburgh. That he attempted to get out of the carriage when the train was in Mo[illegible] Dr Stewart says he has been four times in the [illegible]

Name and Medical Designation, William Scott

Place of Abode, Dumfries

DATED this 31st day of August One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) John Hay - Regent Terrace Edinburgh - Surgeon, lately returned from New Zealand and the said John Hay is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is at present incoherent and confused - apparently bordering upon delirium tremens.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Since his admission into the Asylum Dr Stewart informs me that he has been very violent, - breaking windows, and threatening violence to all around him. It is the fourth time that seclusion has been rendered [illegible] by his continued intoxication and the violence accompanying it.

Name and Medical Designation, John Dickson M.D.

Place of Abode, Castle Street Dumfries

DATED this 31st day of August One thousand eight hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Scott, being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) the Crichton Institution in the County of Dumfries, seen and personally examined John Hay, and that the said John Hay person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

William Scott MD

DATED this 31st day of August One thousand eight hundred and sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Sophia Hay 30 Regent Terrace Edinburgh Certificates under the hands of William Scott and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) John Hay Surgeon, Regent Terrace, Edinburgh and that the said John Hay is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Hay as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Hay which accompanied the said Petition.

DATED this Fifth day of September One thousand eight hundred and Sixty six

A D Harvey

To the Superintendent of the (7) Public Asylum of Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

John Hay

1866

1046
John Hay
31/8/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries *and his Substitutes,*

The Petition of D. Clapperton, Insp: of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Blaylock, Pauper your Petitioner's (3) Charge is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Blaylock to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

D. Clapperton. Insp: of Poor.

Dated this Thirtieth (4) day of August One thousand eight hundred and Sixty Six.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mary Blaylock.
2. Sex and Age,	Female. 51 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Household Servant.
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	For some time a Servant in London.
7. Place where Found and Examined,	High Street. Annan.
8. Length of time Insane,	About a year.
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	about a year
13. Supposed Cause,	cause not known.
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Annan.
18. Date of becoming Chargeable,	August 28th 1866.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Janet Blaylock High St. Annan. Sister of the above Mary Blaylock. None.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Thirtieth day of August One thousand eight hundred and Sixty Six Years.

(To be signed by Party applying) D. Clapperton. Insp: of Poor Annan P.P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Wilkinson Ewart being a (1) Licentiate of the Royal College of Surgeons in Edinburgh and Graduate and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) High Street in the County of Annan separately from any other Medical Practitioner, visited and personally examined (4) Mary Blaylock, High Street and that the said a pauper Mary Blaylock is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her general appearance Effective Manners, rude and incoherent talk &c.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Told by sister and neighbours that she has threatened violence, and her appearance sister says a child two or three times—

Name and Medical Designation, Wilkinson Ewart Surgeon.

Place of Abode, Eskmary Street, Annan

DATED this twenty ninth day of August One thousand eight hundred and fifty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Little being a (1) Fellow of Physicians & Licentiate of the Royal College of Surgeons and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) High Street in the County of Annan separately from any other Medical Practitioner, visited and personally examined (4) Mary Blaylock a pauper and that the said Mary Blaylock is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Violent & excited Manners. Incoherent talking & her appearance generally.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Told by her sister that she threatened to poison her & frequently strikes her. & also by the neighbours that she is prone to violence

Name and Medical Designation, James Little Med Surg

Place of Abode, Bridge Place Annan

DATED this twenty fourth day of August One thousand eight hundred and fifty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John P Potter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Duncan Klapperton Inspector of Poor, Annan,
Certificates under the hands of William Ewart
and James Little , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Blaylock, Annan, a Pauper and that the said
Mary Blaylock is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Blaylock as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Blaylock which accompanied the said Petition.

DATED this Thirtieth day of August One thousand eight hundred and Sixty Six

John P Potter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, *or* an insane person, *or* an idiot, or a person of unsound mind.
(6) Public, District, Parochial, *or* Private.
(7) Public, District, Parochial, or Private.

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Mary Blaylock
1 September

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries, *and his Substitutes,—*

The Petition of John McWilliam, Inspector of Poor for the Parish of Colmonell Ayrshire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Ritchie, Clergyman in Connection with the Body known as the Original Secession your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander Ritchie to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John McWilliam

DATED this First (4) day of September One thousand eight hundred and Sixtysix.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Alexander Ritchie
2. Sex and Age,	Male - 29 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Minister of the Gospel of the Original Secession Church
5. Religious Persuasion, so far as known,	Settled in a Congregation for nearly 3 years
6. Previous Place of Abode,	at Dromore in Tyrone near Coleraine.
7. Place where Found and Examined,	At his own house Latterly at Colmonell.
8. Length of time Insane,	About three Months.
9. Whether first Attack,	Had a slight attack in Colmonell about 4 years ago.
10. Age (if known) on first Attack,	25 years at first attack.
11. When and where previously under Examination and Treatment,	4 years ago in Colmonell under Dr Wilson.
12. Duration of existing Attack,	About 3 months
13. Supposed Cause,	Overworking of the brain.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes. he has Constantly to be watched.
16. Whether Dangerous to others,	Never as yet dangerous to others.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Colmonell Parish County of Ayr.
18. Date of becoming Chargeable,	1st September 1866.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Revd Ebenezer Ritchie in Colmonell is his father, and no Member of the family except Alexander has been insane.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this First day of September One thousand eight hundred and Sixtysix.

(*To be signed by Party applying*) John McWilliam Inspr.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, being a Licentiate of the Faculty of
being a (1)
and being in actual practice as a (2) Surgeon or general practi
hereby certify, on soul and conscience, that I have this day, at (3) the Original
in the County o
separately from any other Medical Practitioner
visited and personally examined (4) the Rev Alexander Ritchie Pau
and tha
the said Alexander Ritchie is a (5) Person of
unsound Mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He persists in mea
that his Wife is dead that she has come to he
and by unfair means that his fame and profi
for his own destruction that he will be dead b
Executioner & then Kellidge

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
He has often the fittest of leaping over the Rails
into the River to drown himself has made seve
Attempts to run away and to leap out of Windows

Name and Medical Designation, William Wilson
Surgeon

Place of Abode, Cockenzie by Edinburgh

Dated this thirty first day of August One thousand eigh
hundred and sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Samuel Frierson
being a (1) member of the Royal College of Surgeons
of England
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Southern
Aughton, Dumfries in the County o
Dumfries
separately from any other Medical Practitioner
visited and personally examined (4) Alexander Ritchie, Clergy
a pauper from Colmonell Ayrshire and tha
the said Alexander Ritchie is a (5) Person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is melanc
dull, full of perpetual forebodings, slow and incoherent
manner & action and his expression weak and vacil
laboring under various delusions among others of his
sanity, chastity &c &c

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mr & William Ellis me that his efforts to effec
self destruction have been various and persistant

Name and Medical Designation, S. Frierson M.R.C.S.E.
Southern counties Aughton D.

Place of Abode,

Dated this first day of September One thousand eigh
hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1) S Surgeon
hereby certify, on soul and conscience, that I have this day, at (2) Original Secession Manse
in the County of Ayr, seen and personally examined
The Revd Alexander Ritchie Pauper, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

William Wilson. Surgeon.

DATED this Thirty first day of August One thousand eight hundred and Sixty Six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, (1)
of the (2)
having had produced to me, with a Petition at the instance of (3)

Certificates under the hands of
and , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) and that the said
is a (5)

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said as a Patient into the (6) Asylum of and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said which accompanied the said Petition.

DATED this day of One thousand eight hundred and

To the Superintendent of the (7)
Asylum of

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.]
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Alexander Ritchie
1 September
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of John McWilliam, Inspector of Poor for the parish of Colmonell, Ayrshire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Ritchie, Clergyman your Petitioner's (3) pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander Ritchie to the Montrose Lunatic Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John McWilliam Insp.r

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this ~~first~~ third (4) day of September One thousand eight hundred and sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Alexander Ritchie
2. Sex and Age,	Male - 29 years
3. Married, Single, or Widowed,	Married -
4. Condition of Life, and previous Occupation (if any),	Minister of the Gospel
5. Religious Persuasion, so far as known,	of the Original Secession Church
6. Previous Place of Abode,	Settled in a Congregation for nearly 3 years at
7. Place where Found and Examined,	Dromore Ireland Colonie. at his own house lately at Colmonell
8. Length of time Insane,	about 3 months
9. Whether first Attack,	Had a slight attack at Colmonell, about 4 years ago
10. Age (if known) on first Attack,	25 at first attack
11. When and where previously under Examination and Treatment,	4 years ago at Colmonell, under Dr Wilson
12. Duration of existing Attack,	about 3 months
13. Supposed Cause,	Overworking of the brain
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes - he has constantly to be watched
16. Whether Dangerous to others,	Never as yet dangerous to others
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Colmonell Parish County of Ayr
18. Date of becoming Chargeable,	1st September 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Revd Ebenezer Ritchie in Colmonell is his father. No member of the family except Alexander has been insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this ~~first~~ third day of September One thousand eight hundred and Sixty six

(*To be signed by Party applying*) John McWilliam Insp.r

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson being a (1) graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Co Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) The Rev Alexander Ritchie - p Colmonell - Ayrshire and that the said Alexander Ritchie is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is confuse and incoherent - Apprehensive of danger to himself and to his wife and children - State of profound melancholy.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Dr Wilson, the medical gentleman under whose c has been, in Ayr, states that he has suic tendencies and that he has made several to destroy himself

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dumfr

DATED this 3rd day of September One thousand eight hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Samuel Grierson being a (1) Member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon &c hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Alexander Ritchie, clergyman a pauper from Colmonell, Ayrshire and that the said Alexander Ritchie is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is dull, me cholic, full of fearful foreboding, slow and mather His manner is restless and his expression weak and lo He labours under various delusions having reference to his wife's life, sanity, chastity &c &c

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mr McWilliam tells me that his efforts self destruction have been various & persistent.

Name and Medical Designation, S. Grierson M.R.C.S. Eng.

Place of Abode, Southern Counties Asylum, Dum

DATED this first day of September One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson
being (1) a graduate of the University of Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum
in the County of Dumfries, seen and personally examined
the Rev Alexander Ritchie, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD,

Dated this 3rd day of September One thousand eight
hundred and sixty six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Alexander Hannay Esqre (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John McWilliam
Inspector of Poor of the Parish of Colmonell Ayrshire
Certificates under the hands of John Dickson
and Samuel Grierson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexander Ritchie, Dromore Ireland, a pauper and that the said Alexander Ritchie is a (5) Lunatic and a person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Ritchie as a Patient into the (6) Public Asylum of Southern Counties, Dumfries, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Ritchie which accompanied the said Petition.

Dated this Seventh day of September One thousand eight
hundred and Sixty six

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

Alex Hannay

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Alexander Ritchie
1st September
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form **A**]

20 & 21 *Vict. Cap.* 71 *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries — *and his Substitutes,*—

The Petition of Hugh Brown Currie Inspector of Poor Lochmaben humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Boyes residing in Lochmaben, a pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Boyes ——— to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(Signed) Hugh B. Currie

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Fifth (3) day of September One thousand eight hundred and sixty six years

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jane Boyes
2. Sex and Age,	Female - 18 —
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Servant-girl
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Kirkmahoe
7. Place where Found and Examined,	Lochmaben
8. Length of time Insane,	4 or 5 days.
9. Whether first attack,	Second attack
10. Age (if known) on first Attack,	16 years old
11. When and where previously under Examination and Treatment,	Lochmaben
12. Duration of existing Attack,	5 days.
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lochmaben
18. Date of becoming Chargeable,	5th September / 66
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Jane Boyes - Mother Lochmaben. [The mother was under treatment for a short period in this Asylum in the year 1864] J.G.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signed)* Name, Hugh B. Currie

Dated this Fifth day of September One thousand eight hundred and sixty six years. . .

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Ferguson
being a (1) Doctor of Medicine
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) West Street Lochmaben in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Jane Boyes, Lochmaben Pauper — and that the said Jane Boyes is a (5) insane person and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6). From words & actions said & done by Jane Boyes in my presence

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her unruly conduct requiring to be forcibly detained from going off or doing her self injury in the attempt

(SIGNED) *Name and Medical Designation,* John Ferguson

Place of Abode, Lochmaben

DATED this Fifth day of September One thousand eight hundred and Sixty six —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Grierson
being a (1) Member of the Royal College of Surgeons of England
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Jane Boyes from the parish of Lochmaben, a pauper and that the said Jane Boyes is a (5) person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is very much excited restless and incoherent — calling on Angels and archangels shouting, singing & gesticulating — and an offence to decency

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mr Currie, the Inspector, mentioned that her conduct had been so violent that it had been found necessary to call the Police to aid in restraining her —

(SIGNED) *Name and Medical Designation,* S. Grierson M.R.C.S. Eng.

Place of Abode, Southern Counties Asylum Dumfries

DATED this fifth day of September One thousand eight hundred and ~~Sixty six~~ Sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Jane Boyes is a (1) Lunatic hereby further certify that the Case of the said Jane Boyes is One of Emergency, and I recommend the immediate removal of the said Jane Boyes to an Asylum accordingly.

Name, John Ferguson

Place of Abode, Lochmaben

DATED this 7fifth day of September One thousand eight hundred and Sixty six.

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Alexander Hannay Esqr (2) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Hugh Brown Currie Inspector of Poor Lochmaben Certificates under the hands of John Ferguson and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jane Boyes Lochmaben a Pauper — and that the said Jane Boyes — is an (5) insane person, a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Boyes as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Boyes — which accompanied the said Petition.

(SIGNED) A Hannay

DATED this Sixth day of September One thousand eight hundred and Sixty six

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

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(2) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(3) State whether a County or Stewartry.
(4) Insert Name and Designation.
(5) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

Jane Boyes

5th September

1766

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Thomas Chalmers, Merchant, Annan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Peter Chalmers, farming Backburn Farm, Cummertrees, with his sister Margaret Chalmers your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Peter Chalmers to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

X Thos Chalmers Petitioner

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 10th (4) day of September One thousand eight hundred and Sixty six

---

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Peter Chalmers
2. Sex and Age,	Male - aged 60 or upwards
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Farmer.
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Backburn Farm, Cummertrees
7. Place where Found and Examined,	Backburn Farm.
8. Length of time Insane,	Two or three months
9. Whether first attack,	First so far as Known
10. Age (if known) on first Attack,	60 or upwards
11. When and where previously under Examination and Treatment,	Never in nowhere
12. Duration of existing Attack,	10 days.
13. Supposed Cause,	Religious fears?
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Believed to harbour delusions & Suicidal during last attack but has not attempted to do himself injury.
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Thomas Chalmers, merchant Annan, his brother; and Margaret Chalmers Backburn Farm Cummertries, his Sister No member of the family have ever suffered from acknowledged insanity
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Eighth day of September One thousand eight hundred and Sixty six

(*To be signed by Party applying*) X Thos Chalmers Petitioner

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Agnew B. Bogie, being a (1) Member of the Royal College of Physicians in Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Brookbrae Parish of Cummertrees in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Peter Chalmers, and the said Peter Chalmers is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Delusions distrust, erant & religious Melancholy to easily excited.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Threatens to destroy himself. Made an attempt to drown himself.

Sister & Brother.

Name and Medical Designation, A. B. Bogie, M.D.

Place of Abode, Fields Park, Annan

DATED this Eighth day of September One thousand eight hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson M.D. being a (1) graduate of the Edinburgh University and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Asylum - Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Peter Chalmers, Farm Cummertrees and the said Peter Chalmers is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is extremely depressed & melancholic - Taciturn & irritable

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The night attendant tells me that he is [illegible] and goes about during the night hunting the Devil - Dr Alarson informs me that in reports [illegible] suicidal, and has once attempted to drown himself.

Name and Medical Designation, John Dickson M.D.

Place of Abode, Castle Street Dumfries

DATED this 10th day of September One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Samuel Gibson
being (1) Member of the Royal College of Surgeons of England
hereby certify, on soul and conscience, that I have this day, at the Southern Counties Asylum
in the County of Dumfries, seen and personally examined
+ Peter Chalmers, from Backburn, Cummertrees, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

S. Gibson

DATED this Eighth day of September One thousand eight hundred and sixty-six years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Thomas Chalmers
Merchant Annan
Certificates under the hands of Agnew Black Boyd
and John Dickson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Peter Chalmers, Farmer, Backburn Cummertrees and that the said Peter Chalmers is a (5) Person of unsound mind and a Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Peter Chalmers as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Peter Chalmers which accompanied the said Petition.

DATED this Eleventh day of September One thousand eight hundred and Sixty six

James Gordon

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Peter Chalmers
8th September
1866

Peter Chalmers
8th September
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honorable the (1) Sheriff of the (2) County of Dumfries *and his Substitutes,*—

The Petition of Joseph R. Duncan Gardener in Muse humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Duncan your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Duncan to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

J. R. Duncan

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this tenth (4) day of Septr One thousand eight hundred and sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Thomas Duncan
2. Sex and Age,	Male 46
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Gentleman
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Southerness
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	nearly one week
13. Supposed Cause,	Intemperance
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 11th day of September One thousand eight hundred and sixty six

(*To be signed by Party applying*) J. R. Duncan

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Alexander Borthwick M.D. being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Institution Dumfries in the County separately from any other Medical Practitioner visited and personally examined (4) Thomas Duncan Gentleman lately residing at Southerness and the said Thomas Duncan is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Believes that he has committed various crimes and offences he is pursued by officers and is in constant dread of being apprehended. Fancies he hears the voices of the

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mrs Duncan his sister in law states that he has been dissipating my mugle and that the delusions haunt him night and day.

Name and Medical Designation, Alex Borthwick M.D.

Place of Abode, Dumfries

DATED this 6th day of September One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson M.D. being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Institution Dumfries in the County separately from any other Medical Practitioner visited and personally examined (4) Thomas Duncan Gentleman lately residing at Southerness and the said Thomas Duncan is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6). Believes that he is surrounded by spies, and that the ground beneath him is filled with machinery. He hears voices accusing of various crimes.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Dr Borthwick informs me that he has been dissipating for a considerable time and the above delusions are a consequence.

Name and Medical Designation, John Dickson M.D.

Place of Abode, Castle Street Dumfries

DATED this 8th day of September One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned Alexander Borthwick M.D. being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) the Crichton Institution in the County of Dumfries, seen and personally examined Thomas Duncan, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Alex. Borthwick M. D

DATED this 8th day of September One thousand eight hundred and sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Joseph A Duncan Northorwald Manse Certificates under the hands of Alexander Borthwick M.D. and John Dickson M.D, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Thomas Duncan (Petitioners Brother) and that the said Thomas Duncan is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Duncan as a Patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Duncan which accompanied the said Petition.

P.S.

DATED this Twelfth day of September One thousand eight hundred and sixty six

James Gordon

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1047

Thomas Duncan.

8/9/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(a) Sheriff or Stewart.
(b) Shire or Stewartry.

Unto the Honourable the (a) Sheriff *of the* (b) Shire *of* Dumfries *and his Substitutes,—*

The Petition of Ralph Hodgson, Relieving Officer, of Chesterlestreet Union, Durham humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Catherine Finney, wife of Bartholomew Finney, labourer is your Petitioner's (c) Pauper

(c) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Catherine Finney to the Southern Counties Asylum, Dumfries and to sanction her admission into the said Asylum.

Ralph Hodgson Relieving Officer

(d) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Tenth (d) day of September One thousand eight hundred and Sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Catherine Finney
2. Sex and Age,	Female, 45 years
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Wife of a Labourer
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	Felling
7. Place where Found and Examined,	Pallion's Town, Barmston, Co. Durham
8. Length of time Insane,	About 2 years
9. Whether first attack,	yes
10. Age (if known) on first Attack,	43 years
11. When and where previously under Examination and Treatment,	Nowhere
12. Duration of existing Attack,	About two years
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Chester-le-Street Union
18. Date of becoming Chargeable,	10th Sept. 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Bartholomew Finney, her Husband, Pallion's Town, Barmston - Not known.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Tenth day of September One thousand eight hundred and Sixty six

(*To be signed by Party applying*) Ralph Hodgson Relieving Officer

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, John Jackson being a (1) Member of the Royal College of Surgeons, England & Licentiate of the Royal College of Physicians, Edinbr and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Pallion's Z in the Coun of Durham separately from any other Medical Practiti visited and personally examined (4) Catherine Feeney, Wife of and Feeney and a Pauper the said Catherine Feeney is a (5) person of unsound mind and a proper person to be det under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) I have frequ visited and examined his Case and at each interview I found her violent and incoherently answering questions indiscreetly, which is of the same type frequently the case in maniacal cases which she may have about to happen shortly, from Puerperal

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) called in was her having cut her throat with a Razor I have been informed by her Husband that she has been of a melancholic temperament but not to that a marked increase of late that they have been afraid her mind may give way & that she should even be dangerous

Name and Medical Designation, John Jackson, M.R.C.S. Eng: L.R.C.P. Edin

Place of Abode, Great Mumth & Gateshead

Dated this Tenth day of September One thousand eight hundred and Sixty-six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Samuel Frierson being a (1) Member of the Royal College of Surgeons of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Durham County Asylum Dunsforth in the Coun separately from any other Medical Practiti visited and personally examined (4) Catherine Feeney, wife of Pa Feeney Labourer - a pauper and the said Catherine Feeney is a (5) person of Sound Mind and a proper person to be dete under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is very depres and then spoken to is either silent or answers slowly speech is insane and rocking to & fro. She seems and in dread, and refuses entirely from conversation with her fellow creatures

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mr Hodgson tells me that during the past seven weeks been necessary to have a couple attendants with her night in order to prevent her from doing herself injury throat is the marks of a self inflicted wound

Name and Medical Designation, S. Frierson M.R.C.S. Eng

Place of Abode, Durham County Asylum, Dunsforth

Dated this Eleventh day of September One thousand eight hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Samuel Grierson
being (1) member of the College of Surgeon of England
hereby certify, on soul and conscience, that I have this day, at (2) the Southern Counties Asylum
in the County of Dumfries, seen and personally examined
Catherine Finny wife of Bartholomew Finny, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

S. Grierson

DATED this Eleventh day of September One thousand eight hundred and Sixty six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esquire (3) Sheriff Substitute
of the (4) County of Dumfries
having had produced to me, with a Petition at the instance of (5) Ralph Hodgson
Relieving Officer of Chesterlee Street Union Durham
Certificates under the hands of John Jackson
and Samuel Grierson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6)
Catherine Finny wife of Bartholomew Finny (a pauper) and that the said
Catherine Finney is a (7) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Catherine Finney as a Patient into the (8) Public Asylum of Southern Counties Asylum and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Catherine Finney which accompanied the said Petition.

DATED this Twelfth day of September One thousand eight hundred and sixty six

James Gordon

To the Superintendent of the (9) Public Asylum of Southern Counties Asylum Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Catherine Finney
11th September
1766

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of James Carmont, Teller British Linen Co Bank Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Carmont your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Carmont to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

James Carmont

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this First (4) day of October One thousand eight hundred and sixty six years

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	William Carmont
2. Sex and Age,	Male — 35 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Gardener
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	College Street Maxwelltown
7. Place where Found and Examined,	Same Place
8. Length of time Insane,	Has been more or less affected for 15 years
9. Whether first attack,	No
10. Age (if known) on first Attack,	About 20 years
11. When and where previously under Examination and Treatment,	Has been twice under treatment at the Southern Counties Asylum
12. Duration of existing Attack,	
13. Supposed Cause,	No known.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	The patients Mother resides at College Street above named — No other member of the patients family has ever been insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this First day of October One thousand eight hundred and sixty six years

(*To be signed by Party applying*) James Carmont

P. p.

Catherine Finney
11th September

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James M: M: Bullock being a (1) Graduate of the University of Edinbo and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Colleg in the Cou separately from any other Medical Practit visited and personally examined (4) William Carmont, Gard and the said William Carmont is a (5) person and a proper person to be det under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Excited, flus irritable. When asked why he walks about all with his shirt over his clothes, he first denied it, then adm would give no reason therefor: have been informed of insanity & from his appearance &c, am of opinion that has other attac

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) That he took offence, without cause, at some casual by his mother, ran up stairs, made a great noise, refused his din to go to bed, kept the room with his shirt over his clothes & assaulted his brother M. in the room

Name and Medical Designation, James M: M: Bullock

Place of Abode, 38 Castle Street, Dumfri

Dated this first day of October One thousand hundred and sixty six years. —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Alexander Thomson being a (1) Doctor of Medicine of the University of Edinburgh Licentiate of the Faculty of Physicians & Surgeons Glas and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) 27 Colleg Street - Maxwelltown - Kirkcudbright in the Cou separately from any other Medical Practiti visited and personally examined (4) William Carmont, 27 College ~~Colleg~~ Street - Maxwelltown and the said William Carmont is a (5) person of unsound mind and a proper person to be det under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Told his patient - Mr. M'Bullock that he was called to his room - during last night, could not lie in bed - part of the time kept his night shirt over his clothes - conscious - seems right, & acute & threatens violen if opposed in his wishes —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Told by his brother that he has been twice in an Asylum for attacks of insanity, and that a bad attacks were pre Last night he got into a violent state and walked ab room during the night & that morning he commenced and was on the table, during - so violent that attempted to threatening to jump out of bed - kept attempted to

Name and Medical Designation, Alex Thomson Surgeon M.D.

Place of Abode, 14 Castle Street - Dumfries

Dated this first day of October One thousand hundred and sixty six years —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) James Carmont Teller, British Linen Company's Bank Dumfries
Certificates under the hands of James Murray McCulloch
and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Carmont, Gardener, College Street Maxwelltown and that the said William Carmont is a (5) person of unsound mind

and a proper Person to be detained, and taken care of, DO HEREBY AUTHORIZE you to receive the said William Carmont as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Carmont which accompanied the said Petition.

DATED this First day of October One thousand eight hundred and Sixty six

John P. Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

William Carmont
1st October
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*—

The Petition of Robert Moncrieff Rome, Inspector of Poor Langholm humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Bell Commercial Traveler Langholm is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Bell to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNATURE) R. M. ROME

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twelfth (3) day of September One thousand eight hundred and Sixty Six Years

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	William Bell
2. Sex and Age,	24 Years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Comercial or Scotch Traveler
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Liverpool, previous Newcastle & Langholm
7. Place where Found and Examined,	Langholm
8. Length of time Insane,	Six Months
9. Whether first attack,	First Attack
10. Age (if known) on first Attack,	23½ Years
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Six Months
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Threatens
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Langholm
18. Date of becoming Chargeable,	12 September
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Jeanie Bell, Maidow point New Langholm, his Mother
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNATURE)* Name R. M. ROME Inspector of Poor

DATED this Twelfth day of September One thousand eight hundred and Sixty Six Years

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, William Johnston Carlyle M.D
being a (1) Graduate of the University of Edinburgh
& Licentiate of the Royal College of Physicians Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Townhead
Longholme in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) William Bell Carolina
Cottage and that
the said William Bell is a (5) person of
Unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) From the conversation I
have had with him I consider his intellect to a demonstration
from is considerable excitement and restlessness, manifested
in an unstable state. Conceives himself of higher station as
a nephew of King for a brief hour &c. Declares that the
is not his Mother who in any way endeavours to harm him.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The Revd. James Wilson M'Clure Longholme Manse says
William Bell came to him in a very excited state and
threatening manner & demands Mrs Bell's and James
at Bell's. Her Mother informs me that he has been
ill and in consequence is alarmed for her safety.

(Signed) Name and Medical Designation, W. J. Carlyle M.D & Surg

Place of Abode, Longholme

Dated this 2nd day of September One thousand eight
hundred and Sixty six

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, George William Thomson
being a (1) Licentiate of the Faculty of Physicians and
Surgeons of Glasgow.
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Carolina Cottage
New Town - Longholme in the County of
Dumfries. separately from any other Medical Practitioner,
visited and personally examined (4) William Bell.
and that
the said William Bell is a (5) person of unsound
mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
He says that his mother is not his mother - nor any
relation to him - He showed me a mark upon his
chest and said that this mark proved him to be
Lord Child that he had command in a vessel - he can
he does not require to work, though he has no means of support

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
His mother told me that he is often very excited and
restless and that she is often afraid that he will do
an injury -

(Signed) Name and Medical Designation, W. Thomson M.D
Physician & Surgeon

Place of Abode, Longholme -

Dated this First day of September One thousand eight
hundred and sixty six -

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that is a (1) hereby further certify that the Case of the said is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Mon: crieff Rome Inspector of Poor Langholm Certificates under the hands of William Johnstone Carlyle and George William Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Bell Commercial Traveller Langholm and that the said William Bell is a (5) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Bell as a Patient into the (6) public - Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Bell which accompanied the said Petition.

(SIGNATURE) James Gordon

DATED this fifteenth day of September One thousand eight hundred and sixty six years.

To the Superintendent of the (7) public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

237

William Bell

19th September

1866

At a Meeting of the Parochial Board of Portpatrick held within the Inspectors house the 3d October 1866

Present Revd S Balmer Chairman

John McClew Factor for D H Blair Esqr of Dunskey and John McCrackan

The Inspector laid a letter before the meeting from Dr Gilchrist regarding the case of Mrs McKivott at present in the Crichton Asylum

As it appears from the aforesaid letter that she has now so far recovered that she may with safety be removed the Board instruct the Inspector to have her taken safely to her husband who is an active young man now employed at Railway works in the neighbourhood of Ayr and in receipt of good wages and who has stated to the Board will take charge of her

Mause of Port Patrick
4th Artr 1866

I hereby certify that the above is a correct copy of the Parochial Board's Minute touching the case of Mrs McKivatt

S Balmer Chairman

Wellcome Poet
19th September

Discharge of
Mrs. McKivett.
4/10/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Lanark *and his Substitutes,—*

The Petition of John C. Mackenzie Merchant 18 Seagrott Manchester Son of Patient

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Mackenzie

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Father Douglas Isle of Man formerly residing but 7 Years by Terms Glasgow is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Mackenzie to the Richton Royal Institution, Dumfries and to sanction his admission into the said Asylum.

John C. Mackenzie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Sixth (4) day of October One thousand eight hundred and sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	William Mackenzie
2. Sex and Age,	Male. 61
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Clergyman
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Douglas Isle of man Glasgow
7. Place where Found and Examined,	
8. Length of time Insane,	not known
9. Whether first attack,	No
10. Age (if known) on first Attack,	41
11. When and where previously under Examination and Treatment,	Edinburgh 1846
12. Duration of existing Attack,	Not known
13. Supposed Cause,	over Study
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Cd Mackenzie. Eldest Son — 18 Seagrott. Manchester. — No other member at any time insane.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 6th day of October One thousand eight hundred and 66

(*To be signed by Party applying*) John C. Mackenzie

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James Dobbie
being a (1) Doctor of Medicine
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) 7 Grant
Hillhead in the Coun
Lanark separately from any other Medical Practiti
visited and personally examined (4) Rev William McKenzie and
the said Rev William MacKenzie is a (5) person
of unsound mind — and a proper person to be deta
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Excited app
Religious delusions, Great depressi
Has attempted suicide recently. —

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Has formerly been under care in
an Asylum. — from son

Name and Medical Designation, James Dobbie M.

Place of Abode, 1 Kelvin Terrace Gr

DATED this 6th day of October One thousand
hundred and 66

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, George H. B. Macleod. Doctor
being a (1) & Fellow of the Royal Col. of S
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) 7 Granby
Hill head in the Coun
Lanark separately from any other Medical Practiti
visited and personally examined (4) Revd. William McKenzie and
the said Mr. McKenzie is a (5) person of
unsound mind and a proper person to be deta
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Appearance
General Mental depression, & attempt at
destruction on a recent occasion

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Mental state for a considerable time
been more than once under restraint

Name and Medical Designation, Geo. H. B. Macleod

Place of Abode, 10 Woodside Crescent Gla

DATED this 1st day of Oct — One thousand
hundred and 66

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Mitchell Bell (3) Esquire Sheriff Substitute
of the (4) County of Lanark
having had produced to me, with a Petition at the instance of (5) John and Mackenzie
Merchant 18 George Street Manchester Agent of Patient
Certificates under the hands of James Dobie M.D. Glasgow
and George H. B. Macleod M.D. Glasgow, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) William Mackenzie presently residing at 7 Cranby Terrace Glasgow and that the said William Mackenzie is a (7) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Mackenzie as a Patient into the (8) Public Asylum of Crichton Royal Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Mackenzie which accompanied the said Petition.

DATED this eighth day of October One thousand eight hundred and sixty six

William Mitchell Bell

W.

To the Superintendent of the (9) Public
Asylum of Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1048

William Mackenzie

9/10/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict., Cap.* 71., *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) ~~Shire~~ Shire *of* Dumfries *and his Substitutes,—*

The Petition of Andrew Thomson, Tailor Ladybank Fife humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Thomson Gardener Glenlee, Kelloholm is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Thomson ——— to the Southern Counties Asylum, Dumfries, and to sanction his admission into the said Asylum.

(SIGNED) Andrew Thomson

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this thirteenth (3) day of October One thousand eight hundred and sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Thomson
2. Sex and Age,	Male aged about 22.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Under Gardener
5. Religious Persuasion, so far as known,	United Presbyterian
6. Previous Place of Abode,	Glenlee Park New Galloway,
7. Place where Found and Examined,	Ditto.
8. Length of time Insane,	about four days.
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	——
12. Duration of existing Attack,	Four days,
13. Supposed Cause,	Disappointment in Love,
14. Whether subject to Epilepsy,	Not known to be so
15. Whether Suicidal,	Not attempted, but doubtful.
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Colliepie. County Fife. Not a pauper
18. Date of becoming Chargeable,	— —
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	His nearest known relative is his brother — who lives at Ladybank — co Fife His younger brother is imbecile.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, Andrew Thomson

DATED this 13th day of October One thousand eight hundred and sixty six.

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, Alfred McKinley Millman being a (1) Doctor of Medicine of the University of Aberdeen and a Member of the Royal College of Surg. and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Glenlee, in parish of Kells in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) James Thomson, residing at Glenlee and that the said James Thomson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Have known him for a considerable period, & find him totally changed in habits and deportment - is at times boisterously joyous - times unnecessarily depressed & weeping; without cause bel[illegible] he is suspected of wrong doings and is watched accordingly - &c. &c.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Thinks the last day has arrived - and he has committed an unpardonable offe[illegible]

(SIGNED) *Name and Medical Designation,* Alfred McKinley Millman M.D. M.R.C.S.

Place of Abode, New Galloway

DATED this 13th day of October One thousand eight hundred and sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, William Dewsnap being a (1) Member of the Royal College of Surgeons, Eng. and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Glenlee in parish of Kells in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) James Thomson residing at Glenlee and that the said James Thomson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) - His wild incoherent talk - his delusions, saying last day has come - he is going to be put to death, [illegible] committed some great crime.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The attendants with him state, that at times he [illegible] cries, and is very noisy, and that he is going to [illegible]

(SIGNED) *Name and Medical Designation,* William Dewsnap, M[illegible]

Place of Abode, Theresa Terrace Hammersm[illegible]

DATED this thirteenth day of October One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, ~~having already granted the Medical Certificate, Nos. 1, hereto annexed, to the effect that~~ being a member of the Royal College of Surgeons of England, hereby certify that James Thomson, Gardiner, Glenlee, Kells is a (1) person of unsound mind, and hereby further certify that the Case of the said James Thomson is One of Emergency, and I recommend the immediate removal of the said James Thomson, Gardener to an Asylum accordingly. This I do on soul and conscience.

Name, S. Grierson M.R.C.S. Eng:

Place of Abode, Southern Counties Asylum, Dumfries

DATED this thirteenth day of October One thousand eight hundred and sixty six years

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

Fourteen words deleted
S. Grierson

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Andrew Thomson Ladybank, Fife Certificates under the hands of Alfred McKinley Millman and William Dewsnap, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Thomson, residing at Glenlee and that the said James Thomson is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Thomson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Thomson which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this Fifteenth day of October One thousand eight hundred and Sixty six

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

James Thomson
13th October
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*—

The Petition of John Dinwoodie Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Tomlinson residing in Dumfries your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Tomlinson to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Nineteenth (4) day of October One thousand eight hundred and

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Tomlinson
2. Sex and Age,	Male 45 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Candlemaker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	do
8. Length of time Insane,	Since February
9. Whether first Attack,	yes —
10. Age (if known) on first Attack,	about 45 years
11. When and where previously under Examination and Treatment,	Dumfries
12. Duration of existing Attack,	since February
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	yes —
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	19 Octr 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not known —
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Nineteenth day of October One thousand eight hundred and Sixtysix

(*To be signed by Party applying*) John Dinwoodie Inspector

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Mr Thomas Dyce Ball
being a (1) Fellow one of the Faculty of Phy
and Surgeons Glasgow and Member of the
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Headquarters
Dumfries
in the County of
separately from any other Medical Practitioner
visited and personally examined (4) John Tomlinson Cau
and th
the said John Tomlinson is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is suffering
delusions that he is in fear for his
life that there is a plot against him
by the whole town of Dumfries

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His wife states that lately he has
been very violent and destructive
of property

Name and Medical Designation, Thomas Dyce Ball M.D.

Place of Abode, Dumfries

DATED this 19th day of October One thousand eight
hundred and Sixty six years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, James Gibson M.D
being a (1) Graduate of the Univer
of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) 12 Ayl
Dumfries
in the County
separately from any other Medical Practitioner
visited and personally examined (4) John Tomlinson Cau
Master and Pauper
and th
the said John Tomlinson is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) I am myself
distressed and depressed. Believes
that he is lost and cannot be
saved

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
It matters and does not do
at myself (stated by his attend

Name and Medical Designation, James Gibson M.D

Place of Abode Station House Dumfries

DATED this 22nd day of October One thousand eight
hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Marshall
being (1) Graduate of the Faculty of Physicians and Surgeons Glasgow
hereby certify, on soul and conscience, that I have this day, at (2) Academy Street
in the County of Dumfries, seen and personally examined
John Tomlinson Pauper, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

W Marshall M'D &c

DATED this 19th day of October One thousand eight hundred and Sixty six years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dinwoodie
Inspector of Poor for the parish of Dumfries
Certificates under the hands of William Marshall
and James Gilchrist, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
John Tomlinson residing in Dumfries (a pauper) and that the said
John Tomlinson is a (5) lunatic and a person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Tomlinson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Tomlinson which accompanied the said Petition.

DATED this Twenty second day of October One thousand eight hundred and sixty six

John P Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

John Tomlinson
19th October
1866

20 & 21 *Vict., Cap.* 71. *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Andrew Wales, Inspector of Poor Old Luce humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Stewart, Farm Servant &c Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Stewart to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) And^r Wales Inspector of Poor

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twenty third (3) day of October one thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Stewart
2. Sex and Age,	Male 42
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Farm servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Milleur, Port Patrick
7. Place where Found and Examined,	Drumflower Old Luce
8. Length of time Insane,	twelve months
9. Whether first Attack,	yes
10. Age (if known) on first Attack,	41
11. When and where previously under Examination and Treatment,	No place
12. Duration of existing Attack,	12 months
13. Supposed Cause,	Obscure unless injured by the excessive use of drink 12 months
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	At times Violent to his family
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Old Luce
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Elizabeth Hewit, Wife Drumflower Old Luce None
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	———

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, And^r Wales Inspector of Poor

DATED this twenty third day of October one thousand eight hundred and sixty six

(4)

* To be Signed by the Party applying.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Williamm McCormick
being a (1) General Practitioner
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Drumfl
in the Parish of Old Luce in the Coun
Portpatrick
separately from any other Medical Practiti
visited and personally examined (4) James Stewart, ~~aged~~
Farm Servant. Drumflower Portpatrick and
the said James Stewart is a (5) person of
unsound mind and a proper Person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) that at time
of nerves and moody; at other time
talkative; cannot tele the number of his farm
will leave any little thing he is doing, and go to
in the day time, cannot follow up his discours

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
that at times he threatens violence, farmers p
and is quite changed in every respect from
he used to be. informed by Mr McCormic
Drumflower. Above clear by them
and from through the house keeper

(SIGNED) Name and Medical Designation, Wm McCormick
Surge

Place of Abode, Glenluce

DATED this 22 day of October One thousand
hundred and sixty six years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Samuel Fierson
being a (1) member of the Royal College of Surgeon of
England.
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Southern
Counties Asylum, Dumfries in the Count
Dumfries
separately from any other Medical Practitio
visited and personally examined (4) James Stewart, Farme
& now a pauper and
the said James Stewart is a (5) person of
unsound mind and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Incoherent an
rambling conversation. Hesitation and
endeavours after the securing of some thing
great confusion of ideas and apparent los
memory.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Dr Wales the Superintendent and Andrew Clen
report him as a changed man and from
industrious and kindly, having become
idle and at times violent and offensive

(SIGNED) Name and Medical Designation, Samuel Fierson M.R.C.

Place of Abode Southern Counties Asylum

DATED this Monday third day of October one thousand eig
hundred and Sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that James Stewart is a (1) person of unsound mind hereby further certify that the Case of the said James Stewart is One of Emergency, and I recommend the immediate removal of the said James Stewart to an Asylum accordingly.

Name, S. Grierson M.R.C.S. Eng.

Place of Abode, Southern Counties Asylum Dumfries

DATED this twenty third day of October one thousand eight hundred and sixty-six.

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Lauderdale Maitland Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Andrew Wales Inspector of Poor Old Luce Certificates under the hands of William McCornack and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Stewart a farm servant Drumflower (a pauper) and that the said James Stewart is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Stewart as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Stewart which accompanied the said Petition.

(SIGNED) L Maitland

DATED this Twenty third day of October one thousand eight hundred and sixty six

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

---

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

James Stewart

23rd October

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Durham and his Substitutes—

The Petition of Peter Wright 13 Framlington Place Newcastle on Tyne

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Anne Wright your Petitioner's (3) Wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mrs Anne Wright to the Crichton Royal Institution for Lunatics Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Peter Wright

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 22nd (4) day of October *One thousand eight hundred and sixty six.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mrs Anne Wright
2. Sex and Age,	Female; Forty two years old.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Tradesman's Wife.
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	13 Framlington Place, Newcastle on Tyne.
7. Place where Found and Examined,	do. do. do.
8. Length of time Insane,	Four years.
9. Whether first attack,	Knows not.
10. Age (if known) on first Attack,	About four years ago.
11. When and where previously under Examination and Treatment,	never examined.
12. Duration of existing Attack,	fourteen days.
13. Supposed Cause,	Temper and Jealousy.
14. Whether subject to Epilepsy,	cannot tell.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Elizabeth Charlton, Widow No 1 Strawberry Place Newcastle on Tyne—Patient's Mother. None known to have been Insane.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 22nd day of October One thousand eight hundred and sixty six

(*To be signed by Party applying*) Peter Wright.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Robert Twentyman Lightfoot being a (1) Licentiate of the Royal College of Surgeons and Licentiate of the Apothecaries Company London and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) 13 Framlington Place Newcastle upon Tyne ——— in the County of Newcastle upon Tyne — separately from any other Medical Practitioner visited and personally examined (4) Anne Wright — residing 13 Framlington Place Newcastle upon Tyne — and the said — Anne Wright ——— is a (5) Person of unsound mind ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Charges her husband with being a wholesale poisoner — That he is a habitual drunkard — That he has been in the habit of administering poisons to her — That he has on several occasions attempted to poison her — That he has on several occasions attempted to poison her — That he has on several occasions attempted to poison her

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) a series of Galvanic apparatus which he has in his bedroom where she has been — She also charges him with having an evil influence over her — having attempted the same delusion

Name and Medical Designation, R. T. Lightfoot L.R.

Place of Abode, 37 Northumberland St Newcastle

DATED this twenty second day of October One thousand eight hundred and Sixty six —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Samuel Merryne Frost being a (1) Member of the Royal College of Surgeons of London and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) 13 Framlington Place Newcastle upon Tyne ——— in the County of Newcastle upon Tyne separately from any other Medical Practitioner visited and personally examined (4) Anne Wright residing 13 Framlington Place, Newcastle upon Tyne and the said Anne Wright ——— is a (5) person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Insane hatred of husband charges him with attempts to poisoner her by mixing poison with food states that her daughter and others are in collusion with him to administer Galvanic shocks and noisome Gases, introduced under the door by way of baths of Spirits, and says she is a Medium

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Many years ago after a severe Instrumental Delivery she had an attack of Puerperal Mania, under mycardiac delusion there was of a religious nature; she believed she was a Mother of long duration

Name and Medical Designation, S. M. Frost M.R.C.S.

Place of Abode, 2 Oxford Street Newcastle upon Tyne

DATED this twenty second day of October One thousand eight hundred and Sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James Gilchrist MC being (1) Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal Institution in the County of Dumfries, seen and personally examined Mrs Anne Wright of Newcastle, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Gilchrist MC

DATED this 23d day of October One thousand eight hundred and sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Peter Wright 13 Framlington Place New Castle-on Tyne Certificates under the hands of Robert Twentyman Lightfoot and Samuel Merryne Frost, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Anne Wright, Petitioners wife and that the said Mrs Anne Wright is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Anne Wright as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Anne Wright which accompanied the said Petition.

DATED this Twenty fourth day of October One thousand eight hundred and Sixty six

John P Trotter

To the Superintendent of the (7) Public *Asylum of* Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1050
√ Aund Wright
23/10/66

of the result. — The Meeting having considered these letters, and having likewise taken a legal view of the case, very reluctantly give their consent to the removal of Sarah Crosbie's name from the Poor's Roll of the Parish of Twynholm.

(signed) R. Comrie, Chairman

Extracted by me this 23rd day of October 1866.

J. Watson, Inspr. of Poor.

I hereby certify that the above is a Correct Copy of the Minute of the meeting of the Poor Board referred to

R Comrie Chairman

26 October 1866

Removal of Sarah Crosbie

26/10/66

Copy of Minute of Meeting of Parochi
Board of Twynholm.

At Twynholm Church on Tuesday
Twenty third day of October, in the year Eigh
Hundred and Fifty six.

Convened

A Meeting of the Parochial Boa
Twynholm to consider an Application from
Crosbie's Father who wishes to remove his Dau
from the Southern Counties Asylum and k
her at home.

Present

Robt Comrie Esq. of Lacys, Chairman
William Barry Esq. of Glencroft
H. I. Monke Esq., Factor for H. G. M.
Esq. of Broug
The Revd W. Milligan, Minister of Twy
Mr Gifford, Ingleston

A Letter from Alexander Crosbie
before the Meeting containing an Application
Parochial Board to remove the name of his D
Sarah from the Poor's Roll, as he wished to
her out of the Southern Counties Asylum and
her at home.

There was also laid before the Mee
a letter from Dr. Gilchrist, Superintende
the Asylum, in which he granted leave to
Sarah Crosbie at home, but expressed his d

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,*—

The Petition of Robert C. M'Culloch

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Alexander M'Culloch your Petitioner's (3) brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Alexander M'Culloch to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(3) State degree of relationship or other quality in which Petitioner stands to Lunatic.

Robert C. M'Culloch

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 24th (4) day of October One thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	William Alexander M'Culloch
2. Sex and Age,	Male 21
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Sculptor
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Kirkland Kirkcudbright
7. Place where Found and Examined,	—
8. Length of time Insane,	About three weeks
9. Whether first attack,	yes
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	—
13. Supposed Cause,	Supposed suicide
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	R. C. M'Culloch Esq Kirkland Kirkcudbright & other
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 24th day of October One thousand eight hundred and sixty six

(*To be signed by Party applying*) Robert C. M'Culloch

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Mc. McCulloch M. D.
being a (1) Graduate of the University of Edinb
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Kirkland
Kirkinner
Wigton
in the Cou
separately from any other Medical Practit
visited and personally examined (4) William Alexander McCul
the said William Alexander McCulloch is a (5) Lunatic an
gentleman farmer
and a proper person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Pale, wilder
of countenance, violent struggling, obstinate silen
otherwise insane demeanour

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
attempts to wander away without any appare
violence & excitement, sleeplessness &c.

Name and Medical Designation, James Mc. McCulloch

Place of Abode, 38 Castle Street, Dumfries

Dated this 23 day of October One thousand
hundred and sixty seven years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John C. Douglas. M. D. &c
being a (1) Graduate of the University of Glasgow.
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Kirkland
Kirkinner
Wigtown
in the Coun
separately from any other Medical Practiti
visited and personally examined (4) William Alexander McCulloch
Gentleman Farmer
and
the said William Alexander McCulloch is a (5) Lunatic
and a proper person to be dete
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) At times greatly
excited - very obstinate, talks nonsense - at t
times wont speak - often does not know his w
& other relations.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
John McCulloch states that he is every day
wont put off or on his clothing.

Name and Medical Designation, John C. Douglas M.D. &

Place of Abode, Port William Wigtown

Dated this 24th day of October One thousand e
hundred and Sixty Seven years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James M. McCulloch M. D. &c. being (1) Physician in Dumfries hereby certify, on soul and conscience, that I have this day, at (2) Kirkland, Kirkinner, in the County of Wigton, seen and personally examined William Alexander McCulloch, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

James M. McCulloch

DATED this 23d day of October One thousand eight hundred and sixty six years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert C. McCulloch, Kirkland of Longcastle Kirkinner Certificates under the hands of James Murray McCulloch and John Charles Douglas, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Alexander McCulloch Farmer Kirkland aforesaid and that the said William Alexander McCulloch is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Alexander McCulloch as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Alexander McCulloch which accompanied the said Petition.

DATED this Twenty ninth day of October One thousand eight hundred and Sixty Six

John P. Trotter

To the Superintendent of the (7) Public *Asylum of* Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

In this case the Sheriffs Warrant was delayed until evidence was obtained of Dr Douglas qualification.

J. P. Trotter

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Wm Alex. McCulloch

24/10/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of James Brown of 32 Molesworth Street Dublin humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ann Brown your Petitioner's (3) wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Ann Brown to the Crichton Institution and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

James Brown

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 16th (4) day of October One thousand eight hundred and Sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Ann Brown
2. Sex and Age,	Female age 42
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Daughter of a clergyman
5. Religious Persuasion, so far as known,	Baptist
6. Previous Place of Abode,	Edinburgh
7. Place where Found and Examined,	Dublin
8. Length of time Insane,	about Seven years
9. Whether first attack,	first attack
10. Age (if known) on first Attack,	about thirty five
11. When and where previously under Examination and Treatment,	now under treatment at Bloomfield
12. Duration of existing Attack,	asylum Dublin
13. Supposed Cause,	about Seven years
14. Whether subject to Epilepsy, no	friends going abroad and severe
15. Whether Suicidal, no	abold cant in Labour
16. Whether Dangerous to others, no	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	South Dublin Union
18. Date of becoming Chargeable,	20 years residing in the Parish
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Brown 32 Molesworth Street Dublin Husband
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None of her family known to be Insane

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

James Brown

Dated this 16th day of October One thousand eight hundred and 66

(*To be signed by Party applying*) _____

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Valentine Barker M.D of Edin
being a (1) Physician & Surgeon of R.C.S. Ireland
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Bloomfield
Asylum in the County
City of Dublin, Ireland separately from any other Medical Practitioner
visited and personally examined (4) Mrs Anne Browne, wife of J
James Browne, 32 Molesworth St Dublin and th
the said Anne Browne is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :— Facts

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Persistent
Answers & Refusal to take food, Great suspicion
Irritability and Restlessness, in Conversation
Husband, Children and Friends -

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, } Valentine Barker M.D
Edinburgh Licentiate
Place of Abode, 33 Harcourt St Dublin

DATED this 31st day of October One thousand eight
hundred and Sixty six -

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Charles Philips Cahill M.D.
being a (1) Physician
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Bloomfield
Asylum Ireland in the County o
City of Dublin separately from any other Medical Practitioner
visited and personally examined (4) Mrs Anne Browne wife of
James Browne Esq - 32 Molesworth St Dublin
the said Anne Browne is a (5) Person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Moody persistent melancholy
total change in manner & conduct
Obstinate Silence & Refusal of food &

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, } Charles Philips Cahill M.D
Place of Abode, 7 Merrion Square North

DATED this 16th day of October One thousand eight
hundred and Sixty Six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexander Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) James Brown
of 32 Molesworth Street Dublin
Certificates under the hands of Valentine Duke
and Charles Phillips Croker , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Ann Brown, wife of Petitioner and that the said Mrs Ann Brown is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Ann Brown as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Ann Brown which accompanied the said Petition.

DATED this Eighteenth day of October One thousand eight hundred and Sixty six

John A. Trotter.

To the Superintendent of the (7) Public Asylum of Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1052

✓ Ann Bacon

24/10/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict. Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of Thomas Shaw, Merchant, Sanquhar humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Shaw, my brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Shaw to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Thomas Shaw.

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 27 Oct (3) day of Octob One thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Shaw
2. Sex and Age,	Male 47 Years of age
3. Married, Single, or Widowed,	
4. Condition of Life, and previous Occupation (if any),	Licensed Hawker
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Kirkconnell village
7. Place where Found and Examined,	Sanquhar
8. Length of time Insane,	four months
9. Whether first attack,	first attack
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	about a month seriously
13. Supposed Cause,	want of attention to state of bowels
14. Whether subject to Epilepsy,	depression from being left lately
15. Whether Suicidal,	to live alone
16. Whether Dangerous to others,	— has hinted at when excited. No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Thomas Shaw Brother in Sanquhar — Another brother was insane 19 Years ago, but recovered in a few months and has continued ever since well
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* Thomas Shaw

DATED this 27th day of Oct 1866 One thousand eight hundred and

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Jackson Kennedy being a (1) Member of the Royal College of Physicians Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Sanquhar in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) James Shaw Licensed Hawk Kirkconnell Village and that the said James Shaw is a (5) ~~[illegible]~~ Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
The Patient is at times very melancholic & depressed in [illegible] He imagines he has got no stomach. And is at times very excitable. Refuses food &

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
He does not rest well at night, & says all [illegible] offered him is poisoned.

(SIGNED) *Name and Medical Designation,* William Jackson Kennedy Member of the College of Physicians

Place of Abode, Sanquhar

DATED this 27th day of October One thousand eight hundred and 66

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George I. Hearder being a (1) Doctor of Medicine of the University of St Andrews and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) James Shaw, Licensed from Kirkconnell Village and that the said James Shaw is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) he is confused and suspicious in manner, & is under the influence of many delusions. Assert that food never reaches his stomach, but that it spreads itself, under his skin, over his entire [illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
the Medical officer of the Asylum states that sleeps little, & refuses food occasionally on the [illegible] that it contains poison.

(SIGNED) *Name and Medical Designation,* George I. Hearder

Place of Abode, County Lunatic Asylum,

DATED this 29th day of October One thousand eight hundred and sixty-six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that James Shaw is a (1) person of unsound mind I hereby further certify that the Case of the said James Shaw's case is One of Emergency, and I recommend the immediate removal of the said James Shaw to an Asylum accordingly.

Name, William Jackson Kennedy

Place of Abode, Sanquhar

DATED this 27th day of October One thousand eight hundred and 66

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Thomas Shaw Merchant Sanquhar Certificates under the hands of William Jackson Kennedy and George J Wearder, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Shaw, Licensed Hawker Kirkconnell Village and that the said James Shaw is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Shaw as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Shaw which accompanied the said Petition.

(SIGNED) John P Trotter

DATED this Thirty first day of October One thousand eight hundred and Sixty Six

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

James Shaw
27 October 1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form **A**]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE **SHERIFF** TO GRANT ORDER FOR THE RECEPTION OF A **PATIENT** INTO AN **ASYLUM**.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,*—

The Petition of R. C. McCulloch Kirkland Castle Kirkmaiden humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alex^r McCulloch Petitioner is at present in a state of Mental Derangement and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alex^r McCulloch to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(Signature) Robt C. McCulloch

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 29th (3) day of Oct one thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Alexander McCulloch
2. Sex and Age,	Male 72
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Gentleman Farmer
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Kirkland Kirkmaiden
7. Place where Found and Examined,	C. R. McCulloch Dumfries
8. Length of time Insane,	Two Months
9. Whether First Attack,	Yes
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of Existing Attack,	
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	R. C. McCulloch Kirkland Kirkmaiden Eldest son
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signature)* Name, Robt C. McCulloch

Dated this 28th day of Oct one thousand eight hundred and sixty six years

* To be Signed by the Party applying.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John C. Douglas. M. D. &c
being a (1) Graduate of the University of Glasgow.

and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Kirkland [illegible]
Parish of Kirkinner in the County of
Wigtown separately from any other Medical Practitioner
visited and personally examined (4) Alexander McCulloch, Far[illegible]
residing at Kirkland and tha[illegible]
the said Alexander McCulloch is a (5) Person of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Sleeplessness.
Incessant talking; dread of poison; thinks [illegible]
person has been bribed to poison him; thinks a
from the Doctor pervades the atmosphere, and make[illegible]
come near the house mad.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The Revd. R. J. Craig states that he thinks his el[illegible]
son Robert C. McCulloch is of unsound mind [illegible]
to have him either conveyed to an Asylum or
four men to guard him

(Signed) *Name and Medical Designation,* John C. Douglas M. D. L. R. C.

Place of Abode, Port William.

Dated this Twenty third day of October One thousand eight
hundred and Sixty six years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James M: McCulloch M: D:
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) The Chrichton
near Dumfries in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Alexander McCulloch, Far[illegible]
Kirkland of Kirkinner, Wigtonshire and that
the said Alexander McCulloch is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Excited, talking
being stopped by "Brownies" that his family
all conspiring against him & that the atmosphere
his house makes every one else the same

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Imagined that his food was poisoned; [illegible]
away about £20 amongst boys at Glen[illegible]
that it is his eldest son who is insane &c

(Signed) *Name and Medical Designation,* James M: McCulloch M[illegible]

Place of Abode 38 Castle Street, Dump[illegible]

Dated this 29th day of October one thousand eight
hundred and sixty six years.

CERTIFICATE OF EMERGENCY.

(This certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. 1, hereto annexed, to the effect that Alexander McCulloch of Kirkland. is a (1) Person of unsound mind hereby further certify that the Case of the said Alexander McCulloch is one of Emergency, and I recommend the immediate removal of the said Alexander McCulloch to an Asylum accordingly.

Name, John L. Douglas

Place of Abode, Port Williams

DATED this Twenty-ninth day of October One thousand eight hundred and Sixty-five years.

(1) Lunatic or an insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pearson Trotter Esquire (2) Sheriff Substitute of the (3) County of Dumfries having had produced to me, with a Petition at the instance of (4) R. C. McCulloch Kirkland of Longcastle Kirkcudbright Certificates under the hands of John L. Douglas and James M. McCulloch, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexander McCulloch (petitioners father) and that the said Alexander McCulloch is a (5) person of unsound mind And a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander McCulloch as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander McCulloch which accompanied the said Petition.

(SIGNATURE) John P. Trotter

DATED this Thirtieth day of October one thousand eight hundred and sixty six

To the Superintendent of the (6) Public Asylum of Crichton Royal Institution Dumfries

(2) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(3) State whether a County or Stewartry.
(4) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.

1053
Alex. McCulloch
29/10/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of William Ross Pendleton

Lancaster

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mr Cecil Ross - M. A. Cantab

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Cecil Ross to the Crieghton Royal Institution and to sanction his admission into the the said Asylum.

William Ross

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 31st (4) day of October One thousand eight hundred and sixty six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Cecil Ross
2. Sex and Age,	male aged 29 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Gentleman
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Grassmere in Westmoreland & Pendleton Manchester Lancashire
7. Place where Found and Examined,	Keary and at Carlisle.
8. Length of time Insane,	Acute attack during last week only.
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	None
12. Duration of existing Attack,	a week
13. Supposed Cause,	~~Unknown~~ Partly a fall on the head two months ago.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Unusually so.
16. Whether Dangerous to others,	Has once struck an attendant - not dangerously
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Ross Esq J.P. Father Pendleton Manchester
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 30th day of October One thousand eight hundred and 66

(*To be signed by Party applying*) Wm Ross.

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Rob Elliot being a (1) Doctor of Medicine of Edinr Univy and Mem: Coll: Phys: of London in practice as a Phys at Carlisle ~~and being in actual practice as a~~ (2) hereby certify, on soul and conscience, that I have this day, at (3) ~~Examined~~ Carlisle in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) Mr Cecil Ross, M.A. Cantab of Grasmere, Westmoreland and that the said Cecil Ross is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) his incoherent conversation — his self accusations — his jealousies. I suspect — his terror of being poisoned — yet his determination & repeated to take his life — I have seen him bleeding from self inflicted [illegible]

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

his absurd conversations

Name and Medical Designation, Robert Elliot M.A. & M.C.P.

Place of Abode, Carlisle

DATED this 30th day of October One thousand eight hundred and 66

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Henry Barnes being a (1) Doctor of Medicine of the University of [illegible] and a Member of the Royal College of Surgeons of England and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) ~~[illegible]~~ 32 Portland Place, Carlisle in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) Mr Cecil Ross, a Master of Cambridge, of Grasmere Westmoreland and that the said Cecil Ross is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Accuses himself as guilty of various great crimes which he is to suffer death, either by guns, or other or by poison. Is suspicious, & has in my presence attempted suicide and succeeded in ~~[illegible]~~ [illegible]

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Mr Potter, 32 Portland Place, states that he has [illegible] to shoot her husband as a pickpocket. He attempted get out of the window on Oct 27th & broke three panes cutting his hands in nineteen different places.

Name and Medical Designation, Henry Barnes M.D. M.R.C.S.

Place of Abode, 45 Lowther St, Carlisle

DATED this 30th day of October One thousand eight hundred and Sixty Six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, [illegible] being (1) Graduate of the Universe of [illegible] hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal Institution Dumfries in the County of Dumfries, seen and personally examined Mr Cecil Ross, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

[illegible]

DATED this 31st day of Octr One thousand eight hundred and sixty six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Ross, Pendleton Manchester Certificates under the hands of Robert Elliot and Henry Barnes, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Cecil Ross Master of Arts Cantabr (petitioners son) and that the said Cecil Ross is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Cecil Ross as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Cecil Ross which accompanied the said Petition.

DATED this First day of November One thousand eight hundred and sixty six

John P. Trotter

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

– 1055. –

√ Cecil Ross.

31. Oct. 66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Unto the Honourable the (1) Sheriff *of* ~~the (2)~~ Wigtown & Kirkcudbright *of* ~~Wigtown Shire~~ *and his Substitutes,—*

(1) Sheriff or Steward.
(2) Shire or Stewartry.

The Petition of Colin Christison Inspector of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elisabeth Douglas Pauper is at present in a state of Mental Derangement and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elisabeth Douglas ~~Pauper~~ to the Counties ~~Dumfries~~ Asylum Dumfries and to sanction her admission into the said Asylum.

(Signature) Colin Christison Inspector of Poor

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 29th (3) day of October one thousand eight hundred and Sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Elizabth Douglas
2. Sex and Age,	
3. Married, Single, or Widowed,	Female age 48
4. Condition of Life, and previous Occupation (if any),	House Keeper
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Sorbie
7. Place where Found and Examined,	~~Kirwaughly~~ Kirwaugh
8. Length of time Insane,	2 Months
9. Whether First Attack,	First
10. Age (if known) on First Attack,	
11. When and where previously under Examination and Treatment,	not Known
12. Duration of Existing Attack,	not Known
13. Supposed Cause,	
14. Whether subject to Epilepsy,	Not that I Know of
15. Whether Suicidal,	
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkinner
18. Date of becoming Chargeable,	about 25th October 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	not Known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signature)* *Name,* Colin Christison Inspector of Poor

Dated this 25th day of October one thousand eight hundred and Sixty six

* To be Signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Snowdon being a (1) M.D. of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Kirwaugh Wigtown - Wigtown in the County of separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Douglas Pauper and that the said Elizabeth Douglas Pauper is a (5) Person of Unsound Mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts*

1. Facts indicating Insanity observed by myself: (6)

From her incoherent conversation on matter pertaining to every day life.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Her Master informs one that she breaks everything in the house was very obstreperous

(SIGNED) *Name and Medical Designation,* Saml Snowdon M.D.

Place of Abode, Wigtown

DATED this 26th day of October One thousand eight hundred and Sixty Six years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robert D Rose being a (1) Licentiate of the Royal College of Surg of Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Kirwaugh the parish of Kirkinner and in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Douglas ~~maid Sen~~ at Kirwaugh Farm House and that the said Elizabeth Douglas Pauper is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) very restless & excited - erratic in conversation & easily made irritable & noisy seems incapable of talking rationally.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Her sister Jessie Douglas informs me, that Elizabeth Douglas is violent & noisy & unmanageable & threatens to strike - she has said also to her sister that she would like to cut her throat

(SIGNED) *Name and Medical Designation,* Robert D Rose LM

Place of Abode Wigtown

DATED this 27th day of Octr one thousand eight hundred and Sixty Six years.

CERTIFICATE OF EMERGENCY.

(This certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is one of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of One thousand eight hundred and

(1) Lunatic *or* an insane person, *or* an idiot, *or* a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Macduff Rhind Cyrus Advocate Sheriff Substitute (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Colin Christison Inspector of Poor
Certificates under the hands of Samuel Snowdon M.D.
and Robert D. Rose Surgeon —, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Elizabeth Douglas Pauper — and that the said
Elizabeth Douglas is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Douglas — as a Patient into the (6) Southern Counties Asylum of Dumfries — and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Douglas — which accompanied the said Petition.

(SIGNATURE) M. Rhind

DATED this twenty ninth day of October one thousand eight hundred and sixty six

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries —

3

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, *or* an Insane Person, *or* an Idiot, *or* a Person of unsound mind.
(6) Public, District, *or* Private.

140

Elizabeth Douglas

~~Ann Petersen 1866~~

27/11/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,*—

The Petition of Hugh Morton 56 Frederick Street Sunderland humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that your Petitioner's (3) Sister Janet Morton (his Sister) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Morton to the Crichton Institution and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Hugh Morton

Dated this 7th (4) day of November One thousand eight hundred and sixty-six

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Janet Morton
2. Sex and Age,	Female 31
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Farmers daughter
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Sunderland
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	a fortnight
9. Whether first Attack,	first
0. Age (if known) on first Attack,	
1. When and where previously under Examination and Treatment,	
2. Duration of existing Attack,	a fortnight
3. Supposed Cause,	Religious excitement & over reading
4. Whether subject to Epilepsy,	No
5. Whether Suicidal,	No
6. Whether Dangerous to others,	No
7. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
8. Date of becoming Chargeable,	
9. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
0. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 7th day of November One thousand eight hundred and sixty-six

(*To be signed by Party applying*) Hugh Morton

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson being a (1) graduate of the Edinburgh Univer and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) St Mich Dumfries Dumfries in the County o separately from any other Medical Practitioner visited and personally examined (4) Janet Norton - Farmer and tha the said Janet Norton is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is depr and Melancholic - Has refused food on occasion under the belief that it is poiso informs me that she is oppressed with brok of her only salvation and passes restless & disturbed

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Mother informs me that she has in the Conduction above described for upwa a week but that for a fortnight she has observed, & suspicious

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dumf

Dated this 7th day of November One thousand eigh hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Smith being a (1) Graduate of the Edinburgh Univ and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Creighton Institute Dumfries Dumfries in the County o separately from any other Medical Practitioner visited and personally examined (4) Janet Norton Farmer and tha the said Janet Norton is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is dep from depression of Spirit & is melancholic, refused to take food on several occasions, She that it is poisonous, and also from dread passes sl

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her mother states that for upwards o past she has not been in her usual state of & has been in the state described by myself abov

Name and Medical Designation, John Smith

Place of Abode, Dumfries Infirmary

Dated this 13th day of November One thousand eigh hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson MD being (1) a Graduate of the Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) St Michael St in the County of Dumfries, seen and personally examined Janet Morton - Farmers daughter Sunderland, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this 7th day of November One thousand eight hundred and sixty ~~six~~

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (3) Sheriff Substitute of the (3) County of Dumfries having had produced to me, with a Petition at the instance of (3) Hugh Morton 56 Frederick street Sunderland Certificates under the hands of John Dickson and John Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Morton (sister of Petitioner) and that the said Janet Morton is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Morton as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Morton which accompanied the said Petition.

DATED this ~~Eighth~~ day of November One thousand eight hundred and sixty six - one word delete - Fourteenth

J. Wm P. Tolle

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

The Sheriffs warrant was delayed as this case until evidence was obtained of Dr Smith's legal qualification J. Sheriff

1056
v Janet Morton
7/11/66

Certificate of
Registration

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries and his Substitutes,—

Craigcaffell Kirkpatrick Fleming Middleton

The Petition of Robert Cunninghame Cunninghame Graham humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Cunninghame Bontine your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Cunninghame Bontine to the Crichton Royal Institution and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Robert Cunninghame Cunninghame Graham

Dated this (4) 14th day of March One thousand eight hundred and Sixty six

(4) The date of the Petition must be with fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	William Cunninghame Bontine
2. Sex and Age,	Male
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Private Gentleman
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Gartmore. Co: Stirling
7. Place where Found and Examined,	Kirkfield. Dumfries
8. Length of time Insane,	Upwards of 3 months
9. Whether first Attack,	Second Attack
10. Age (if known) on first Attack,	About 40 years
11. When and where previously under Examination and Treatment,	At Twickenham in Autumn of 1864
12. Duration of existing Attack,	See above (answer 8)
13. Supposed Cause,	Improper medical treatment prior to first attack
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	The Honble Mrs. Bontine (Wife) Gartmore House, Stirling – No Member of his family known to have been insane –
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 14th day of March One thousand eight hundred and Sixty six

(To be signed by Party applying) Robert Cunninghame Cunninghame Graham

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, John Dickson
being a (1) Graduate of the University of Edin
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Dumfries
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) William Cunningham Boutt
gentleman - Gardenor - Shirley and that
the said William Cunningham Boutt is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is in a st
of incessant restlessness and excitement - Confu
and suspicious a regard, everything seems on
him - Continually on the watch to escape from his
attendants but with no definite aim Kept secure - Incr

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Has delusions as to his personal identity
- His attendants inform me that the ab
has been his condition for some time, and
he is becoming worse daily - That in his efforts t
escape he is destructive and very dangerous

Name and Medical Designation, John Dickson M.D

Place of Abode, Castle Street Dumfries

DATED this 8th day of November One thousand eight
hundred and sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Patrick Murray
being a (1) Graduate of the University of Edi
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Crichton Ro
Dumfries
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) William Cunningham Bout
gentleman Gardenor Shirley and that
the said William Cunningham Boutt is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
I saw my patient this day at present & gue
by the Keepers & suspicious of any ~~my~~
any attempts to escape from
2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Attendant told me that an unpleas
hit hand was received yesterday
his breaking the ~~prison~~ prison

(7) *State the information, and from whom derived.*

Name and Medical Designation, P Murray M.D

Place of Abode, Crichton Royal Dumfries

DATED this 12th day of November One thousand eight
hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson being (1) a Graduate of the Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) Friesfield in the County of Dumfries, seen and personally examined William Cunninghame Bontine, of Gartmore, Stirling and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

Dated this 8th day of November One thousand eight hundred and Sixty five.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Lequie (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Cunninghame Cunninghame Graham, West Drayton Hall, West Drayton Middlesex Certificates under the hands of John Dickson and Patrick Murray, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Cunninghame Bontine, Gartmore - Stirling and that the said William Cunninghame Bontine is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Cunninghame Bontine as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Cunninghame Bontine which accompanied the said Petition.

Dated this tenth day of November One thousand eight hundred and Sixty five

James Gordon

To the Superintendent of the (7) Public Asylum of Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1057

Mrs. Cunningham Bontine

9/11/66

Pat. 24/6/76

5/10

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of William Hamilton Inspector of Poor in Holywood humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Maxwell a Pauper your Petitioner's (3) Charge is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Maxwell to the Southern Counties Asylum Dumfries and to sanction her admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Wm Hamilton Insp.r

Dated this Seventeenth (4) day of November One thousand eight hundred and Sixty Six years.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Maxwell.
2. Sex and Age,	Female 49 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	House Keeper
5. Religious Persuasion, so far as known,	Free-Church.
6. Previous Place of Abode,	Holywood-Village
7. Place where Found and Examined,	Newington
8. Length of time Insane,	Some time previous about 6 Days
9. Whether first Attack,	First Attack,
10. Age (if known) on first Attack,	49 years.
11. When and where previously under Examination and Treatment,	Newington Some time previous, about 6 Days.
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No attempt upon herself as yet.
15. Whether Suicidal,	Threatning danger.
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Holywood
18. Date of becoming Chargeable,	14th Nov.r 1866.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Joan Maxwell wife of John Craig Newington Holywood and Jean & Jessie Maxwell Sisters
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Seventeenth day of November One thousand eight hundred and Sixty six

(*To be signed by Party applying*) Wm Hamilton Insp.r

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Smith being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Royal Infirmary. Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Agnes Maxwell residing in Holywood, a Pauper and that the said Agnes Maxwell is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her manners are at times very violent and excited, screaming that she will be put through fire and water for some wrong that she has committed and that those around her will share the same if they do not perform some duty which she cannot explain.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) John Craig her brother in law states, that for the last six days she has not been in her usual state of mind, gives at times that her daughter was to be taken from her. During the last three days she has on several occasions threatened violence on her neighbours.

Name and Medical Designation, John Smith M.B. &c.

Place of Abode, Dumfries Infirmary.

DATED this 16th day of November One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Scott being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Agnes Maxwell a Pauper of Holywood, and that the said Agnes Maxwell is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) she is very restless incoherent and refuses to take her food, says she is doomed for breaking Gods rules &c.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Dr Smith House Surgeon Infirmary gives similar information to the [illegible]

Name and Medical Designation, William Scott M.

Place of Abode, D.M.W. Fries

DATED this 17th day of November One thousand eight hundred and Sixty Six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Smith being (1) graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Dumfries Royal Infirmary in the County of Dumfries, seen and personally examined Agnes Maxwell, and that the said ~~Agnes Maxwell~~ person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Smith M.B. & C.M.

DATED this 16th day of November One thousand eight hundred and sixty one

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Ritchie Fowler (1) Esquire Advocate Sheriff substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Hamilton Inspector of Poor Holywood Certificates under the hands of John Smith M.B. and William Scott M.D. &c, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Maxwell residing in Holywood a pauper and that the said Agnes Maxwell is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Maxwell as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Maxwell which accompanied the said Petition.

DATED this nineteenth day of November One thousand eight hundred and sixty one.

John R Fowler

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Agnes Maxwell

16th November

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitute,*

The Petition of John Dinwoodie Inspector of Poor for the Parish of Dumfries

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Hollis residing in Dumfries your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Hollis to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Nineteenth (4) day of November One thousand eight hundred and Sixtysix

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Hollis
2. Sex and Age,	Male. 42 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Sredsman
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	— do —
8. Length of time Insane,	about 3 weeks
9. Whether first Attack,	yes
10. Age (if known) on first Attack,	42 years
11. When and where previously under Examination and Treatment,	Dumfries
12. Duration of existing Attack,	about 3 weeks
13. Supposed Cause,	Cause not known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
Date of becoming Chargeable,	19th November 1866
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not known
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Nineteenth day of November One thousand eight hundred and Sixtysix

(*To be signed by Party applying*) John Dinwoodie Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Marshall, being a (1) Graduate of the Faculty of Physicians and Surgeons Glasgow and College of St Andrews and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Reid's Close Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) James Hollis a pauper and that the said James Hollis is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks incoherently. Has the most extravagant delusions as to great winnings at all the principal race [illegible] in the country &c &c

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His Sister and Neighbours states that he is becoming very violent.

Name and Medical Designation, W Marshall M.D. &c

Place of Abode, Dumfries

DATED this 19th day of Nov One thousand eight hundred and sixty six years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Alexander Thomson, being a (1) Doctor of Medicine of the University of Glasgow and Licentiate of the Faculty of Physicians and Surgeons and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Reid's Close English Street Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) James Hollis, a pauper and that the said James Hollis is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks in the travagant and incoherent manner about horses, and buying horses at fabulous prices, and keeps them in his possession; these statements being delusions. Talks also incoherently about training horses, racing &c.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Told by his sister that he has nothing to do with, and has none in his possession; that he doubts and seeds, but is now unable to carry on business and makes foolish mistakes if he attempts to do so. Is restless.

Name and Medical Designation, Alex. Thomson M.D.

Place of Abode, Castle St Dumfries

DATED this Eighteenth day of November One thousand eight hundred and sixty six years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Archibald Trotter Esquire (1) Advocate Sheriff substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Dinwoodie Inspector of Poor of the Parish of Dumfries Certificates under the hands of William Marshall and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Hollis Seedsman Dumfries a pauper and that the said James Hollis is a (5) Lunatic and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Hollis as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Hollis which accompanied the said Petition.

DATED this nineteenth day of November One thousand eight hundred and sixty six.

Wm D Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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James Hollis

19th November

1766

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of Janet Johnstone, Akeyslack, Dalbeattie humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Johnstone Gentleman your Petitioner's (3) Husband is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Johnstone to the Crichton Royal Institution Dumfries and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

X Janet Johnstone

DATED this Twenty first (4) day of November One thousand eight hundred and Sixty six

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	William Johnstone
Sex and Age,	Male X Forty years
Married, Single, or Widowed,	Married
Condition of Life, and previous Occupation (if any),	Gentleman living on funded property
Religious Persuasion, so far as known,	The Church of Scotland
Previous Place of Abode,	Galetram
Place where Found and Examined,	~~Crichton~~ Home Dumfries
Length of time Insane,	~~a few days~~ Several years
Whether first Attack,	no
Age (if known) on first Attack,	at the age of Seventeen or Eighteen
When and where previously under Examination and Treatment,	Crichton Royal Institution Dumfries
Duration of existing Attack,	A few days
Supposed Cause,	unknown
Whether subject to Epilepsy,	no
Whether Suicidal,	no
Whether Dangerous to others,	no
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Janet Johnstone Wife residing at Akeyslack, Dalbeattie
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this Twenty first day of November One thousand eight hundred and Sixty six

(*To be signed by Party applying*) X Janet Johnstone

Sign here

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, William Smith Kerr being a (1) Doctor of medicine & Licentiate of Roy College of Surgeons, Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) William Johnston Gentleman, Dalbeattie and that the said William Johnstone is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is greatly depressed and anxious.— He says he is rest and cannot think to remain at home. Would much prefer staying in the Asylum.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) He has been frequently a patient in the Crichton.—

Name and Medical Designation, William S Kerr

Place of Abode, Buccleuch St. Dumfries

DATED this 23rd day of November One thousand eight hundred and Sixty Six.—

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, John Dickson being a (1) graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) William Johnston Gentleman - Dalbeattie and that the said William Johnston is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is depressed and anxious. States that he feels rest and indisposed to remain at home or anywhere but in the Asylum.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Has been frequently under treatment for similar attacks in the Crichton Institution

Name and Medical Designation, John Dickson M.D.

Place of Abode, Castle Street Dumfries

DATED this 22 day of November One thousand eight hundred and Sixty Six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, [illegible] being (1) Graduate of Medicine [illegible] hereby certify, on soul and conscience, that I have this day, at (2) Creighton House in the County of Dumfries, seen and personally examined William Johnstone Dalbeattie, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

[illegible]

DATED this 14th day of Nov 2 One thousand eight hundred and [illegible]

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I John Pearson Trotter — (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Janet Johnstone Aberyslack, Dalbeattie Certificates under the hands of William Smith Kerr and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Johnstone (Petitioner's husband) — and that the said William Johnstone — is a (5) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Johnstone — as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Johnstone which accompanied the said Petition.

DATED this twenty fourth day of November One thousand eight hundred and Sixty six

John P Trotter

To the Superintendent of the (7) Public Asylum of Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1058

William Johnstone

19/11/66

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Burgh or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Renfrewshire *and his Substitutes,—*

The Petition of Alex^r Miller Grocer in Paisley humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ann Miller your Petitioners Daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Ann Miller to the Crichton Royal Institution for Lunatics Dumfries and to sanction her admission into the said Asylum.

(SIGNED) Alex^r Miller

The date of the Petition must be within fifteen clear days following the dates of the Medical Certificates.

DATED this twentieth (3) day of November one thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Ann Miller
2. Sex and Age,	Female 26 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Power loom weaver
5. Religious Persuasion, so far as known,	uncertain
6. Previous Place of Abode,	13 Wellmeadow St Paisley
7. Place where Found and Examined,	13 Wellmeadow St Paisley
8. Length of time Insane,	one year
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	25 years
11. When and where previously under Examination and Treatment,	Last in House 13 Wellmeadow St
12. Duration of existing Attack,	one year
13. Supposed Cause,	Religion
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	Doubtfull
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Alex^r Miller 13 Wellmeadow St Paisley Father no
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, Alex^r Miller

DATED this Twentieth day of November one thousand eight hundred and Sixty six

* To be Signed by the Party applying.

[4]

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, James Cochran, Surge
being a (1) Licentiate of the Faculty of Phy
and Surgeons Glasgow
and being in actual practice as a (2) General Practition
hereby certify, on soul and conscience, that I have this day, at (3) 13
Wellmeadow Paisley in the Co
Renfrew
separately from any other Medical Practi
visited and personally examined (4) Ann Millar
the said Ann Millar an
is a (5) Insan
and a proper Person to be de
under Care and Treatment, and that I have formed this opinion upon the foll
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Rolling e
Starey - delusions about Ideas
warring with each other and Ar
tranquility days some kind of properties,
be enbraced

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
She states that she climbed over
high gate and set fire to a Ne
attempt to get into the act

(SIGNED) *Name and Medical Designation,* James Cochra

Place of Abode 21 Wellmeadow Pa

DATED this twentieth day of November One thousand
hundred and Sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Robert Falconer Surg
being a (1) Licentiate of the Royal Colleg
Surgeons Edinburgh
and being in actual practice as a (2) General Practitione
hereby certify, on soul and conscience, that I have this day, at (3) 13
Wellmeadow Paisley in the County
Renfrew
separately from any other Medical Practitio
visited and personally examined (4) Ann Millar
the said Ann Millar and I
is a (5) person
of unsound mind and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
She states that she is and of a sect oppo
to the Christian Church, and that there
or war soon between the two parties
and that her party would win the da
she urged upon the [illegible] by
a [illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
By her father that she
attempted to set fire to Church by cli
over a high gate and setting on flame
materials in the Precentors desk

(SIGNED) *Name and Medical Designation,* Robert Falconer
Surgeon

Place of Abode 83 Causeyside St

DATED this twentieth day of November one thousand eigh
hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of one thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Hugh Cowan Esquire Advocate, Sheriff Substitute of the (2) County of Renfrew having had produced to me, with a Petition at the instance of (3) Alexander Millar, gardener in Paisley Certificates under the hands of James Cochran, Surgeon Paisley and Robert Falconer, Surgeon Paisley, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Ann Millar and that the said Ann Millar is a (5) person of unsound mind and insane and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ann Millar as a Patient into the (6) Public Asylum ~~attached to the Crichton Royal Institution~~ and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ann Millar which accompanied the said Petition.

(SIGNED) Hugh Cowan

DATED this Twenty fourth day of November one thousand eight hundred and sixty seven years.

To the Superintendent of the (7) Public Asylum called the Crichton Royal Institution for Lunatics at Dumfries

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

1059

Ann Millar

27/11/66

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (1) County of Dumfries *and his Substitutes,*—

The Petition of John Dinwoodie Inspector of the Poor for the Parish of Dumfries.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Adam Robson residing in Dumfries your Petitioner's (2) Pauper. is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Adam Robson to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

DATED this Twenty eighth (3) day of November One thousand eight hundred and Sixty six

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Adam Robson
Sex and Age,	Male - 26 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Single, Labourer
Religious Persuasion, so far as known,	Protestant
Previous Place of Abode,	Dumfries
Place where Found and Examined,	do
Length of time Insane,	Since birth
Whether first Attack,	—
Age (if known) on first Attack,	—
When and where previously under Examination and Treatment,	Dumfries
Duration of existing Attack,	Since birth
Supposed Cause,	Not known
Whether subject to Epilepsy,	no -
Whether Suicidal,	no -
Whether Dangerous to others,	no -
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not known
Special circumstances (if any) preventing the insertion of any of the above particulars,	Not known

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty eighth day of November One thousand eight hundred and Sixty six

(To be signed by Party applying) John Dinwoodie, Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Scott being a (1) Graduate of the University of Edi
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) 26 Castle S
Dumfries in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Adam Robson a Pauper and that
the said Adam Robson is a (5) an Idiot
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Know Robson for several years. he is a congenital Idiot – unable to take care of himself or understand question &c –

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

John Dinwoodie Inspector of Poor says he has been known to be an Idiot all his life –

Name and Medical Designation, Wm Scott M.D.

Place of Abode, Dumfries

DATED this 28th day of November One thousand eight hundred and sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Grant Aydl being a (1) Graduate of the Faculty of Physic
Ant Surgeon [illegible] and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Police Office
Dumfries in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Adam Robson a Pauper and that
the said Adam Robson is a (5) Person of Idiot
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks nonsense cannot speak but in broken sentences [illegible] the circumstances of the case &c

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

It has been stated that he is [illegible] Robson & Dinwoodie Inspectors who [illegible]

Name and Medical Designation, Wm Grant Aydl M.D.

Place of Abode, Dumfries

DATED this 28th day of Nov One thousand eight hundred and sixty six years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pelcarn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Brunwoodie
Inspector of Poor Dumfries
Certificates under the hands of William Scott
and William Marshall , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Adam Robson residing in Dumfries a Pauper and that the said Adam Robson is an (5) Idiot and a person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Adam Robson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Adam Robson which accompanied the said Petition.

DATED this Twenty Eighth day of November One thousand eight hundred and Sixty Six

John P Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Adam Robson
28th November
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of John Dinwoodie Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Higgie residing in Dumfries your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander Higgie to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Sixth (4) day of December One thousand eight hundred and Sixtysix

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Alexander Higgie
2. Sex and Age,	Male - 36 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	do - Sergeant Scotch Fusiliers
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	do
8. Length of time Insane,	About a year
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	about 35 years
11. When and where previously under Examination and Treatment,	Neatly Hospital near London
12. Duration of existing Attack,	About a year
13. Supposed Cause,	No cause Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries in the meantime
18. Date of becoming Chargeable,	6th Decr 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Not Known

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Sixth day of December One thousand eight hundred and Sixtysix

(*To be signed by Party applying* John Dinwoodie Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Ingram Scott being a (1) Fellow of the Faculty of Physicians Surgeons and Fellow of the College of Physicians and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Queensberry House Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Alexander Higgie a Pauper and that the said Alexander Higgie is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks incoherently he is afraid to answer most questions of importance & refuses to answer any question on matters

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His wife and her mother give much the same account of him as above

Name and Medical Designation, William Marshall M.D. &c

Place of Abode, Buccleuch Street Dumfries

DATED this 6th day of December One thousand eight hundred and Sixty six years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Scott being a (1) Graduate of the University of Edin and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Queensberry, Dumfries. Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Alexander Higgie a Pau and that the said Alexander Higgie is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks incoherently answers yes to all questions, and is very morose.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His wife says he was brought from an asylum in England on Fri last where he has been a patient for some

Name and Medical Designation, William Scott M

Place of Abode, Dumfries

DATED this 6th day of December One thousand eight hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Blair Boyle Esquire (1) Advocate, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Dinwoodie Inspector of the poor of the Parish of Dumfries Certificates under the hands of William Marshall and William Scott, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexander Higgie residing in Dumfries a pauper and that the said Alexander Higgie is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Higgie as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Higgie which accompanied the said Petition.

DATED this Sixth day of December One thousand eight hundred and sixty six.

John P Boyle

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Alexander Higgie

6th December

1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of John Ferguson Auldgirth

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Ferguson your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Ferguson to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Fergusson

DATED this tenth (4) day of Dec. One thousand eight hundred and Sixty six

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Thomas Ferguson
2. Sex and Age,	Male 33
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Minister of Estab.d Church
5. Religious Persuasion, so far as known,	Buchlivie, Kilpatrick Stirling
6. Previous Place of Abode,	Crichton R. Institution
7. Place where Found and Examined,	a lunatic
8. Length of time Insane,	33
9. Whether first Attack,	No Where
10. Age (if known) on first Attack,	about
11. When and where previously under Examination and Treatment,	not known
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Ferguson Brother James Auldgirth
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this tenth day of Dec. One thousand eight hundred and Sixty six

(*To be signed by Party applying*) John Fergusson

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Smith Kerr being a (1) Doctor of medicine, and Licentiate of the [illegible] of Surgeons, Edinburgh. and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Co[illegible] Asylum. in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Thomas Ferguson, a minister near Stirling. and that the said Thomas Ferguson is a (5) Person of unsound mind. and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Shows aquaptomes, religious monomanies, is in a peculiar nervous state, restless & excitable. Prefers remaining in the Asylum.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) He himself and his brothers state that he ran [illegible] the village in a state of nudity, wished to [illegible] the pulpit in that state, was quite maniacal.

Name and Medical Designation, } William S Kerr, [illegible]

Place of Abode, Buccleuch St, Dumfries

DATED this 10th day of December One thousand eight hundred and Sixty Six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson being a (1) Graduate of the Edinburgh Univer[illegible] and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Asylum Dumfries. in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Thomas Ferguson - Mi[illegible] Stirling and that the said Thomas Ferguson is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) States that a[illegible] days ago, he ran out into the streets naked[illegible] an uncontrollable impulse, and in obedience to [illegible] command of the Holy Ghost. He is nervous and excitable, and feels the necessity for restraint.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His brother informs me that the state[illegible] above made is correct, and that he, cons[illegible] in this state, ~~with his [illegible]~~ for some time. [illegible] then very violent, and threatened injury to those around.

Name and Medical Designation, } John Dickson M.D.

Place of Abode, Castle Street - Dumf[illegible]

DATED this 10th day of December One thousand eight hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, J. Gilchrist M.D. being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Crichton Hamm Dumfries in the County of Dumfries, seen and personally examined Thomas Fergason, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

J. Gilchrist M.D.

DATED this Seventh day of Decr. One thousand eight hundred and Sixty Six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Fergusson Auldgirth Certificates under the hands of William Smith Kerr and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Thomas Fergusson, Petitioners Brother and that the said Thomas Fergusson is a (5) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Fergusson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Fergusson which accompanied the said Petition.

DATED this Eleventh day of December One thousand eight hundred and Sixty Six years

John P. Trotter

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Thomas Ferguson
7th December
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of Helen McConnell Torhouse

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Anthony McConnell Senr your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Anthony McConnell Senr to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

Helen McConnell

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 24th (4) day of Decr One thousand eight hundred and sixty six years.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Anthony McConnell Senr
2. Sex and Age,	male. 72.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Farmers son
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Torhouse
7. Place where Found and Examined,	Crichton Asylum
8. Length of time Insane,	three weeks
9. Whether first Attack,	Second
10. Age (if known) on first Attack,	2 2
11. When and where previously under Examination and Treatment,	Crichton Asylum
12. Duration of existing Attack,	3 weeks
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	sometimes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Anthony McConnell Senr but presently labouring under severe bodily disease & unable to take steps — sister at one time [illegible] had mental aberration
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 24th day of Decr One thousand eight hundred and 66

(*To be signed by Party applying*) Helen McConnell

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, John Dickson being a (1) graduate of the Edinburgh Universi and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Anthony McConnell Fa son and that the said Anthony McConnell is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is in a st of extreme depression - Taciturn - confuse and incoherent - Believes vaguely that p have injured him,

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The Head attendant at the Asylum informs that he has been in the above described co for three weeks or more.

Name and Medical Designation, John Dickson M

Place of Abode, Castle Street Dumfri

DATED this 25th day of December One thousand eight hundred and Sixty six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, William Smith Kerr. being a (1) Doctor of Medicine - Licentiate of Royal College of Surgeons of Edinr and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties asylum. in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Anthony McConnell Farmer's Son. and that the said Anthony McConnell is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is greatly depressed. In conversation he is dull rumbling and incoherent, somewhat irri

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) He has been in the above state for some time in the Asylum.—

Name and Medical Designation, William S Kerr M

Place of Abode, Buccleuch Street, Dumfri

DATED this 25th day of December One thousand eight hundred and Sixty Six.—

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned John Dickson, being (1) a Graduate of the Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum in the County of Dumfries, seen and personally examined Anthony Mc Connell Farmer, Son, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this 25th day of December One thousand eight hundred and sixty six.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Lauderdale Maitland Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Helen Mc Connell Toorhouse Wigtown Certificates under the hands of John Dickson and William Smith Ross, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Anthony McConnell son of Petitioner and that the said Anthony McConnell is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Anthony Mc Connell as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Anthony Mc Connell which accompanied the said Petition.

DATED this thirty first day of December One thousand eight hundred and sixty six years

L Maitland

To the Superintendent of the (7) Asylum of Public Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Anthony McConnell
1st December 1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~Substitute~~ of ~~(2) Shire Wigtown~~ of Wigtown and Kirkcudbright and his Substitutes, for the County of

The Petition of ~~Tho~~ Helen McConnell of Torhouse Parish humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Anthony McConnell Junr. your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Anthony McConnell Junr. to the Crichton Royal Institution and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Helen McConnell

Dated this 7th (4) day of December One thousand eight hundred and sixty six years

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Anthony McConnell Junr.
Sex and Age,	22
Married, Single, or Widowed,	
Condition of Life, and previous Occupation (if any),	Farmers son
Religious Persuasion, so far as known,	member of the Church of Scotland
Previous Place of Abode,	Torhouse Parish of Wigtown
Place where Found and Examined,	Torhouse
Length of time Insane,	Ten months
Whether first Attack,	~~1 second~~ attack
1 Age (if known) on first Attack,	22
1 When and where previously under Examination and Treatment,	Crichton Asylum Dumfries from ~~1st~~ March to beginning of October
1 Duration of existing Attack,	About two months
Supposed Cause,	not known
1 Whether subject to Epilepsy,	no
1 Whether Suicidal,	no
1 Whether Dangerous to others,	Yes
1 Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
1 Date of becoming Chargeable,	—
1 Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Anthony McConnell Senr. his father who is unable to take steps from severe bodily disease — His sister was for a short period in a state of melancholy —
2 Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Seventh day of December One thousand eight hundred and sixty six.

(*To be signed by Party applying*) Helen McConnell

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Robert D Rose
being a (1) Licentiate of the Royal College of Surgeon of Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Torhouse in the Parish of Wigtown in the County Wigtown separately from any other Medical Practitioner visited and personally examined (4) Anthony McConnell Junr. at his father & mother at the Farm of Torhouse and that the said Anthony McConnell Junr. is a (5) person of mind in ——— and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) I have attended Anthony McConnell from the commencement of his illness present date, he has been throughout irritable excitable & noisy, constant & careful watching, in conversation he is rambling & perfectly incapable of talking rationally on any subject

2. Other facts (if any) indicating Insanity communicated to me by others: (7) I was informed by his mother the other day that while his attendant slept he got out of bed & scattered the fire through the room he is violent & ~~[illegible]~~ I am told that his relations are in [illegible] of his injuring himself or them

Name and Medical Designation, Robert D Rose Surgeon

Place of Abode, Wigtown

DATED this seventh day of December One thousand eight hundred and sixty six years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned,
being a (1)
and being in actual practice as a (2)
hereby certify, on soul and conscience, that I have this day, at (3)
in the County
separately from any other Medical Practitioner
visited and personally examined (4)
and that
the said is a (5)
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation,

Place of Abode,

DATED this day of One thousand eight hundred and

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Robert D Rose being (1) Licentiate of the Royal College of Surgeons of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Torhouse Farm in the Parish of in the County of Wigtown, seen and personally examined Anthony McConnell Junr, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Robert D Rose L.R.C.S.E.

DATED this Seventh day of December One thousand eight hundred and sixty six years.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Macduff Rhind by Advocate (1) Sheriff Substitute of the (2) County of Wigtown having had produced to me, with a Petition at the instance of (3) Helen McConnell of Torhouse Parish of Wigtown two Certificates under the hands of Robert D Rose, Surgeon Wigtown ~~and~~ _____, being ~~two~~ Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Anthony McConnell junior and that the said Anthony McConnell junior is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Anthony McConnell junior as a Patient into the (6) Crichton Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Anthony McConnell junior which accompanied the said Petition.

DATED this Seventh day of December One thousand eight hundred and sixty six

M. Rhind

To the Superintendent of the (7) Public Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Anthony McConnell
8th December
1866

This paper being
imperfect and
illegal a second
was obtained
by orders of the
Boards of Lu-
nacy.

20 & 21 *Vict., Cap.* 71. *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

riff or Steward. re or Stewartry.

Unto the Honourable the (1) ~~Steward~~ *Sheriff of the* (2) ~~Stewartry~~ Wigtown
of Kirkcudbright *and his Substitutes,—*

The Petition of John Watson, Inspector of Poor of Twynholm
humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Halliday, a Pauper on the Parish Twynholm
is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander Halliday to the Southern Counties Asylum, and to sanction his admission into the said Asylum.

(SIGNED) John Watson

The date of the on must be with- rteen clear days ng the dates of Medical Certifi-

DATED this Thirtieth (3) day of November one thousand eight hundred and Sixty six.

STATEMENT.

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

1.	ristian Name and Surname of Patient at length,	Alexander Halliday
2.	x and Age,	Male — 50 years
3.	rried, Single, or Widowed,	Married
4.	ndition of Life, and previous Occupation (if any),	Sailor
5.	ligious Persuasion, so far as known,	Protestant
6.	evious Place of Abode,	Frostrie in Twynholm
7.	ace where Found and Examined,	Frostrie
8.	ngth of time Insane,	A great number of years
9.	hether first Attack,	Continued Insanity
10.	ge (if known) on first Attack,	First observed in Kirkcudbright
11.	hen and where previously under Examination and Treatment,	a great many years ago
12.	ration of existing Attack,	
13.	pposed Cause,	Cause unknown
14.	hether subject to Epilepsy,	No.
15.	hether Suicidal,	No.
16.	hether Dangerous to others,	No.
17.	rish or Union to which the Lunatic (if a Pauper) is Chargeable,	Twynholm
18.	ristian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	David Halliday, Mullock — Brother. No.
19.	ecial circumstances (if any) preventing the insertion of any of the above particulars,	

certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* John Watson

DATED this Thirtieth day of November one thousand eight hundred and Sixty six.

* To be Signed by the Party applying.

[4.]

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, J^n Shand being a (1) Member of the Royal College of Surgeons in Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Frostrie in the Parish of Tarphichen Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Alexander Halliday Pauper residing at said Frostrie and the said Alexander Halliday is a (5) Person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

General demeanour — habit of talking to himself, fits of taciturnity, uncertainty of mood, at times extraordinary ideas regarding the nature of his ailments

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

That he is at times unaccountably obscure in language — with difficulty can be roused to any work though stated to be a fair general agriculturist & formerly to have been a good worker — Information derived from Mr Watson with whom he resides & Mr Murray with whom he lives.

(SIGNED) *Name and Medical Designation,* J^n Shand

Place of Abode, Kirkcudbright

DATED this twenty fourth day of November One thousand hundred and Sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Cumming being a (1) Doctor of Medicine of Glasgow University and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Frostrie in the Parish of Troqueer in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Alexander Halliday Pauper residing at Frostrie and the said Alexander Halliday is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Has preposterous notions regarding his health, has suffering from consumption, says he is very ill while on the contrary he is a strong muscular man. When he very often wanders from the subject he proposes speaking about

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

By J. & Murray and Mrs Murray with whom he lives. That he is liable to sudden fits which often come on without any cause that during these fits he is very violent in his language, but never threatens any one. He refuses to do any work though able enough

(SIGNED) *Name and Medical Designation,* William Cumming

Place of Abode Kirkcudbright

DATED this twenty fifth day of November one thousand hundred and sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I, hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of one thousand eight hundred and

(1) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar (1) Jr. Steward Substitute
of the (2) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3) John Watson
Certificates under the hands of John Shand
and William Cumming, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Alexander Halliday a Pauper and that the said
Alexander Halliday is a (5) lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Halliday as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Halliday which accompanied the said Petition.

(SIGNED) W. H. Dunbar

DATED this Fourth day of December one thousand eight hundred and Sixty five.

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries.

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

Alexander Halliday
8th December
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of William Burdie, Inspector of Poor for Dornock Parish humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Mullens, Labourer Dornock Village your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Mullens to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Wm Burdie Insp.

DATED this Eighth (4) day of December One thousand eight hundred and Sixty-Six

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	George Mullens
Sex and Age,	Male - about 60
Married, Single, or Widowed,	Married
Condition of Life, and previous Occupation (if any),	Labourer
Religious Persuasion, so far as known,	Established Church
Previous Place of Abode,	Dornock Village
Place where Found and Examined,	Dornock Village
Length of time Insane,	about a week
Whether first Attack,	yes
Age (if known) on first Attack,	59 or thereabouts
When and where previously under Examination and Treatment,	1866. Southern Counties Asylum
Duration of existing Attack,	about a week
Supposed Cause,	not known
Whether subject to Epilepsy,	no
Whether Suicidal,	?
Whether Dangerous to others,	no
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dornock
Date of becoming Chargeable,	June 1866
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	David Mullens his son residing in Manchester.
Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Eighth day of December One thousand eight hundred and Sixty six.

(To be signed by Party applying Wm Burdie, Insp^r.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Thomas Williamson being a (1) Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Dornock in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) George Mullans a Pauper residing at Dornock and that the said George Mullans is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) incoherency Speech

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) told by his neighbours McCracken and Thomson he was found this morning wandering in fields naked and that he had since required to be constantly watched to prevent him from doing injury to himself or others

Name and Medical Designation, } Mr Williamson

Place of Abode, Surgeon-Annan

DATED this Seventh day of December One thousand eight hundred and Sixty Six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Agnew Blackie Boyle, Physician & being a (1) Surgeon of the University & Royal College of Surgeons of Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Annan in the County of Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) George Mullans, Pauper of Dornock Parish and that the said George Mullans is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Very excitable & papinati, soon becomes violent. This conversation is incoherent & rambling.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Wandering in the fields in a state of nu[illegible]

Mr Purdie.

Inspector of Poor of Dornock. 2

Name and Medical Designation, } A. B. Boyle. Mdt.

Place of Abode, Fields Park, Annan

DATED this Eighth day of December One thousand eight hundred and sixty six. —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Thomas Williamson being (1) a Incentiate of the Royal College of Surgeons of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Dornock in the County of Dumfries, seen and personally examined George Mullens, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Thomas Williamson

DATED this Seventh day of December One thousand eight hundred and Sixty Six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I John Hearn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Purdie Inspector of Poor for Dornock Certificates under the hands of Thomas Williamson and John Black Boyd, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) George Mullens, a Pauper from Dornock and that the said George Mullens is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Mullens as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Mullens which accompanied the said Petition.

DATED this Tenth day of December One thousand eight hundred and Sixty six years

John H Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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George Mullens
8th December
1866

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,*—

The Petition of Robert Lammie Barclench

Crawford John

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Goodfellow is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Goodfellow to the Crichton Institution Dumfries and to sanction ~~his~~ her admission into the said Asylum.

(SIGNED) Robert Lammie

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 10th (3) day of Decr one thousand eight hundred and sixty six

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Janet Goodfellow
2. Sex and Age,	F. 70 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Birkeleigh Crawfordjohn
7. Place where Found and Examined,	Birkeleigh Crawfordjohn
8. Length of time Insane,	Three Months
9. Whether first Attack,	First
0. Age (if known) on first Attack,	70 years
1. When and where previously under Examination and Treatment,	None
2. Duration of existing Attack,	Three Months
3. Supposed Cause,	None known of
4. Whether subject to Epilepsy,	No.
5. Whether Suicidal,	Yes.
6. Whether Dangerous to others,	Yes.
7. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not a pauper
8. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Elizabeth Gall. Step sister No.
9. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* Robert Lammie

DATED this 10th day of Decr one thousand eight hundred and sixty six

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1200.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

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

I, the undersigned, bring a (1) Member of the Royal College of Surgeons, Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Birkenly parish of Crawfordjohn Lanark in the County separately from any other Medical Practitioner visited and personally examined (4) Janet Goodfellow, domestic servant, at Birkenly Crawfordjohn and the said Janet Goodfellow is a (5) Lunatic and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her actions and demeanour is strange & incoherent, & now being a busy quiet & retiring person, she has become outrageous. On occasions I saw her sitting her head from side to side on a table in a talking & muttering manner, on another occasion was engaging her body from side to side in a manner similar to that of a person in the throes of labour. She also has some kind of hearing & talking delusion.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) I was told by Mrs Jamieson & her son Robert that Janet Goodfellow had frequently to enter their house & those of others, that she had frequently threatened to take her own & their life & had made many attempts to throw herself on the fire on a few occasions into the burn behind Barlae.

(SIGNED) *Name and Medical Designation,* Robert Meikle, LRCS Ed

Place of Abode, Douglas, Lanarkshire

DATED this fourth day of December One thousand eight hundred and 66

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

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

I, the undersigned, being a (1) Graduate of the Edinburgh Uni and Physician being in actual practice as a (2) hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries, in the County separately from any other Medical Practitioner visited and personally examined (4) Janet Goodfellow - Ser Servant at Birkenly Crawfordjohn and the said Janet Goodfellow is a (5) Lunatic and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is perfectly incoherent, and confused. Is constantly - &c;

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Sister in Law informs me that she has been for Constable for 3 months and she is occasionally outrageous, and is disposed to wander and be destructive herself

(SIGNED) *Name and Medical Designation,* John Dickson

Place of Abode, Castle Street Dum

DATED this 10th day of December one thousand eight hundred and sixty six.

And this

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Janet Goodfellow is a (1) Lunatic hereby further certify that the Case of the said Janet Goodfellow is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, Robt Meikle, L R C S Ed

Place of Abode, Douglas, Lanarkshire

DATED this 7th day of December one thousand eight hundred and 66

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Lammie Birkclengh, Crawford John

Certificates under the hands of Robert Meikle and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Goodfellow, Domestic Servant, Birkclengh forsd and that the said Janet Goodfellow is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Goodfellow as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorise her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Goodfellow which accompanied the said Petition.

(SIGNED) J P Trotter

DATED this Tenth day of December one thousand eight hundred and Sixty Six

To the Superintendent of the (7) Public *Asylum of* Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

Janet Goodfellow
16th December
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (1) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (1) Shire of Dumfries *and his Substitutes,—*

The Petition of William Caird Inspector of Poor

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Johnstone

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (2) pauper of this Parish is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Johnstone to the Crichton Royal Institution and to sanction her admission into the the said Asylum.

William Caird Inspector of Poor

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this eleventh (3) day of December One thousand eight hundred and Sixty Six

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Janet Johnstone
2. Sex and Age,	Female 57 years
3. Married, Single, or Widowed,	single
4. Condition of Life, and previous Occupation (if any),	waiter in an Inn
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Newabbey
7. Place where Found and Examined,	Wamford cottage Newabbey
8. Length of time Insane,	—
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	57 years
11. When and where previously under Examination and Treatment,	Was under treatment before two months
12. Duration of existing Attack,	two months
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	—
16. Whether Dangerous to others,	yes threatening language
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Newabbey
18. Date of becoming Chargeable,	1st Dec 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Johnstone Wamford cottage Brother — none
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this eleventh day of December One thousand eight hundred and Sixty Six

(*To be signed by Party applying*) William Caird Inspector of Poor

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Brothwick
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) New Abbey
in the County
Kirkcudbright separately from any other Medical Practitioner
visited and personally examined (4) Janet Johnstone
New Abbey and t
the said Janet Johnstone is a (5) Lunatic
and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) States that
bed, bed-clothes & walls of the room are
wet, all of which I found quite dry, also
bowels are prevented moving by some growth

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her Brother States that the thinks her
is poisoned and that the is very irritable
threatening language and refusing to leave her
unless when left alone

Name and Medical Designation, Alex Brothwick

Place of Abode, Dumfries

Dated this 17th day of December One thousand ei
hundred and Sixty six

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson
being a (1) Graduate of the Edinburgh University
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Newabbey
in the County
Kirkcudbright separately from any other Medical Practitioner
visited and personally examined (4) Janet Johnston - Pauper
Newabbey and th
the said Janet Johnston is a (5) Lunatic
and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the followi
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6). She is irri
and depressed - Believes that her food
poisoned - that everything around her is w
her bed clothes - the walls of the room &c - a
she is oppressed & neglected, and conspired against.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her Sister in Law informs me that she
times very excited and would strike or bite
that she is restless and disposed to wande
during the night

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dum

Dated this 8th day of December One thousand ei
hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Fotheringham Esquire (1) Advocate, Sheriff substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Caird Inspector of Poor for Newabbey Certificates under the hands of Alexander Borthwick and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Johnstone Newabbey a pauper and that the said Janet Johnstone is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Johnstone as a Patient into the (6) Public Asylum of Crichton Royal, Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Johnstone which accompanied the said Petition.

DATED this twelfth day of December One thousand eight hundred and sixty six

John D Fotheringham

To the Superintendent of the (7) Public Royal Institution
Asylum of Crichton
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Janet Johnstone
15th December
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*

The Petition of Duncan Clapperton Insp: of Poor Annan,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Johnstone, Pauper.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Charge is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Johnstone, Pauper to the Southern Counties' Asylum and to sanction her admission into the the said Asylum.

D. Clapperton Inspector.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this fifteenth (4) day of December One thousand eight hundred and Sixty six years.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jane Johnstone
2. Sex and Age,	Female 45 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Brydekirk Village, Parish of Annan.
7. Place where Found and Examined,	Brydekirk Village Do
8. Length of time Insane,	about three Months.
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	about three Months.
13. Supposed Cause,	Not known.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Annan.
18. Date of becoming Chargeable,	July, 1865.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	George McKean. Eaglesfield, Middlebie, Uncle, her Mother, (Slightly)
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this fifteenth day of December One thousand eight hundred and Sixty six years

(*To be signed by Party applying*) D. Clapperton Insp^r

P. S.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Willm Ewart
being a (1) Licentiate of the Royal College of Physicians in Edinburgh
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Bryde Kirk Village, Parish of Annan in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Jane Johnston, Bryde Kirk a pauper and that the said Jane Johnston is a (5) person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her general appearance, excited manner, and incoherent talk.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Told by some of her neighbours of her abusive and sometimes obscene language

Name and Medical Designation, Willm Ewart, Surgeon

Place of Abode, Edmanthurst, Annan

DATED this fourteenth day of December One thousand eight hundred and Sixty six.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Little
being a (1) Doctor of Medicine & Licentiate of the Royal College of Surgeons in Edinburgh
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Brydekirk Village Parish of Annan in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Jane Johnston, Brydekirk Village a pauper and that the said Jane Johnstone is a (5) person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her excited manner her abusive obscene & incoherent talking and her general appearance.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Told by her neighbours that threatens them and is very excited & restless during the night when she annoys them by throwing her furniture about the house and breaking it. James Little M

Name and Medical Designation,

Place of Abode, Bridge End, Annan

DATED this fourteenth day of December One thousand eight hundred and Sixty six

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight
hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Fotheringame (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Duncan Clapperton
Inspector of Poor Annan
Certificates under the hands of William Ewart
and James Little , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jane Johnstone Brydekirk Village a Pauper and that the said Jane Johnstone — is a (5) Person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Johnstone — as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Johnstone which accompanied the said Petition.

DATED this Seventeenth day of December One thousand eight hundred and Sixty six years

John P. Fotheringame

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

250.

Jane Johnstone
18th December
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries, *and his Substitutes,*—

The Petition of Mary Gilbertson, Stonylee, Halfmorton humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Irving, Scalerigg, Middlebie your Petitioner's (3) Half-sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Irving to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

Mary Gilbertson

(3) State degree of relationship or other affinity in which Petitioner stands to Lunatic.

DATED this Nineteenth (4) day of December One thousand eight hundred and Sixty-six

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Margaret Irving
Sex and Age,	Female - 39.
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Domestic Servant
Religious Persuasion, so far as known,	R.C.
Previous Place of Abode,	Scalerigg Middlebie
Place where Found and Examined,	Risk of Pretion
Length of time Insane,	about 2 months
Whether first Attack,	First
Age (if known) on first Attack,	39 years
When and where previously under Examination and Treatment,	2 years under treatment before about 2 months
Duration of existing Attack,	about 2 months
Supposed Cause,	unknown
Whether subject to Epilepsy,	No
Whether Suicidal,	~~No~~ Yes
Whether Dangerous to others,	Yes - and liberal in her threatenings
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Irving, Ormside, Appleby, Westmoreland, her brother, and Richard Irving, New Zealand another brother - none
Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this Nineteenth day of December One thousand eight hundred and Sixty six

(*To be signed by Party applying*) Mary Gilbertson

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Carruthers being a (1) Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (2) Surgeon and General Medical Pra hereby certify, on soul and conscience, that I have this day, at (3) Regg of Gretna in Parish of Gretna in the County of Dumfries separately from any other Medical Practitione visited and personally examined (4) Margaret Irving, Domestic Servant, previously residing at Balcrieg, Middlebie, and th the said Margaret Irving is a (5) person of unsound mind and a proper person to be detain under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Resting none, he constantly on her feet and talking incoherently threatening to seek comfort by suicide or oth The expression of her Countenance shews the id

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her half sister (Mary Gilbertson) and others tol they have had much difficulty in restra her from running away and injuring her

Name and Medical Designation, James Carruthers, L.R.C.S.E.,

Place of Abode, Kirkpatrick Fleming

Dated this Nineteenth day of December One thousand eigh hundred and Sixty Six

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson being a (1) graduate of the Edinburgh Univ and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Margaret Irving - Dom Servant previously residing at Middlebie and the the said Margaret Irving is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the followin grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is in a state of extreme depression - Restle & taciturn - abstaining from food, wi the object of destroying herself

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Has abstained from food since he admission into the house.

Name and Medical Designation, John Dickson

Place of Abode, Castle St - Dumfri

Dated this 21st day of December One thousand eigh hundred and sixty six.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James Carruthers of Kirkpatrick Fleming being (1) Licentiate of the Royal College of Surgeons of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Rigg of Gretna in the County of Dumfries, seen and personally examined Margaret Irving, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

James Carruthers

DATED this Nineteenth day of December One thousand eight hundred and Sixty Six

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Ritchie Trotter Esquire (3) Sheriff Substitute of the (4) County of Dumfries having had produced to me, with a Petition at the instance of (5) Mary Gibbertson Stonylea, Half Morton Certificates under the hands of James Carruthers and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Margaret Irving, Domestic Servant, Kirkpatrick Middleline and that the said Margaret Irving is a (7) Person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Irving as a Patient into the (8) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Irving which accompanied the said Petition.

DATED this Twenty first day of December One thousand eight hundred and Sixty Six

John R Trotter

To the Superintendent of the (8) Public Asylum of Southern Counties Dumfries

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(3) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(4) State whether a County or Stewartry.
(5) Insert Name and Designation.
(6) Describe him, and if a Pauper, state so.
(7) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(8) Public, District, Parochial, or Private.
(9) Public, District, Parochial, or Private.

259

Margaret Irving
19 December
1866

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Unto the Honourable the (1) Sheriff *of* ~~the~~ (2) Wigtownshire *of* *and his Substitutes,*—

(1) Sheriff or Steward.
(2) Shire or Stewartry.

The Petition of Colin Christison Inspector of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Edgar is at present in a state of Mental Derangement and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Edgar to the Southern Counties Asylum Dumfries and to sanction admission into the said Asylum.

(SIGNATURE) Colin Christison

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eight (3) day of January one thousand eight hundred and Sixty Seven years

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	William Edgar
2. Sex and Age,	male about Thirty five years
3. Married, Single, or Widowed,	Widower
4. Condition of Life, and previous Occupation (if any),	Labourer.
5. Religious Persuasion, so far as known,	Protestant supposed to be
6. Previous Place of Abode,	several places, but was got in Kirkinner
7. Place where Found and Examined,	Whauphill Kirkinner Parish
8. Length of time Insane,	Cannot say. but said to be several weeks
9. Whether First Attack,	Cannot say
10. Age (if known) on First Attack,	not exactly known
11. When and where previously under Examination and Treatment,	Examined on 7th Jany 1867. by Two Doctors
12. Duration of Existing Attack,	do not exactly know
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	I think not
15. Whether Suicidal,	do not know
16. Whether Dangerous to others,	It is supposed he is
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Born in Ireland — If chargeable it will be Kirkinner in the mean time
18. Date of becoming Chargeable,	Just now only
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	No relations in this Country, only Widow Rodgers his late Wife's Mother, & she Cannot give any Correct information — do not know whether any of his relations were Insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNATURE)* Name, Colin Christison Inspector of Poor Kirkinner Parish — Wigtownshire

DATED this Eight day of January one thousand eight hundred and sixty seven

* To be Signed by the Party applying. Colin Christison P. p.

Margaret Irving

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Saml. Snowdon being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Wigtown Prison in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) William Edgar and that the said William Edgar is a (5) Lunatic and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts*

1. Facts indicating Insanity observed by myself: (6) From his uproarious Conduct in the Prison - Consisting of Shouting - singing - dancing - & enacting more horrible yells -

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr. Hutcheson Inspector of Police Living in Wigtown informs me that he has seen him drink his own Urine & Exposing his Nu

(SIGNED) *Name and Medical Designation,* Saml. Snowdon M

Place of Abode, Wigtown - Wigtownshire

DATED this 8th day of January One thousand eight hundred and sixty seven —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Rob D Rose being a (1) Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Wigtown Pri in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) William Edgar ~~[illegible]~~ Prisoner in the Prison of Wigtown and that the said William Edgar ~~[illegible]~~ is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Labours under hallucinations & illusions - supposes he a gentleman of high rank & possessed of estates. his manner altogether is that of an insane person

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) — He has been seen by his attendant Mr. McLelland to drink his own urine ~~has been taken~~ & behave himself in a more insane manner

(SIGNED) *Name and Medical Designation,* Rob D Rose Sh

Place of Abode Wigtown

DATED this 8th day of January one thousand eight hundred and sixty seven years —

CERTIFICATE OF EMERGENCY.

(This certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is one of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Thomas Murray Esquire (1) Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Colin Christison Inspector of Poor, Portpatrick
Certificates under the hands of Robert B. Rose Surgeon
and Samuel Snowdon M.D., being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
William Edgar Labourer Whauphill Pauper and that the said
William Edgar is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Edgar as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Edgar which accompanied the said Petition.

(SIGNATURE) Thos Murray

DATED this eighth day of January one thousand eight hundred and sixty seven

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.

S William Edgar
8 January
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,*—

The Petition of Revd James Darling Kempton Maryage Knoreland humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ambrose Larkworthy your Petitioner's (3) ward is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Ambrose Larkworthy to the Cornhill Royal Institution and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other Capacity in which Petitioner stands to Lunatic.

James Darling

Dated this 11th (4) day of January One thousand eight hundred and sixty seven

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1	Christian Name and Surname of Patient at length,	Ambrose Larkworthy
2	Sex and Age,	Male 26
3	Married, Single, or Widowed,	Single
4	Condition of Life, and previous Occupation (if any),	Private Gentleman
5	Religious Persuasion, so far as known,	Episcopal Church
6	Previous Place of Abode,	Wetherall Carlisle
7	Place where Found and Examined,	Do Do
8	Length of time Insane,	A few months
9	Whether first Attack,	Not the first attack
10	Age (if known) on first Attack,	
11	When and where previously under Examination and Treatment,	In Asylum at Melbourne
12	Duration of existing Attack,	A few months
13	Supposed Cause,	Death of Aunt
14	Whether subject to Epilepsy,	No
15	Whether Suicidal,	No
16	Whether Dangerous to others,	No
17	Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18	Date of becoming Chargeable,	
19	Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Falconer Larkworthy Esq Upper Hamilton Terrace London Brother
20	Special circumstances (if any) preventing the insertion of any of the above particulars,	No relatives insane

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 11th day of January One thousand eight hundred and

(*To be signed by Party applying*) Sixty Seven

James Darling

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, ~~Ambrose Lackworthy~~ Wm Bousfield Pa
being a (1) Fellow of the Royal College of Surgeons of Engla
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Bath House
Wetheral in the County
Cumberland separately from any other Medical Practitio
visited and personally examined (4) Ambrose Lackworthy Genl
Bath House Wetheral Carlisle and th
the said Ambrose Lackworthy is a (5) person of
unsound mind and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

He was so excited and incoherent that it was quite i
to hold any conversation with him

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

That he tears and breaks everything that comes i
his reach unless prevented — this information I have
his Attendant from the person in whose hands he m

Name and Medical Designation, Wm Bousfield Page F.

Place of Abode, 78 Lowther Street Carlisle

DATED this 4th day of January One thousand eig
hundred and sixty seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Thomas Head. Doctor of Medic
being a (1) Fellow of the Royal College of Physicians
Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Bath House
Wetheral in the County
Cumberland separately from any other Medical Practitio
visited and personally examined (4) Ambrose Lackworthy Gen
Wetheral Carlisle and th
the said Ambrose Lackworthy is a (5) Lunatic
and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) By his applyi
treacle, porridge & Bread & butter to the
in order to heal the bones which were f
by his leaping through a window —

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Thomas Head. M

Place of Abode, Oak Lodge Wetheral

DATED this 11th day of January One thousand eig
hundred and sixty seven —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned [illegible] being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal Institution in the County of Dumfries, seen and personally examined Ambrose Larkworthy, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

J. Gilchrist M.D.

DATED this 11th day of January One thousand eight hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter, Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) The Reverend James Darling Brampton Vicarage Certificates under the hands of William Bousfield Page and Thomas Head, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Ambrose Larkworthy, Gentleman, Bath House, Wetherall, Carlisle and that the said Ambrose Larkworthy is a (5) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ambrose Larkworthy as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ambrose Larkworthy which accompanied the said Petition.

DATED this Twelfth day of January One thousand eight hundred and Sixty Seven

John P. Trotter

To the Superintendent of the (7) Public *Asylum of* Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1061

Ambrose Larkworthy

11/1/67

Ambrose Larkworthy

1061

11. Jan. 67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of William Little Marchhouse humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Little My Sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Little to the Crichton Institution and to sanction her admission into the said Asylum.

(SIGNATURE) William Little

(3) The date of the petition must be with-fourteen clear days lowing the dates of 2 Medical Certifi-tes.

DATED this 14th (3) day of January One thousand eight hundred and sixty seven.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Little
2. Sex and Age,	Female 47 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Cook. Lodging house Keeper
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Beechgrove. Moffat
7. Place where Found and Examined,	2 Buccleuch Place Moffat
8. Length of time Insane,	about ten days
9. Whether first attack,	no. second attack
10. Age (if known) on first Attack,	39.
11. When and where previously under Examination and Treatment,	Crichton Institution
12. Duration of existing Attack,	ten days
13. Supposed Cause,	not known. but suppose anxiety about her brothers children since brother died some time ago
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	never shown any symptoms
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	William Little Marchhouse Kirkpatrick Fleming. Dumfriesshire. Brother. No
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNATURE)* *Name,* William Little

DATED this 14th day of January One thousand eight hundred and sixty seven

* To be signed by the Party applying.

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James Munro being a (1) Physician and Surgeon and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) 2 Buccleu[illegible] Moffat in the Cou[illegible] Dumfries separately from any other Medical Practit[illegible] visited and personally examined (4) Agnes Little Beechgro[illegible] Moffat and the said Agnes Little is a (5) person [illegible] unsound mind and a proper person to be de[illegible] under Care and Treatment, and that I have formed this opinion upon the foll[illegible] grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) violent, cond[illegible] running up and down the house: supposing ther[illegible] a conspiracy against her & that all her food [illegible] being poisoned & other wild ideas.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The same fact, only that when I am [illegible] there present, she is much more violen[illegible]

(SIGNED) *Name and Medical Designation,* James Munro M.D. [illegible]

Place of Abode, Moffat

DATED this 14th day of Jan[illegible] One thousand [illegible] hundred and sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, John Dickson being a (1) Member of the Royal College of P[illegible] Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Cricht[illegible] Institution, Dumfries in the Coun[illegible] Dumfries separately from any other Medical Practiti[illegible] visited and personally examined (4) Agnes Little Beechgr[illegible] Moffat and the said Agnes Little is a (5) Lunatic and a proper person to be det[illegible] under Care and Treatment, and that I have formed this opinion upon the folle[illegible] grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself; (6) She is res[illegible] and excited. States that she has n[illegible] slept for some nights; that there are [illegible] conspiring to injure her and that they [illegible] respectively poisoned her food.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The Medical Officer of the Asylum Info[illegible] that the above mentioned delusions are continually [illegible] in her mind, and give rise occasionally to [illegible]

(SIGNED) *Name and Medical Designation,* John Dickson [illegible]

Place of Abode, Castle Street Dum[illegible]

DATED this 15th day of January One thousand [illegible] hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Agnes Little Beechgrove Moffat is a (1) person of unsound mind hereby further certify that the Case of the said Agnes Little is One of Emergency, and I recommend the immediate removal of the said Agnes Little to an Asylum accordingly.

Name, James Munro M.D. L.R.C.S. Edin.

Place of Abode, Moffat

DATED this 14th day of January One thousand eight hundred and sixty seven

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Little Marchhouse, Kirkpatrick Irola Certificates under the hands of James Munro and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Little Beechgrove Moffat, Petitioners sister and that the said Agnes Little is a (5) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Little as a Patient into the (6) Public Asylum of Crichton Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Little which accompanied the said Petition.

(SIGNATURE) John P. Trotter

DATED this Sixteenth day of January One thousand eight hundred and Sixty Seven

To the Superintendent of the (7) Public
Asylum of Crichton Institution
Dumfries

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(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

Agnes Little
1062
14. Jan. 67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,*—

The Petition of George Douglas McGie humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Balmer your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Balmer to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Geo. Doug McGhie

Dated this 15th (4) day of Jany One thousand eight hundred and sixty seven

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	George Balmer
2. Sex and Age,	Male 36
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Estab Church
6. Previous Place of Abode,	Quarrel wood
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	About a week
9. Whether first Attack,	Hashad several attacks
10. Age (if known) on first Attack,	Do not know
11. When and where previously under Examination and Treatment,	Never in an Asylum
12. Duration of existing Attack,	About a week
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Mentioned
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkmahoe
18. Date of becoming Chargeable,	15th Jany 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	~~Not Known~~ Eliz. McMurdo Wife Quarrel wood Not Known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 15th day of Jany One thousand eight hundred and sixty seven

(*To be signed by Party applying* Geo. Doug McGhie

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Smith being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Quarrelwood Kirkmahoe ~~Dumfriesshire~~ Dumfries in the County of separately from any other Medical Practitioner visited and personally examined (4) George Balmer Pauper and that the said George Balmer is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) His manner are wild, he threatens violence on distant persons & occasionally on those around him. His ideas are wandering, sprating of different subjects in a violent & excited manner.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His wife states that for the last six weeks he has not been in his usual state of mind but more or less in the state mentioned by me above.

Name and Medical Designation, John Smith MB &c

Place of Abode, Dumfries

DATED this 15th day of January One thousand eight hundred and 67.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Murray being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Quarrelwood Kirkmahoe Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) George Balmer Pauper and that the said George Balmer is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Manner wild excited, has made repeated attempts to injure himself and those around him. Imagines that he hears horses coming to on him &c &c

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His friends state on Sunday he made an attempt to strike Mr Anderson the Minister, also his wife, and other friends.

Name and Medical Designation, P Murray M

Place of Abode, Buccleuch St Lang

DATED this 15th day of Jany One thousand eight hundred and 67

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Smith being (1) Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Lauriewood Kirkmahoe in the County of Dumfries, seen and personally examined George Balmer; and that the said George Balmer person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Smith M.D.

DATED this 13 day of January One thousand eight hundred and 67

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) George Douglas McGhie Inspector of Poor Parkmahoe Certificates under the hands of John Smith and Patrick Murray, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) George Balmer, Labourer, Lauriewood, Dumfries and that the said George Balmer is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Balmer as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Balmer which accompanied the said Petition.

DATED this Sixteenth day of January One thousand eight hundred and Sixty Seven

J. P. Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict., Cap.* 71., *Sect*, 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of Alex Ferguson Inspector of Dryfesdale humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Adamson is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Adamson to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) Alex Ferguson

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty third (3) day of January — One thousand eight hundred and sixty-seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	1 Margaret Adamson
2. Sex and Age,	2 Female - about 20 years
3. Married, Single, or Widowed,	3 Single
4. Condition of Life, and previous Occupation (if any),	4 No occupation - living with her uncle in Lochrbre and also with another uncle in Moffat
5. Religious Persuasion, so far as known,	5 Belonging to the United Presbyterian Church of Scotland
6. Previous Place of Abode,	6 Lochrbre and Moffat
7. Place where Found and Examined,	7. Lochrbre
8. Length of time Insane,	8. Symptoms of mental derangement have been noticed for two or three weeks
9. Whether first attack,	9. Third attack
10. Age (if known) on first Attack,	10. About sixteen years of age
11. When and where previously under Examination and Treatment,	11 At Southern Counties Asylum Dumfries on occasion of former attacks
12. Duration of existing Attack,	12 About three weeks
13. Supposed Cause,	13. Not known
14. Whether subject to Epilepsy,	14. Not known
15. Whether Suicidal,	15 No.
16. Whether Dangerous to others,	16. No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	17 Parish of Dryfesdale, County of Dumfries
18. Date of becoming Chargeable,	18. On occasion of first attack
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	19. Thomas Gardiner Stationer Lochrbre Mother presently in Lord John Adamson Painter Moffat
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, Alex Ferguson

DATED this 23 day of January One thousand eight hundred and sixty seven

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James T. Wilson being a (1) Surgeon. Licentiate of the Royal College of Surgeons and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Lockerbie in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Margaret Adamson and that the said Margaret Adamson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) a low depressed state of mind - very restless - sleepless - these indications being the premonitory symptoms of two previous attacks of insanity requiring her friends supervision and re

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

facts communicated by her brother and uncle

(SIGNED) *Name and Medical Designation,* Jas. T. Wilson, Surgeon

Place of Abode, Lockerbie

DATED this 23d day of January One thousand eight hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Buccleuch being a (1) Doctor of Medicine, University of Glasgow and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Forkerbie in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Margaret Adamson and that the said Margaret Adamson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Very restless, and excited state of mind, sleepless, has taken little or no food for some days.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Her brother Uncle say that on two previous occasions she was attacked in the same manner, and required restraint.

(SIGNED) *Name and Medical Designation,* William Buccleuch

Place of Abode, Forkerbie

DATED this 28th day of January One thousand eight hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case of the said is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Alexander Ferguson Inspector of Poor Dryfesdale Certificates under the hands of James H. Wilson and William Malindor, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret Adamson (a pauper) and that the said Margaret Adamson is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Adamson as a Patient into the (6) public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Adamson which accompanied the said Petition.

(SIGNED) J. Wm P. Trotter

DATED this twenty third day of January One thousand eight hundred and sixty seven

To the Superintendent of the (7) public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

Margaret Adamson

January

1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries and his Substitutes,—

The Petition of Maxwell Wright, Farmer, Collochan, Kirkgunzeon, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Samuel Wright, Farmer, Bonerick, Kirkgunzeon, your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Samuel Wright to the Crichton Institution Dumfries and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Maxwell Wright

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Thirtieth (4) day of January One thousand eight hundred and Sixty seven.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Samuel Wright.
2. Sex and Age,	Male - aged about fifty eight years
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Farmer
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Bonerick
7. Place where Found and Examined,	Bonerick
8. Length of time Insane,	About three months
9. Whether first Attack,	Yes - the first.
10. Age (if known) on first Attack,	Fifty eight years
11. When and where previously under Examination and Treatment,	never - nowhere.
12. Duration of existing Attack,	Three months
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no - would likely become so.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	none
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Maxwell Wright Farmer Collochan a Brother. No member of family ever insane except the said Samuel Wright.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirtieth day of January One thousand eight hundred and Sixty seven.

(*To be signed by Party applying*) Maxwell Wright

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Marshall
being a (1) Graduate of the Faculty of Physicians Surgeons Glasgow and College of St Andrews
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Bonerock Parish of Irongray in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Samuel Wright Farmer and that the said Samuel Wright is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks incoherently Imagines that he is going to be married and has partly invited to the wedding. Continues in most restless state and sometimes becomes very

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brothers state that on the night he he wrestled with them all night and so attempted violence

Name and Medical Designation, Marshall M.D.

Place of Abode, Dumfries

DATED this 28th day of January One thousand eight hundred and Sixty seven years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Dumfries Dumfries in the County of separately from any other Medical Practitioner visited and personally examined (4) Samuel Wright Farmer Irongray and that the said Samuel Wright is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is restless incoherent, and labouring under delusion. Believes that he is about to be married, consistently with the delusion, arranges & conducts in action.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His Medical Attendant, and also his Brother inform me that he is at times violent and difficulty restrained from ~~violence~~ doing injury those around him

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dumfries

DATED this 28th day of January One thousand eight hundred and Sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Marshall and [illegible] College of Physicians & Surgeons Glasgow
being (1) Graduate of the Faculty of Physicians & Surgeons Glasgow
hereby certify, on soul and conscience, that I have this day, at (2) Benrioch
in the County of Kirkcudbright, seen and personally examined
Samuel Wright, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Dated this 25th day of January One thousand eight hundred and Sixty seven

(1) State medical qualification. (2) State place of examination.

William Marshall M.D. & C.M.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexander Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Maxwell Wright
Farmer Collochan Dreghorn
Certificates under the hands of William Marshall
and John Dickson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Samuel Wright Farmer Benrioch Drongray and that the said
Samuel Wright is a (5) person of unsound mind and a Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Samuel Wright as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Samuel Wright which accompanied the said Petition.

Dated this Thirtieth day of January One thousand eight hundred and Sixty seven

J. Alex. Trotter.

To the Superintendent of the (7) Public
Asylum of Crichton Institution
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Samuel Wright

28/1/67

25th January

1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes.*

The Petition of James Austin Inspector of poor for the Closeburn humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Kennedy Pauper residing at Park parish of Closeburn is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Isabella Kennedy to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(1) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

James Austin Inspector of Poor

Dated this Twenty Eighth (3) day of January One thousand eight hundred and Sixty Seven

(3) The date of the petition must be within fourteen clear days following the dates of Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Isabella Kennedy
Sex and Age,	Female 59
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Old door worker
Religious Persuasion, so far as known,	Free Church
Previous Place of Abode,	Closeburn Village
Place where Found and Examined,	Park
Length of time Insane,	More or less for the last 7 or 8 years
Whether first Attack,	Yes
Age (if known) on first Attack,	52
When and where previously under Examination and Treatment,	Southern Counties Asylum
Duration of existing Attack,	Upwards of 12 Months
Supposed Cause,	Constitutional
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	Not generally
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Closeburn
Date of becoming Chargeable,	15th May 1863
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Agnes Sharp or Kennedy Park Mother No
Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Twenty Eighth day of January One thousand eight hundred and Sixty Seven

(To be signed by Party applying) James Austin Inspector of Poor

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James Gilchrist M.D. being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) Isabella Kennedy, Pauper from Parish of Closeburn and that the said Isabella Kennedy is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is sullen, taciturn and restless, in reply to urgent questions speaks with hesitancy and in whispers.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She is reported to have been violent and dangerous at home and her attendant states that she is very restless especially at night.

Name and Medical Designation, J. Gilchrist M.D.

Place of Abode, Crichton House, Dumfries

DATED this Twenty ninth day of January One thousand eight hundred and Sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, William Ramsay McCrab M.D. being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) Isabella Kennedy, Pauper from Parish of Closeburn and that the said Isabella Kennedy is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is more silent, and restless, answering any question of importance with reluctance and in a whisper.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her attendant reports her to be restless and does not sleep at night.

Name and Medical Designation, William Ramsay McCrab M.D.

Place of Abode, Crichton Institution, Dumfries

DATED this Thirtyth day of January One thousand eight hundred and Sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Thomas Boyle Grierson being (1) Lic^t of Royal Coll^ge of Surgeons of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Park parish of Closeburn in the County of Dumfries, seen and personally examined Isabella Kennedy, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

T B Grierson

DATED this 28th day of January One thousand eight hundred and Sixty Seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Austin Inspector of Poor of the Parish of Closeburn Certificates under the hands of James Gilchrist and William Ramsay McNab, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Isabella Kennedy, Park of Closeburn, a Pauper and that the said Isabella Kennedy is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Isabella Kennedy as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Isabella Kennedy which accompanied the said Petition.

DATED this Thirty first day of January One thousand eight hundred and Sixty Seven

John P Trotter

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1

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Isabella Kennedy

28/1/67

28th January

1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict., Cap.* 71., *Sect*, 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries. *and his Substitutes*—

The Petition of William Graham Inspector of the Poor Haddon humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Rogerson Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Isabella Rogerson, Pauper to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) Wm Graham, Inspector of the Poor Haddon

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty second (3) day of January One thousand eight hundred and Sixty seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Isabella Rogerson
2. Sex and Age,	Female — 33 Years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Broadmeadows
7. Place where Found and Examined,	Broadmeadows
8. Length of time Insane,	No
9. Whether first attack,	Not Known
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	about 2 Years
12. Duration of existing Attack,	Not Known
13. Supposed Cause,	No
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Haddon
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	14 January 1867
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	David Rogerson Broadmeadows Ecclefechan Father — Has a Mother in Asylum at Newcastle on Tyne
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Twenty second (SIGNED)* Name, Wm Graham

DATED this ~~Fifteenth~~ day of January One thousand eight hundred and Sixty Seven

* To be signed by the Party applying.

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Young being a (1) Licentiate of the Royal College of Surgeons. Edinburgh and being in actual practice as a (2) Surgeon &c hereby certify, on soul and conscience, that I have this day, at (3) Broadmeadow in the parish of Hoddam in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Isabella Rogerson. Pauper. residing at Broadmeadow and that the said Isabella Rogerson is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Nervous excitement. She imagines that she is the victim of invisible agents who endeavour day and night to stab her to the heart or to strangle her

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

(SIGNED) *Name and Medical Designation,* William Young. Surgeon

Place of Abode, Ecclefechan

DATED this twelfth day of January One thousand eight hundred and Sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Rae Anderson being a (1) Doctor of Medicine and Licentiate of the Faculty of Physicians & Surgeons of Glasgow and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Broadmeadow Dumfries in the County of separately from any other Medical Practitioner visited and personally examined (4) Isabella Rogerson Pauper residing at Broadmeadow and the said Isabella Rogerson is an Insane person and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her conduct & appearance of countenance, and demeanour indicate mental derangement. She imagines that she is a demoniac agent for assembling of gentlemen whom she names and wants to get guilt, and that she is a practising other [illegible] at Annan, which [illegible] her for a time but when [illegible] she is unhappy as ever.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her Sister - Mary Stewart says she takes a great deal of nonsense and sometimes gets suddenly into fits of passion without the slightest provocation.

(SIGNED) *Name and Medical Designation,* Jas. R. Anderson M.D. &c.

Place of Abode, Waterbeck.

DATED this fourteenth day of January One thousand eight hundred and Sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) William Graham Inspector of Poor Hoddam
Certificates under the hands of William Young
and James Rae Anderson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Isabella Rogerson residing at Broadmeadow Lanes and that the said Isabella Rogerson is a (5) Lunatic and an Insane person
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Isabella Rogerson as a Patient into the (6) Public — Asylum of Southern Counties — and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Isabella Rogerson — which accompanied the said Petition.

(SIGNED) J Pitcairn Trotter

DATED this Twenty third day of January One thousand eight hundred and sixty seven

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

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v Isabella Rogerson

30/1/67

30th January

1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,*—

The Petition of James Wightman

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Wightman

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thos Wightman to the Southern Counties Asylum and to sanction his admission into the said Asylum. ✗

(Signature) James Wightman ✗

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 31st (3) day of January One thousand eight hundred and Sixty Seven Years

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Thomas Wightman
2. Sex and Age,	Male aged 54
3. Married, Single, or Widowed,	Single never married
4. Condition of Life, and previous Occupation (if any),	Formerly a Farmer lately being Farm Servant
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Moffat Dale Roundstone foot
7. Place where Found and Examined,	Home Street Moffat
8. Length of time Insane,	About a week
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	one week
13. Supposed Cause,	difficult to state
14. Whether subject to Epilepsy,	Not previously until Saturday
15. Whether Suicidal,	Certainly dangerous
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not to.
18. Date of becoming Chargeable,	Jany 31st/67
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane, ✗	James Wightman Gieskine Brother By Moffat.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signature)* *Name,* James Wightman ✗

Dated this 31st day of January One thousand eight hundred and 67

* To be signed by the Party applying.

P.F.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, [illegible]

being a (1) [illegible]

and being in actual practice as a (2) [illegible]

hereby certify, on soul and conscience, that I have this day, at (3) [illegible]

in the County of [illegible]

separately from any other Medical Practitioner, visited and personally examined (4) [illegible]

and that the said [illegible] is a (5) [illegible]

and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) [illegible]

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

(SIGNED) *Name and Medical Designation,* [illegible]

Place of Abode, [illegible]

DATED this [illegible] day of [illegible] One thousand eight hundred and [illegible]

MEDICAL CERTIFICATE, No. II.

I, the undersigned,

being a (1)

and being in actual practice as a (2)

hereby certify, on soul and conscience, that I have this day, at (3)

in the County o

separately from any other Medical Practitioner visited and personally examined (4)

and tha

the said

is a (5)

and a proper person to be detaine under Care and Treatment, and that I have formed this opinion upon the followin grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

(SIGNED) *Name and Medical Designation,* _____

Place of Abode, _____

DATED this day of One thousand eigh hundred and

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that [illegible] is a (1) [illegible] hereby further certify that the Case of the said [illegible] is One of Emergency, and I recommend the immediate removal of the said [illegible] to an Asylum accordingly.

Name, [illegible]

Place of Abode, [illegible]

Dated this [illegible] day of [illegible] One thousand eight hundred and [illegible]

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, (2)
of the (3)
having had produced to me, with a Petition at the instance of (4)

Certificates under the hands of
and , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5)
and that the said
is a (5)

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said as a Patient into the (6) Asylum of and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said which accompanied the said Petition.

(SIGNATURE)_____

Dated this day of One thousand eight hundred and

To the Superintendent of the (7)
Asylum of

---

(2) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(3) State whether a County or Stewartry.
(4) Insert Name and Designation.
(5) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

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Thomas Wightman

31/1/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of James Wightman, Gretkine, Moffat humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Wightman your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Wightman to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

James Wightman

Dated this fifth (4) day of February One thousand eight hundred and Sixty-seven

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Thomas Wightman
2. Sex and Age,	Male - about 54 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	formerly a farmer - lately being a farm servant
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Lowndestone foot - Moffatdale
7. Place where Found and Examined,	Stone street - Moffat
8. Length of time Insane,	about a week
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	54
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	One week
13. Supposed Cause,	Difficult to state
14. Whether subject to Epilepsy,	not previously until Saturday
15. Whether Suicidal,	
16. Whether Dangerous to others,	certainly dangerous
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not so
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Wightman, Gretkine near Moffat, a brother none
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this fifth day of February One thousand eight hundred and Sixty seven

(To be signed by Party applying) James Wightman

P. P.

Thomas Wightman

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, John Dickson
being a (1) Graduate of the Edinburgh University
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern
Counties Asylum
Dunsfrie
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Thomas Wightman
Farmer Grad - Moffat
and that
the said Thomas Wightman is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Incoherence, Delusions of various kinds, i.e. That people around him are conspiring to injure him, is restless, and unsettled

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His Attendant at the Southern Counties A
informs me that he is at times very dep
believes that he is apt to die

Name and Medical Designation, John Dickson M.D

Place of Abode, Castle Street Dumf

DATED this 2nd day of February One thousand eight hundred and sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, D. Mackie Surgeon R.N. Ret
being a (1) Surgeon in General Practice
and being in actual practice as a (2) Surgeon in General Practice
hereby certify, on soul and conscience, that I have this day, at (3) Hyde St
Dumfries
in the County o
separately from any other Medical Practitioner
visited and personally examined (4) Thomas Wightman
Farmer Moffat
and the
the said Thos Wightman
is a (5) Lunatic
and a proper person to be detaine
under Care and Treatment, and that I have formed this opinion upon the followin grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Incoherence Delusions & Suspicions of various kinds
Violent & Excited when spoken to

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Same Communicated

Name and Medical Designation, D. Mackie Surgeon

Place of Abode, Hyde Street Dumf

DATED this 31st day of January One thousand eig hundred and 67

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Fickson
being (1) a Graduate of the Edinburgh University
hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum
in the County of Dumfries, seen and personally examined
Thomas Nightenlan, Farm Servant, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Fickson M.D

Dated this 2nd day of February One thousand eight
hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, (1)
of the (2)
having had produced to me, with a Petition at the instance of (3)

Certificates under the hands of
and , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
and that the said
is a (5)

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE YOU to receive the said as a Patient into the (6) Asylum of and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said which accompanied the said Petition.

Dated this day of One thousand eight
hundred and

To the Superintendent of the (7)
Asylum of

---

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Thomas Wightman

31st January

1867

N.B.—This FORM shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Shiriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of Thomas Gillespie Holm St humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Wightman residing at Home Street Moffat, your Petitioner's (3) Uncle is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Wightman to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

Thomas Gillespie

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

DATED this 6th (4) day of February One thousand eight hundred and sixty seven

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Thomas Wightman
2. Sex and Age,	male - about 54
3. Married, Single, or Widowed,	single -
4. Condition of Life, and previous Occupation (if any),	Formerly a farmer - lately farm servant
5. Religious Persuasion, so far as known,	Member of Established Church
6. Previous Place of Abode,	Roundstone foot Moffatdale
7. Place where Found and Examined,	Home street Moffat, & at the Asylum
8. Length of time Insane,	about a week
9. Whether first Attack,	first
10. Age (if known) on first Attack,	54 years
11. When and where previously under Examination and Treatment,	at home
12. Duration of existing Attack,	about a week
13. Supposed Cause,	difficult to say
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	
16. Whether Dangerous to others,	Yes -
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Wightman, Greskine, near Moffat - his brother. none
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this Sixth day of February One thousand eight hundred and Sixty-seven

(*To be signed by Party applying*) Thomas Gillespie

P.P.

Thomas Wightman

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson
being a (1) Graduate of the Edinburgh Univers
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Castle Street
Dumfries in the County
Dumfries separately from any other Medical Practitione
visited and personally examined (4) Thomas Wightman Farm
Servant Moffat and th
the said Thomas Wightman is a (5) Lunatic
and a proper person to be detaine
under Care and Treatment, and that I have formed this opinion upon the followin
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Is depressed
Reserved. For about a week was excitab
dangerous. He is suspicious of those arou
him and believes that there are plots for
injure him

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His Attendant informs me that h
mind is crowded with delusions of varie
chiefly of conspiracies & plots to injure h

Name and Medical Designation, John Dickson MD

Place of Abode, Castle Street Dumf

DATED this 6th day of February One thousand eig
hundred and Sixty seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Smith Kerr
being a (1) Doctor of Medicine and Lic: Roy: Col of
Surgeons Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Castle Street
Dumfries in the County
Dumfries separately from any other Medical Practition
visited and personally examined (4) Thomas Wightman
Farm servant Moffat and th
the said Thomas Wightman is a (5) Lunatic
and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the followi
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
He is greatly depressed, Is dull
in answering questions, Complains
having been very excited and out of sor

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
His attendant says he was greatly exc
a few days ago, & was full of delusions

Name and Medical Designation, William S. Kerr

Place of Abode, Buccleuch St. Dumfries

DATED this 6th day of February One thousand ei
hundred and Sixty Seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson being (1) a Graduate of the Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) Castle St in the County of Dumfries, seen and personally examined Thomas Wightman Farm Servant Birkhill and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this 6th day of February One thousand eight hundred and Sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I Landerdale Maitland Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Thomas Gillespie Holm St Moffat Certificates under the hands of John Dickson and William Smith Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Thomas Wightman residing at Holm St Moffat and that the said Thomas Wightman is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Wightman as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Wightman which accompanied the said Petition.

DATED this Sixth day of February One thousand eight hundred and sixty seven

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

L Maitland

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Thomas Wightman
31/~~4~~/57
~~February~~
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of Midlothian the (2) Stewartry of Roxenburgh and his Substitutes.

The Petition of James Bell Inspector of Poor

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Ferguson Cooper who is my relation of great Distress

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Ferguson Cooper to the Southern Counties Asylum Carmyle and to sanction his admission into the the said Asylum.

James Bell Inspector

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this twenty fourth day of January One thousand eight hundred and Seventy Seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Ferguson Cooper
2. Sex and Age,	62 years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Day Labourer & Cattle driver
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	has resided in the same place for Fifteen
7. Place where Found and Examined,	Crookedstone
8. Length of time Insane,	about Two months
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	see above
11. When and where previously under Examination and Treatment,	has been under Treatment at Carstairs Seven Yrs 9th ult Last
12. Duration of existing Attack,	Apprehension of Coming to want
13. Supposed Cause,	not subject to Epilepsy
14. Whether subject to Epilepsy,	attempted to drown himself
15. Whether Suicidal,	quiet & harmless
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkpatrick Durham Parish
18. Date of becoming Chargeable,	9th October last
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	his sister Agnes Ferguson keeps House & Gorgens Glenning a mile & a half from Crookedstone
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Patients father was Insane for about Three months Ago

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Twenty fourth day of January One thousand eight hundred and Seventy Seven

(*To be signed by Party applying*) James Bell Inspector

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James D Robertson M.D. and being a (1) L.R.C.S.E. and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Forfar in the County Kirkcaldyshire. separately from any other Medical Practitioner visited and personally examined (4) John Ferguson Pauper and the said John Ferguson is a (5) Person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He states that he does not believe that the food he takes in through him. He always appears melancholic,

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) attempted to drown himself. I was told this by his sister, and his neighbours Mrs Mitchell.

Name and Medical Designation, James D Robertson M.D. L.R.C.S.E.

Place of Abode, Kirkpatrick Durham

Dated this 21st day of January One thousand eight hundred and sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James Findlay M.D. being a (1) a Member of College of Physicians Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Rockcliffe in the County Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) John Ferguson Pauper and the said John Ferguson is a (5) Person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: [illegible]

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) I was told by his sister that he often threatened to drown himself but now more by melancholy mania

Name and Medical Designation, James Findlay M.D.

Place of Abode, Castle Douglas

Dated this 23 day of January One thousand eight hundred and sixty seven.

* He often threatened to drown himself through the influence of delusions

x Eighteen months detained

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of . One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar. (1) Esquire Steward Substitute
of the (2) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3) James Bell
Inspector of Poor,
Certificates under the hands of James D. Robertson
and James Friday , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
John Ferguson (a Pauper)
and that the said John Ferguson is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Ferguson as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Ferguson which accompanied the said Petition.

DATED this twenty sixth day of January One thousand eight hundred and Sixty Seven years.

W H Dunbar SS

To the Superintendent of the (7) Southern Counties Asylum of Dumfries.

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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John Ferguson
2nd February
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of* ~~the~~ (2) Wigtown and Kirkcudbright *and his Substitutes*, for Wigtownshire

The Petition of William Mackie Inspector of Poor for the parish of Wigtown humbly sheweth that it appears, from the subjoined Statement and accompanying Medical Certificates, that Catherine Murphy or Gorman, a pauper ~~your Petitioner's~~ (3) residing at High Street, Wigtown is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Catherine Murphy or Gorman to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Wm Mackie Insp. of Poor

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Eighth (4) day of February One thousand eight hundred and Sixty seven years

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Catherine Murphy or Gorman
2. Sex and Age,	Female aged 48 years
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	A pauper, previously a domestic Servant
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	Wigtown
7. Place where Found and Examined,	Wigtown
8. Length of time Insane,	Has been exhibiting symptoms of melancholy for least two months or so
9. Whether first attack,	
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	See no 8
13. Supposed Cause,	not Known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	neither at present but Med. Officer states she may become so at any moment.
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Wigtown
18. Date of becoming Chargeable,	21 Decr 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Has a sister, residence unknown. No member of the family known to have been insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Seventh day of February One thousand eight hundred and Sixty seven years

(To be signed by Party applying) Wm Mackie Insp. of Poor

P. p.

John Ferguson

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Rob. D. Rose being a (1) Licentiate of the Royal College of Su Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) High Stre Wigtown ——— in the County Wigtown ——— separately from any other Medical Practitio visited and personally examined (4) Catherine Murphy or Gor pauper residing at High Street Wigtown and t the said Catherine Murphy or Gorman is a (5) person of mind ——— and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She labours deep depression of melancholy and her peculiar physiognomy is strongly characteristic of mental abe She rarely answers when spoken to & cannot be led into conversation on any subject.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) her attendant Mrs Fulton informs me tha has a difficulty in getting her to take her food would not ask food for days & has also great difficulty in managing her

Name and Medical Designation, Rob. D. Rose Surg

Place of Abode, Wigtown

DATED this 4th day of February One thousand e hundred and sixty seven years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Samuel Brown Gr being a (1) a Graduate of the University of Ed and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) High Wigtown Wigtown in the Count separately from any other Medical Practitio visited and personally examined (4) Catherine Murphy or G Pauper residing at High Street Wigtown and the said Catherine Murphy or Gorman is a (5) person of un Lunacy Insane and a proper person to be deta under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She labours d deep Melancholy — hardly speaks when spoken often refuses food & Medicine takes little Was a patient of mine on the 4th

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mrs Fulton Attendant informs me that she is unable to attend to herself Gloomy & despondent

Name and Medical Designation, Wm. Brown M.D.

Place of Abode, Wigtown

DATED this Seventh day of February One thousand e hundred and Sixty Seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Thomas Murray Erskine (1) Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) William Mackie Inspector of Poor for the Parish of Wigtown
Certificates under the hands of Robert D. Rose Surgeon
and Samuel Snowdon M.D., being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Catherine Murphy or Gorman pauper and that the said Catherine Murphy or Gorman is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Catherine Murphy or Gorman as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Catherine Murphy or Gorman which accompanied the said Petition.

DATED this eighth day of February One thousand eight hundred and sixty seven

Thos Murray

To the Superintendent of the (7) Southern Counties Asylum of Dumfries.

3

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/268

Catherine Murphy or Gorman

9/2/69

1/268

Catherine Murphy or Gorman

9th February

1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Wigton and of Kirkcudbright *and his Substitutes,—*

The Petition of John Hunter

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas McNay your Petitioner's (3) pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas McNay to the R. C. Asylum Dumfries and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

John Hunter Inspector of Poor Kirkton.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this ninth (4) day of Febuary One thousand eight hundred and sixty seven.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Thomas McNay
2. Sex and Age,	25 Male
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Nilson Square
7. Place where Found and Examined,	in Ann Street
8. Length of time Insane,	Childhood
9. Whether first Attack,	
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Under the Supervision of the Board of Lunacy
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkmabreck
18. Date of becoming Chargeable,	Above 12 years
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Isabella Muir or McNay his mother
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this ninth day of Febuary One thousand eight hundred and sixty seven

(*To be signed by Party applying* John Hunter

F. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, ~~[illegible]~~ William Cumming being a (1) Doctor of Medicine of Glasgow Univ and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) the Poor House Kirkcudbright in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Thomas M'Nae, a Pauper and the said Thomas M'Nae is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) His mind is of a weak character he evidently is of a very irritable temperament and has a craving for whiskey accordingly he is very violent when under its influence he says himself that he is very violent when he takes the chance of revenging himself on people who have offended him at any time

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) From his sister that at times his mother and the other members of his family are afraid of their lives, that if he is tormented on the street he comes home and threatens them, and has on several occasions threatened them with knives, even when sober but more so when under the influence of drink Mr Hunter the Inspector, Corroborates the above and says further that when he is under the influence of drink the Inhabitants of Parkhouse are very much afraid of him

Name and Medical Designation, William Cumming M.D. C.M.

Place of Abode, Kirkcudbright

DATED this 9th day of February One thousand eight hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Shaw being a (1) Member of the Royal College of Physicians in Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) the Poor House Kirkcudbright in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Thomas Mc Nae Pauper and the said Thomas Mc Nae is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Observes imbecility of Intellect is conversing rationally and is putting simple questions in Arithmetic - He can understand & execute simple orders & converse but cannot converse fluently - Generally he answers direct. The appearance & Countenance of General Languor & indications of a temper that could become furious under ill treatment

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) That Thomas Mc Nae has on more than one occasion threatened violence to his family & at least one he threatened his sisters with a knife at times particularly when he is under the influence of drink & does so from what I am informed by his sister. Mr Hunter the Inspector of the Poor has also informed me that he has committed a violent assault on his mother & has threatened to kill her & has on several occasions behaved in a violent manner to the inmates of the House when under the influence of drink

Name and Medical Designation, John Shaw M.D.

Place of Abode, Kirkcudbright

DATED this Eleventh day of February One thousand eight hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hy Smith Dunbar (1) Esquire, Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) John Hunter

Certificates under the hands of William Cumming and John Hand, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Hannah McNae (a Pauper) and that the said Hannah McNae is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Hannah McNae as a Patient into the Southern Counties Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Hannah McNae which accompanied the said Petition.

DATED this eleventh day of February One thousand eight hundred and Sixty seven years.

W H Dunbar

To the Superintendent of the (6) Southern Counties Asylum of Dumfries.

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Thomas McNay
11th February
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of Robert McGregor, Inspector of Poor of St Mungo humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Graham, Farm Servant your Petitioner's (3) charge being a pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Graham to the Southern Counties Asylum, and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Robt McGregor

DATED this Thirteenth (4) day of February One thousand eight hundred and Sixty Seven

(4) The date of the Petition must be within a fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Graham
2. Sex and Age,	Male — 16½ years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Farm Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Parish of Kirkmichael
7. Place where Found and Examined,	St Mungo
8. Length of time Insane,	About Ten days
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	ten days
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	Not aware of
15. Whether Suicidal,	No —
16. Whether Dangerous to others,	Paroxysms of great violence
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	St Mungo
18. Date of becoming Chargeable,	Tenth Feb- 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Graham — Father Labourer Upper Nithvale St Mungo
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	No member of family known to have been so affected

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirteenth day of February One thousand eight hundred and Sixty Seven

(*To be signed by Party applying* Robt McGregor

Inspector P.P. of Poor

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Ogle Bell Irv[illegible]
being a (1) Licentiate of the Royal College of Surgeons [illegible]
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Upper Milk Vale in the County [illegible] Dumfries separately from any other Medical Practitione[illegible]
visited and personally examined (4) John Graham Farm Servant - a Pauper and th[illegible]
the said John Graham is a (5) Lunatic and a proper person to be detaine[illegible]
under Care and Treatment, and that I have formed this opinion upon the followin[illegible]
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Excitement and Incoherency on the subject of Religion

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Paroxysms of Violence requiring two or three men to prevent him injuring himself or others - the Father being Informant

Name and Medical Designation, William Ogle Bell [illegible] Surgeon

Place of Abode, Bankside, St. Mi[illegible]

DATED this Thirteenth day of February One thousand eigh[illegible] hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Thomson Nelson
being a (1) Licentiate of the Royal College of Surgeons Ed[illegible]
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Upper Milk Va[illegible] in the Parish of Saint Ellengo in the County [illegible] Dumfries separately from any other Medical Practitione[illegible]
visited and personally examined (4) John Graham Farm Servant - a pauper and th[illegible]
the said John Graham is a (5) Lunatic and a proper person to be detaine[illegible]
under Care and Treatment, and that I have formed this opinion upon the followin[illegible]
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Incoherency on [illegible] subject of religion

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
None

Name and Medical Designation, James Thomson Nelson

Place of Abode, Surgeon Lockerbie

DATED this 13th day of February One thousand eigh[illegible] hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, being (1) a Licentiate of the Royal College of Surgeons Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) [illegible] in the County of Dumfries, seen and personally examined John Graham Farm Servant a Pauper, and that the said person ~~is~~ of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

William Ogle Bell Irving
Surgeon

DATED this Thirteenth day of February One thousand eight hundred and Sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Sitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert McGregor Inspector of Poor St Mungo Certificates under the hands of William Ogle Bell Irving and James Thomson Wilson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) John Graham Farm Servant (a pauper) and that the said John Graham is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Graham as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Graham which accompanied the said Petition.

DATED this Fourteenth day of February One thousand eight hundred and Sixty seven

Wm D Miller

To the Superintendent of the (7) Public Asylum of Southern Counties at Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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John Graham
14th February
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Stewart. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) ~~Dumfries~~ Shire of Dumfries *and his Substitutes,*—

The Petition of Robert Kirkpatrick, Kirkpatrick village, Closeburn humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Archibald Kirkpatrick, Shepherd ~~by~~ has for the last 20 years ~~affliction~~ patient previous to employment your Petitioner's (3) Father is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Archibald Kirkpatrick to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

Robert Kirkpatrick

(1) State degree of relationship or other parity in which Petitioner stands to Lunatic.

(2) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this fourteenth (4) day of February One thousand eight hundred and Sixty seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Archibald Kirkpatrick
2. Sex and Age,	Male. 74 or 75 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Shepherd
5. Religious Persuasion, so far as known,	Free church, member of
6. Previous Place of Abode,	Kirkpatrick Village, Closeburn
7. Place where Found and Examined,	Kirkpatrick Village Closeburn,
8. Length of time Insane,	some time, untowardly time March last
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	73 or 74
11. When and where previously under Examination and Treatment,	never nowhere,
12. Duration of existing Attack,	several months
13. Supposed Cause,	
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	~~Will~~ Is obstinate and has threatened his family and neighbours frequently
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not a pauper.
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Robert Kirkpatrick Kirkpatrick village, Closeburn, his son— Has a son at present in the Asylum
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this fourteenth day of February One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) Robert Kirkpatrick

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Thomas Boyle Grierson being a (1) Licentiate of the Royal College of Surgeons and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Kirkpatrick in Closeburn in the County Dumfries separately from any other Medical Practitio visited and personally examined (4) Archibald Kirkpatrick and the said Archibald Kirkpatrick is a (5) person unsound mind and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Ideas conf supposes and believes many things that a not, and acts accordingly

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His son Robert Kirkpatrick and others inform that he would wander from home, unless prev is at times violent when opposed — that he bel many things that are not, such as that his d has been married.

Name and Medical Designation, B Grierson

Place of Abode, Thornhill.

DATED this Thirteenth day of February One thousand ei hundred and Sixty Seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson being a (1) graduate of the Edinburgh Univ and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Asylum Dumfries in the County Dumfries separately from any other Medical Practitio visited and personally examined (4) Archibald Kirkpatrick Shepherd — Closeburn and the said Archibald Kirkpatrick is a (5) Lunatic and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) There is a c amount of paralysis — especially of the tou He has exalted notions of his social, pe Believes his possessions to be unlimited — his tr immorable, and millions of money pass through

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) He is reported by the Medical Officer to be a and sleepless, and continually occupied wi his delusions.

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dumfri

DATED this 15th day of February One thousand ei hundred and Sixty Seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Thomas Boyle Grierson being (1) Licentiate of the Royal College of Surgeons Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Kirkpatrick in the County of Dumfries, seen and personally examined Archibald Kirkpatrick, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

T B Grierson

DATED this Thirteenth day of February One thousand eight hundred and Sixty Seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pleasance Trotter, Esquire (3) Advocate Sheriff Substitute of the (4) County of Dumfries having had produced to me, with a Petition at the instance of (5) Robert Kirkpatrick, Kirkpatrick Village, Closeburn Certificates under the hands of Thomas Boyle Grierson and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Archibald Kirkpatrick Shepherd Closeburn and that the said Archibald Kirkpatrick is a (7) person of unsound mind & not a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Archibald Kirkpatrick as a Patient into the (8) Public - Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Archibald Kirkpatrick which accompanied the said Petition.

DATED this fifteenth day of February One thousand eight hundred and Sixty seven years.

J P Trotter

To the Superintendent of the (9) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

2/1

Archibald Kirkpatrick
14th February
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict. Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Roxburgh *and his Substitutes,*—

The Petition of Adam Grieve, Labourer, Newcastleton,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret ~~Grieve~~ Amos or Grieve is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Grieve or Amos to the Public Asylum of Dumfries and to sanction her admission into the said Asylum.

(SIGNED) + Adam Grieve

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this fifteenth (3) day of February One thousand eight hundred and Sixty seven years.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Margaret ~~Grieve~~ Amos or Grieve
2. Sex and Age,	Female 52
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	———
5. Religious Persuasion, so far as known,	A member of the U.P. Church of Scotland
6. Previous Place of Abode,	Newcastleton
7. Place where Found and Examined,	Newcastleton
8. Length of time Insane,	October 1866
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	52
11. When and where previously under Examination and Treatment,	———
12. Duration of existing Attack,	Three or four months
13. Supposed Cause,	Severe illness
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	———
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Adam Grieve Labourer Townhead, Newcastleton, Her Husband, None of her family were ever known to be Insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Private patient & not chargable to any Parish

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, + Adam Grieve

DATED this fifteenth day of February One thousand eight hundred and Sixty-seven years.

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Thomas C Leyton
being a (1) Member of the Royal College of Surgeons of Edinburgh & Registered
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Newcastleton Parish of Castleton in the County of Roxburgh separately from any other Medical Practitioner, visited and personally examined (4) Margaret Grieve or Amos who is of unsound mind and that the said Margaret Grieve or Amos is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Restlessness & excitability & Incoherency and want of stability of mind

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Attempts her life by drowning &c from information by the family

(SIGNED) *Name and Medical Designation,* Thomas C Leyton Surgeon

Place of Abode, Newcastleton

DATED this 13th day of February One thousand eight hundred and Sixty Seven.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise, as the case may be.*
(3) *Insert the street and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper state so.*
(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*
(6) *State the facts.*
(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, John Grant-
being a M. D. of the University of Edin. &c
and being in actual practice as a (2) Physician & Surgeon &c
hereby certify, on soul and conscience, that I have this day, at (3) Newcastleton in the County of Roxburgh separately from any other Medical Practitioner, visited and personally examined (4) Mrs Margaret Grieve and that the said Mrs. Margt Grieve is a (5) in a State of "unsound mind" and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) inconsistency in expressions & actions during my visit & examination -

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Attempt at suicide made known to me by her son & daughter -

(SIGNED) *Name and Medical Designation,* Grant - M. D. &c

Place of Abode, Hawick

DATED this 15th day of February One thousand eight hundred and Sixty Seven -

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise, as the case may be.*
(3) *Insert the street and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper state so.*
(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*
(6) *State the facts.*
(7) *State the information, and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name, _____

Place of Abode, _____

Dated this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Francis Russell Esquire (3) Sheriff Substitute
of the (2) County of Roxburgh
having had produced to me, with a Petition at the instance of (3) Adam Greive, Labourer, Townhead, Newcastleton
Certificates under the hands of Thomas R. Taylor, Surgeon, Newcastleton and John Grant M. D. Hawick, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret Amos or Greive and that the said Margaret Amos or Greive is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Amos or Greive as a Patient into the (6) Public Asylum of Dumfries (Southern counties) and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Amos or Greive which accompanied the said Petition.

(Signed) Fran. Russell

Dated this eighteenth day of February One thousand eight hundred and sixty seven

To the Superintendent of the (7) Public Asylum of Dumfries (Southern counties)
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

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Margaret Amos or Grieve
28th February
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of William Faulds, Gamekeeper, Cornwall, Stewarton humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Faulds, Student your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Faulds to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

William Faulds

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this twenty first (4) day of February One thousand eight hundred and Eighty Seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	George Faulds
2. Sex and Age,	male - 23 or thereabouts
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Student in Arts
5. Religious Persuasion, so far as known,	Ch. P.
6. Previous Place of Abode,	Castle Kennedy
7. Place where Found and Examined,	Cornwall Dumfries
8. Length of time Insane,	about 3 months
9. Whether first attack,	~~23 years~~ Yes
10. Age (if known) on first Attack,	22 years
11. When and where previously under Examination and Treatment,	Never and nowhere
12. Duration of existing Attack,	about 3 months
13. Supposed Cause,	Overstudy?
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Faulds, Game Keeper, Cornwall, his father - no
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this twenty first day of February One thousand eight hundred and Eighty seven

(*To be signed by Party applying*) William Faulds

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson being a (1) Graduate of the Edinburgh Univ and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) George Gaulds - Stude in Atty Cornwall and the said George Gaulds is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is depr and taciturn - His mind is absent and distracted, and it is with great difficulty and slowness that he realizes

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His father informs me that he has been this condition for three months

Name and Medical Designation, John Dick

Place of Abode, Castle Street D

DATED this 21 day of February One thousand eig hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a proper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Smith Kerr being a (1) Doctor of Medicine and Lic: Roy: Coll: Surgns. Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) George Faulds, Stude Cornwall, and the said George Faulds is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is dep depressed, absent and morose. — Can scarcely be got to understand answer the simplest questions. —

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His friends say he has been in melancholic state for some time

Name and Medical Designation, William S Kerr

Place of Abode, Buccleuch St. Dumfr

DATED this 22nd day of February One thousand eig hundred and sixty seven. —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson
being (1) a Graduate of the Edinburgh University Asylum
hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties
in the County of Dumfries, seen and personally examined
George Faulds, Student in Arts, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this 21st day of February One thousand eight hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter, Esquire (1) Sheriff substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) William
Faulds Game Keeper Corsewald Stewarton
Certificates under the hands of John Dickson
and William Smith Kerr, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
George Faulds, Student at Arts, Corsewall and that the said
George Faulds is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Faulds as a Patient into the
(6) Public Asylum of Southern Counties Dumfries and I authorize
his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said ~~William~~
George Faulds which accompanied the said Petition.

DATED this Twenty third day of February One thousand eight hundred and sixty seven. One word deleted

John P Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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George Faulds
21st February
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap. 54, Sect. 14.*

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes.*—

The Petition of Peter Gordon, Inspector of Poor Kirkconnan Dumfriesshire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Duff.

(2) State degree of relationship or other cavity in which Petitioner stands to Lunatic.

your Petitioner's (2) pauper Lunatic is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Duff to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

Peter Gordon Insp of Poor

(3) The date of the petition must be within fourteen clear days following the dates of Medical Certificates.

DATED this 23d (4) day of February One thousand eight hundred and Sixty Seven

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STATEMENT.

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

Christian Name and Surname of Patient at length,	Margaret Duff
Sex and Age,	Female, 47
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Poor outdoor worker
Religious Persuasion, so far as known,	Protestant
Previous Place of Abode,	Kirkconnan
Place where Found and Examined,	Kirkconnan
Length of time Insane,	about 3 weeks
Whether first Attack,	no
Age (if known) on first Attack,	unknown
When and where previously under Examination and Treatment,	nowhere
Duration of existing Attack,	3 weeks or so
Supposed Cause,	unknown
Whether subject to Epilepsy,	no
Whether Suicidal,	no
Whether Dangerous to others,	Threatening to become so
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkconnan
Date of becoming Chargeable,	5th February 1867
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Rosanna Duff, Kirkconnan Sister none
Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this 23d day of February One thousand eight hundred and 67

(*To be signed by Party applying*) Peter Gordon

Insp of Poor

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

I, the undersigned, Robert B. Selby being a (1) M.D. & L.R.C.S.E. and being in actual practice as a (2) Medical Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Kirkcowan in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Margaret Duff, a pauper from the parish of Kirkcowan and the said Margaret Duff is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Delusions regarding various Parties in Ayrish — that they are in danger of being murdered — they have taken the clothes from her & on several occasions on talking

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Sleeplessness — Restlessness — Threatening to kill the Parish Clergyman — Delusions about various Parties as charged by [illegible]

Name and Medical Designation, Robt. B. Selby M.D. & L.R.C.S.E.

Place of Abode, Kirkcowan

DATED this 23 day of February One thousand eight hundred and Sixty seven —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

I, the undersigned, Samuel Finnon being a (1) member of the Royal college of Surgeons England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Margaret Duff, a pauper from the parish of Kirkcowan and the said Margaret Duff is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Great volubility and incoherence, suspicious, and the victim of persecution by all relations neighbours.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

The Inspector of Poor states that she is a most violent and dangerous, destructive to furniture and an annoyance to the whole

Name and Medical Designation, S. Finnon Med. C.S.

Place of Abode, Southern Counties Asylum

DATED this twenty third day of February One thousand eight hundred and Sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Robert B. Selby
being (1) M.D. & L.R.C.S.E.
hereby certify, on soul and conscience, that I have this day, at (2) Kirkcowan
in the County of Wigton, seen and personally examined
Margaret Duff, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Robert B. Selby

DATED this 23rd day of February One thousand eight hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexander Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Peter Gordon
Inspector of Poor, Kirkcowan, Wigtownshire
Certificates under the hands of Robert B. Selby
and Samuel Grierson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret Duff Kirkcowan, a Pauper and that the said Margaret Duff is a (5) Person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Duff as a Patient into the (6) Public Asylum of Southern Counties Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Duff which accompanied the said Petition.

DATED this Twenty fifth day of February One thousand eight hundred and Sixty seven years - one word delete -

John A. Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Margaret Duff
23rd February
1867

PRICE 1d Per Label. 1/- Per Row of 12 £1.... Per

N.B.—This Form shall be transmitted to the General Board of Lunacy after it is filled up, and after the Petition, Statement, Medical Certificates, and Order, are copied into it from Form A.

[Form A[1]]

20 & 21 *Vict., Cap.* 71, *Sect.* 37.

Notice of Admission of a Patient into an ASYLUM.

I hereby give notice, That (1)

was received into this House as a (2)

Patient on the (3) day of

and I hereby transmit a Copy of the Order and Medical Certificates and Statement on which was received.

Subjoined is a Report with respect to the mental and bodily condition of the above-named Patient.

(Signed) *Superintendent.*

Dated this (4) day of

One thousand eight hundred and

To the Secretary of the General Board of Lunacy.

REPORT.

I have this day (5) seen and personally examined the Patient named in the above Notice, and hereby report and certify, with respect to mental state, that (6)

and with respect to bodily health and condition, that (6)

(Signed)

(7)

Dated this day of One thousand eight hundred and

---

(1) Name and Designation.
(2) Private or Pauper.
(3) Some day within fourteen days after the date of the Order of the Sheriff; or within twenty-one days, if the Order be granted by the Sheriff of Orkney and Shetland.
(4) Some day not less than two clear days after the admission of the Patient, and before the expiration of fourteen clear days after admission.
(5) Insert Particulars.
(6) Insert Particulars.
(7) Add Designation.

P. p.

(*Copies.*)

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff ~~of the County~~ of Wigtown and Kirkcudbright *and his Substitutes,*

The Petition of John McBryde Inspector of Poor Kirk humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Graham Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Graham Pauper to the Southern Counties Asylum at Dumfries and to sanction her admission into the said Asylum.

(SIGNED) John McBryde

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eleventh (3) day of February One thousand eight hundred and Sixty seven.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Graham
2. Sex and Age,	Female. 22 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Pauper, Farmservant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Clashwhinnan
7. Place where Found and Examined,	do
8. Length of time Insane,	intimation of medical officer to
9. Whether first attack,	first
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	—
13. Supposed Cause,	Puerperal Fever
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Not to be depended on
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkmaiden
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Agnes Shannon or Graham her mother. Not known, ~~whether~~ if any of her [illegible] was ever insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* John McBryde

DATED this 11th day of February One thousand eight hundred and [illegible]

* To be signed by the Party applying.

(Copies.)

MEDICAL CERTIFICATE, No. I.

the undersigned, Alexander Wallace Jamieson
ing a (1) Licentiate of the Royal College of Surgeons of Edinburgh
d being in actual practice as a (2) Surgeon
reby certify, on soul and conscience, that I have this day, at (3) Clashbinnan in the Parish of Kirkmaiden and County of Wigtown separately from any other Medical Practitioner,
sited and personally examined (4) Agnes Graham
e said Agnes Graham of Clashbinnan and that is a (5) person of unsound mind and a proper person to be detained
der Care and Treatment, and that I have formed this opinion upon the following
ounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) That she is most epileptic excited by any ordinary remark, that she will by times laugh, cry, sing, make motions with the hands, and in short conduct herself as no sane person is apt to do under similar circumstances.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Mother & all the members of the family are able to corroborate the statement above.

(SIGNED) Name and Medical Designation, Alexander Wallace Jamieson L.R.C.S. Edd.

Place of Abode, Drumore

DATED this ninth day of February One thousand eight hundred and Sixty seven

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise, as the case may be.*
(3) *Insert the street and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a Pauper state so.*
(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*
(6) *State the facts.*
(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

the undersigned, John Charles Nicholson Ross
ing a (1) Physician & Licentiate of the Royal College of Surgeons Edinburgh
d being in actual practice as a (2) Physician & Surgeon
reby certify, on soul and conscience, that I have this day, at (3) Clashbinnan in the County of Wigtown separately from any other Medical Practitioner,
sited and personally examined (4) Agnes Graham
e said Agnes Graham is a (5) [illegible] and a proper person to be detained
der Care and Treatment, and that I have formed this opinion upon the following
ounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) That in religious matters becomes excited - using passages of Scripture - laughing - crying & swearing etc. alternately.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Leaving her mother by the hair, threatening to beat her brother - throwing herself in mad clothing and last night to throw stones - Preaches sings - prays both sings in succession.

(SIGNED) Name and Medical Designation, John Ross M.D. L.R.C.S. Edd.

Place of Abode, Lady Cottage Stoneykirk

DATED this ninth day of February One thousand eight hundred and Sixty seven

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, or otherwise, as the case may be.*
(3) *Insert the street and number of the house (if any), or other like particulars.*
(4) *Insert Designation and Residence, and if a pauper state so.*
(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*
(6) *State the facts.*
(7) *State the information, and from whom derived.*

(*Copies.*)

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Macduff Rand Depute Advocate Sheriff-substitute (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) John McBryde Inspector of Poor Kirkmaiden
Certificates under the hands of Alexander Wallace Jamieson Surgeon and Charles Morland Rose Surgeon, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Graham pauper and that the said Agnes Graham is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Graham as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Graham which accompanied the said Petition.

(SIGNED)

DATED this nineteenth day of February One thousand eight hundred and sixty seven

To the Superintendent of the (7) Southern Counties Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A4]

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE TRANSFER OF A LUNATIC FROM ONE ASYLUM TO ANOTHER.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of Mary Killey humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Anne Farr Watson is at present a Patient in the Asylum of Lunatic Hospital Liverpool remains in a state of Mental Derangement, and is a proper person for treatment in an Asylum; and that it is desired to transfer the said Anne Farr Watson to the Asylum of Southern Counties at Dumfries. May it therefore please your Lordship to authorize the Transfer of the said Anne Farr Watson and to sanction his admission into the said Asylum accordingly.

(Signed)* Mary Killey

Designation, Sister

(2) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this ~~Twenty Eighth~~ (2) day of February one thousand eight hundred and Sixty ~~five~~ seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Anne Farr Watson
2. Sex and Age,	Female 27 years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	None Gentlewoman
5. Religious Persuasion, so far as known,	Church of England.
6. Previous Place of Abode,	5 Soho Street Liverpool.
7. Place where Found and Examined,	5 Soho Street Liverpool.
8. Length of time Insane,	Between 6 & 7 years
9. Whether First Attack,	no
10. Age (if known) on First Attack,	About 21 years.
11. When and where previously under Examination and Treatment,	The Crighton Asylum & the Liverpool Royal Lunatic Hospital.
12. Duration of Existing Attack,	Nearly 2 years
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	none
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Mary Killey. 7 Church Road Seaforth. near Liverpool.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signed) X *Name,* ~~F. H. Hargrave Med. Superint.~~ ~~Lunatic Royal Lunatic Hospital~~

Dated this 25th day of February one thousand eight hundred and Sixty ~~two~~ seven.

* To be Signed by the Party applying, who shall state the degree of Relationship (if any) to the Patient.

X Mary Killey 7 Church Road. Seaforth, Liverpool.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Reginald Stanier
being a (1) Fellow of the Royal College of Surgeons England
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Lunatic Asylum Ashton St
in the county of Lancaster separately from any other
Medical Practitioner, personally examined (4) Anne Farr Watson
and that the said Anne Farr Watson is a (5) person
of unsound mind
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Lies in bed and refuses to get up stating that the has committed sins of such a character as cannot be pardoned by the People —

2. Facts indicating Insanity communicated to me by others: (7)
Miss Story informs me that the attendants perceive symptoms of depression &c

(SIGNED) Name and Medical Designation, Reginald Stanier M.R.C.S.

Place of Abode, 10 Marsland Bd Lisson

DATED this twenty fifth day of February One thousand eight hundred and sixty seven —

(1) *Here set forth the qualification entitling the person certifying to grant the certificate; e. g.*—Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, as the case may be.*
(3) *Here insert the street and number of the house (if any), or other like particulars.*
(4) *Here insert Designation and Residence, and if a Pauper state so.*
(5) *Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.*
(6) *Here state the facts.*
(7) *Here state the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Frederick Thomas Roberts
being a (1) Bachelor of Medicine of London Univ
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Lunatic Asylum, 14 Ashton St
in the county of Lancaster separately from any other
Medical Practitioner, personally examined (4) Anne Farr Watson 14
and that the said Anne Farr Watson is a (5) person
of unsound mind —
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Very Indecorous says she has committed sins for which cannot be pardoned — Lies in bed, and will not get up —

2. Facts indicating Insanity communicated to me by others: (7)
Miss Story informs me that she is in a constant depressed state of mind, whenever she was for very excited — Refuses food often, and will not

(SIGNED) Name and Medical Designation, Frederick Thomas Roberts

Place of Abode, 32 Bedford St North

DATED this twenty fifth day of February One thousand eight hundred and sixty seven —

(1) *Here set forth the qualification entitling the person certifying to grant the certificate; e. g.*—Member of the Royal College of Physicians in Edinburgh.
(2) *Physician or Surgeon, as the case may be.*
(3) *Here insert the street and number of the house (if any), or other like particulars.*
(4) *Here insert Designation and Residence, and if a Pauper state so.*
(5) *Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.*
(6) *Here state the facts.*
(7) *Here state the information, and from whom derived.*

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSFER AND RECEPTION OF THE LUNATIC.

I, (1)
of the (2)
having had produced to me, with a Petition for Transfer at the instance of (3)

Certificates under the hands of
and , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
at present a patient in the Asylum of
and that the said is a (5)

and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE the Transfer of the said from the Asylum of to the Asylum of and I authorize Transmission to the Asylum of accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said which accompanied the said Petition.

(SIGNED)

DATED this day of one thousand eight hundred and

To the Superintendent of the (6)
Asylum of

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District or Private.

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Anne Farr Watson

28th February

1863

Transferred to C.R.S

1203

April 29/31

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Mary Killey, 7 Church Road Seaforth Liverpool humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Anne Farr Watson, at present in the Liverpool Lunatic Hospital, your Petitioner's (3) Sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Anne Farr Watson to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(3) State degree of relationship or other society in which Petitioner stands to Lunatic.

+ Mary Killey.

(4) The date of the petition must be within fourteen clear days succeeding the dates of the Medical Certificates.

+ DATED this first (4) day of March One thousand eight hundred and fifty seven.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Anne Farr Watson
Sex and Age,	Female - Aged 27 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	None - Gentlewoman.
Religious Persuasion, so far as known,	Church of England
Previous Place of Abode,	5 Soho Street Liverpool
Place where Found and Examined,	5 Soho Street Liverpool
Length of time Insane,	Between 6 or 7 years
Whether first attack,	No.
Age (if known) on first Attack,	about 21 Years
When and where previously under Examination and Treatment,	The Crichton Institution, Southern Counties Asylum & Liverpool Lunatic Hospital -
Duration of existing Attack,	Nearly 2 years
Supposed Cause,	Unknown
Whether subject to Epilepsy,	No
Whether Suicidal,	No - Query
Whether Dangerous to others,	No
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	None
Date of becoming Chargeable,	—
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mary Killey, 7 Church Road Seaforth near Liverpool her Sister.
Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

+ DATED this first day of March One thousand eight hundred and fifty seven

(*To be signed by Party applying*) + Mary Killey.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson being a (1) Graduate of the Edinburgh Univ and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County Dumfries separately from any other Medical Practitio visited and personally examined (4) Ann Farr Watson Gentlewoman, Lunatic Hospital Liverpool and t the said Ann Farr Watson is a (5) Lunatic and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is exc depressed, and melancholic. Tacturn replies only in monosyllables. Is with difficulty induced to act for herself in the smallest

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Nurse at the Liverpool Hospital informs me she has been in the condition above desc for three months. & whenever she is in induced talk, she constantly refers vaguely to the crimes committed.

Name and Medical Designation, John Dickson M

Place of Abode, Castle Street Dumf

DATED this 28th day of February One thousand ei hundred and sixty seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Frederick Thomas Roberts being a (1) Bachelor of Medicine of London Univ and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Liver Royal Lunatic Asylum - 14 Ashton St in the Count Lancaster separately from any other Medical Practitio visited and personally examined (4) Anne Farr Watson - 14 Ashto and the said Anne Farr Watson is a (5) person of unsound mind and a proper person to be deta under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Very melanch says she has committed sins for which she be pardoned - Lies in bed, and will not

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Miss Storey informs me that she is in a constan depressed state of mind, whereas she was for very merited - Refuses food often, and will not

Name and Medical Designation, Frederick Thomas Robe

Place of Abode, 32 Bedford St North Liv

DATED this twenty-fifth day of February One thousand e hundred and sixty-seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson being (1) a Graduate of the Edinburgh University, Asylum hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties in the County of Dumfries, seen and personally examined Ann Farr Watson, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this 28th day of February One thousand eight hundred and sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Mary Killey 7 Church Road, Seaforth, Liverpool Certificates under the hands of John Dickson and Frederick Thomas Roberts, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Ann Farr Watson, lately in Liverpool Lunatic Hospital and that the said Ann Farr Watson is a (5) Lunatic and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ann Farr Watson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ann Farr Watson which accompanied the said Petition.

DATED this Second day of March One thousand eight hundred and Sixty Seven

RS

John P. Trotter

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Anne Farr Watson

28th February

1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*

The Petition of John Dinwoodie Inspector of the Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Holbrook residing in Dumfries your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Holbrook to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this First (4) day of March One thousand eight hundred and Sixty seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jane Holbrook
2. Sex and Age,	Female 30 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Seamstress
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	— D. Asylum
8. Length of time Insane,	more than 14 years
9. Whether first Attack,	yes -
10. Age (if known) on first Attack,	about 16 years
11. When and where previously under Examination and Treatment,	Dumfries
12. Duration of existing Attack,	about 16 years
13. Supposed Cause,	Cause not known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	28 Feby 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Agnes Mc Cartney mother. Ewe 4 Lamb close Dumfries had a Cousin also insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this First day of March One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) John Dinwoodie, Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, William Angus Hall
being a (1) Member of the Faculty of Physicians & Surgeons Glasgow and Licentiate of the Royal College of
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Cave & Lane
Dumfries in the County of
separately from any other Medical Practitioner
visited and personally examined (4) Jane Galbraith a pauper
and that
the said Jane Galbraith is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Talks incoherently
Says Messrs Cave & Lane are going to murder her
Sister & going out & in between her
and Sister being strangers to her &c &c

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her Mother and Sister state that she
is most excitable and threatening to take their

Name and Medical Designation, William Angus M.D.

Place of Abode, Buccleuch Street Dumfries

DATED this 16th day of March One thousand eight
hundred and Sixty seven years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of the University of Glasgow
and Licentiate of the Faculty of Physicians & Surgeons Glasgow
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Cave & Lane
Close Queensberry Street Dumfries in the County of
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Jane Galbraith - pauper
and that
the said Jane Galbraith is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Talks incoherently, Answers difficultly
without provocation & seems when in the
room by herself, is excited in her address
and her delusions —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Told by her mother sister & neighbours that
the attack is passing. That it is frequent occurrence
and all at once she becomes violent and throws about
things &c in a dangerous manner —

Name and Medical Designation, Alex. Thomson M.D. Surgeon

Place of Abode, Castle Street - Dumfries

DATED this Twenty Second day of February One thousand eight
hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dinwoodie
Inspector of Poor Dumfries
Certificates under the hands of William Marshall M.D.
and Alexander Thomson M.D., being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Jane Holbrook residing in Dumfries a pauper and that the said
Jane Holbrook is a (5) Lunatic and a
person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Holbrook as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Holbrook which accompanied the said Petition.

DATED this first day of March One thousand eight hundred and sixty seven

John P Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Jane Holbrook
1st March
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries *and his Substitutes,—*

The Petition of Matthew Little Longholm humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Barbara Little your Petitioner's (3) Daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Barbara Little to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(3) State degree of relationship or other quality in which Petitioner stands to Lunatic.

Matthew Little

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this First (4) day of March One thousand eight hundred and Sixty Seven Years

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Barbara Little
2. Sex and Age,	Female, 25 Years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Govern up
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	lately in Sutherlandshire
7. Place where Found and Examined,	Longholm
8. Length of time Insane,	more less since June last
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	
13. Supposed Cause,	Grief, for the Death of her Stepmother
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Matthew Little Joiner Longholm is her Father
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this First day of March One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) Matthew Little

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an Idiot, or a person of unsound mind.*

I, the undersigned, William Inagewell being a (1) Member of the Royal College of Surgeons and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Laughor in the Co Dumfries separately from any other Medical Practi visited and personally examined (4) Barbara Little an the said Barbara Little is a (5) Lunat and a proper person to be de under Care and Treatment, and that I have formed this opinion upon the foll grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Believes there hope of her Salvation: Refuses food fo fear of poisons being introduced into i

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Willm Inagewell Surgeon.

Place of Abode, Langholm.

DATED this twenty fifth day of February One thousand hundred and Fifty Seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an Idiot, or a person of unsound mind.*

I, the undersigned, William Johnston Carlyle being a (1) Doctor of Medicine (Edinburgh) Licentiate of the Royal College of Surgeons (Edin and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Broom Longholm in the Co Dumfries separately from any other Medical Practit visited and personally examined (4) Barbara Little an the said Barbara Little is a (5) person of Unsound Mind and a proper person to be de under Care and Treatment, and that I have formed this opinion upon the fol grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Much depres mind delusions, with considerable weakness Occasionally great excitement manner in an unsettled state.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The above facts have also been communi to me by her Father Matthew Little and her Mother Little

Name and Medical Designation, W. J. Carlyle M. D. Surg

Place of Abode, Langholm

DATED this 1st day of March One thousand hundred and fifty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter, Esquire Advocate Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Matthew Little, Langholm Certificates under the hands of William Maxwell and William Johnstone Carlyle, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Barbara Little Petitioners Daughter and that the said Barbara Little is a (5) Lunatic and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Barbara Little as a Patient into the (6) public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Barbara Little which accompanied the said Petition.

DATED this fourth day of March One thousand eight hundred and sixty seven

John P Trotter

To the Superintendent of the (7) public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Barbara Little
4th March
1867.

I Charles Ford. M.D: and Surgeon, hereby solemnly declare on soul and Conscience that from personal observation, and from the report of creditable witnesses, I believe Barbara Settle, now or lately of Lochinver to be in such a state of mental derange= ment as to require confinement in an Asylum

Charles Ford
M.D.
L.R.C.S.E.
1862

Lochinver
Assynt
Sutherland
February 1867

I, Charles Ford, M.D. and Surgeon, hereby solemnly declare on soul and conscience, that from personal observation, and from the report of creditable witnesses, I believe Barbara Little, now or lately of Lochinver to be in such a state of mental de=rangement as to require confinement in an Asylum.

Chas. Ford.
M.D.
L.R.C.S.E.
1842.

Lochinver
Assynt
Sutherland
February 1867.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of James Austen Inspector of poor for the parish of Closeburn humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Anderson residing at Woodend in said parish your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Anderson to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other cause by which Petitioner stands to Lunatic.

James Austen Inspector of poor

Dated this Second (4) day of March One thousand eight hundred and Sixty seven

(4) The date of the Petition must be within fourteen clear days preceding the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Thomas Anderson
2. Sex and Age,	Male 17 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Keeper - Cow
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Woodend
7. Place where Found and Examined,	Do
8. Length of time Insane,	From infancy of weak mind
9. Whether first Attack,	has had many attacks
10. Age (if known) on first Attack,	Since boyhood
11. When and where previously under Examination and Treatment,	Has always been at home
12. Duration of existing Attack,	more particularly for the last 6 months
13. Supposed Cause,	Congenital
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Doubtful.
16. Whether Dangerous to others?	At times will injure others
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Closeburn
18. Date of becoming Chargeable,	28th Feb. 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Agnes Anderson Woodend Closeburn Mother Not known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Second day of March One thousand eight hundred and Sixty seven

(To be signed by Party applying) James Austen Inspector of poor

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Thomas Boyle Grierson being a (1) Licentiate of the Royal College of Surgeon of Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Woodend Closebum in the County Dumfries separately from any other Medical Practitio visited and personally examined (4) Thomas Anderson, c village, a pauper and the said Thomas Anderson is a (5) Insane person and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Incapable of reasoning. subject to violent impulses. timid

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

His mother says that at times he is very violent and will strike her; says that he go away and put end to himself.

Name and Medical Designation, T B Grierson Lic R C S Ed

Place of Abode, Thornhill

DATED this Second day of March One thousand eig hundred and Sixty Seven

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robert Shaw, Bachelor of being a (1) icine & master of Surgery of the City of Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Wooden Closebum in the County Dumfries separately from any other Medical Practitione visited and personally examined (4) Thomas Anderson, pow Closebum parish and the said Thomas Anderson is a (5) Insan person and a proper person to be detaine under Care and Treatment, and that I have formed this opinion upon the followin grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Want of ing power, refuses without any r to take food. very timid & jeal

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

violent to persons in attend on him, & threatens to com suicide by throwing himself in of a Railway train.

Name and Medical Designation, Robert Shaw M.B. & C.M.

Place of Abode, Thornhill

DATED this Second day of March One thousand eigh hundred and Sixty Seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Thomas Boyle Grierson being (1) a Licentiate of the Royal College of Surgeons, Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Woodend in Closeburn in the County of Dumfries, seen and personally examined Thomas Anderson, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

T B Grierson Lic R.C.S.Ed

DATED this Second day of March One thousand eight hundred and Sixty Seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esqr (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Austin Inspector of Poor for the parish of Closeburn Certificates under the hands of Thomas Boyle Grierson and Robert Shaw, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Thomas Anderson residing at Woodend said parish and that the said Thomas Anderson is a (5) insane person and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Anderson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Anderson which accompanied the said Petition.

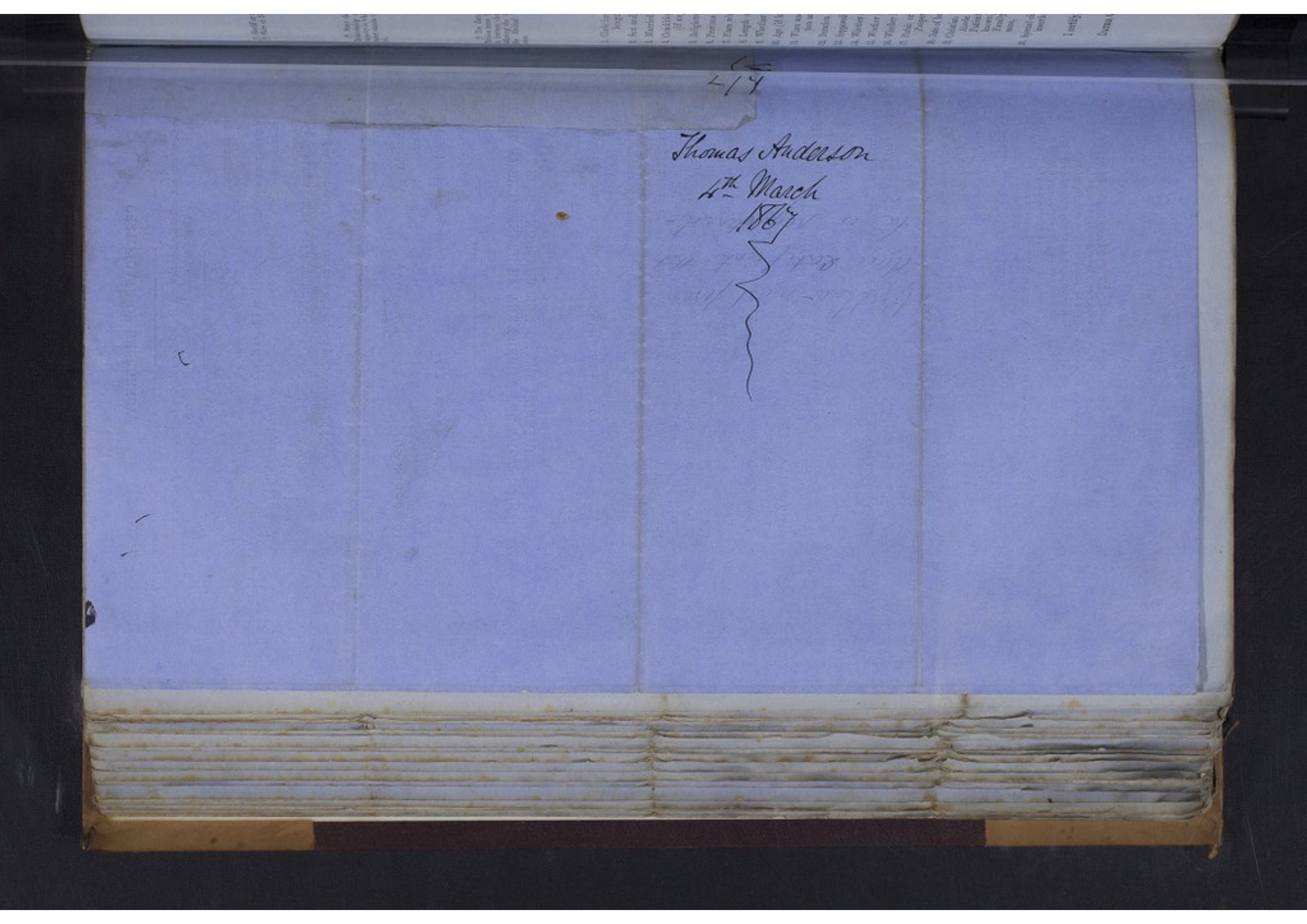
DATED this ~~fourth~~ day of March One thousand eight hundred and sixty seven. one word delete.

John P. Trotter

To the Superintendent of the (7) public Asylum of Southern Counties

Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.



Thomas Anderson
4th March
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,*—

The Petition of Thomas Corrie Prov Fiscal of Dumfriesshire + John Bell Inspector of Poor of the parish of Moffat humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane McGuffock, a vagrant your Petitioner's (3) Charge is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane McGuffock to the Southern Counties' Asylum Dumfries and to sanction her admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Thos Corrie P.F. John Bell Insp.

(4) The date of the petition must be within fourteen clear days following the dates of Medical Certificates.

Dated this (4) day of March One thousand eight hundred and

STATEMENT.

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

Christian Name and Surname of Patient at length,	Jane McGuffock
Sex and Age,	Female - About 50 -
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Vagrant
Religious Persuasion, so far as known,	Not known - Sup: Roman Catholic
Previous Place of Abode,	Ireland
Place where Found and Examined,	Found in parish of Moffat - Examined in Dumfries
Length of time Insane,	Not known
Whether first attack,	Do
Age (if known) on first Attack,	Do
When and where previously under Examination and Treatment,	Do
Duration of existing Attack,	Do
Supposed Cause,	Do
Whether subject to Epilepsy,	Do
Whether Suicidal,	Do - but supposed not
Whether Dangerous to others,	If not now likely to become so
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Moffat where found - meantime
Date of becoming Chargeable,	6th March 1867 -
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not known
Special circumstances (if any) preventing the insertion of any of the above particulars,	She is a vagrant, with no relations or connections in this Country so far as known.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Eleventh day of March One thousand eight hundred and sixty seven

(*To be signed by Party applying*) John Bell Insp.

Thos Corrie P.F. P.p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, William Scott
being a (1) Graduate of the University of Edi
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Sheriff
House Dumfries, in the Cou
Dumfries separately from any other Medical Practiti
visited and personally examined (4) Jane McGuffock, a pau
Pauper and
the said Jane McGuffock is a (5) Lunatic a
a person of unsound mind and a proper person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She was in a
excited state, and was Exclaiming under de
acts her friends following her & exacting he
do certain acts

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
and Police informing me that she had been on the
of stripping herself naked on the roadside a
going into plantations & howling like a wild ani

Name and Medical Designation, William Scott M.D

Place of Abode, Dumfries

DATED this Sixth day of March One thousand e
hundred and Sixty Seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a proper state so.*

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

I, the undersigned, William Ramsay McNeil
being a (1) Graduate in Medicine of the Universit
of Edinburgh.
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern
Counties Asylum in the Cou
Dumfries. separately from any other Medical Practiti
visited and personally examined (4) Jane Mc. Guffock.
Pauper and
the said Jane McGuffock. is a (5) person of
Unsound mind and a proper person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She has dec
and is in fear of her friends, harming he

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
The Procurator Fiscal stated in his letter
that she had stripped off her clothes on the
public road, and was all Naked & dancing

Name and Medical Designation, William Ramsay McN M.D

Place of Abode, Crichton Institution, Dumfries

DATED this ninth day of March One thousand e
hundred and Sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon (1) Sheriff substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Thomas Cozie Procurator Fiscal of Dumfriesshire and John Bell Inspector of Poor
Certificates under the hands of William Scott
and William Ramsay Mc Nab, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jane McGuffock A Vagrant Pauper and that the said Jane McGuffock is a (5) Lunatic and a person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane McGuffock as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Mc Guffock which accompanied the said Petition.

DATED this Eleventh day of March One thousand eight hundred and sixty seven

James Gordon

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Jane McGuffock

6th March

1867

Dumfries
March 1867

Unto the Honourable the Sheriff of Dumfriesshire and his Substitutes

The Petition of Thomas Corrie Procurator Fiscal of Court for the Public interest

Humbly Sheweth

That by the Act 25 and 26 Victoria Cap 54 entitled "An act to make further provision respecting Lunacy in Scotland" Section 15 the Sheriff is empowered on the application of the Procurator Fiscal of Court to Grant Warrant for committing to a place of safe custody any Lunatic who may have been apprehended charged with Assault or other offence inferring danger to the Lieges, or who shall be found in a state threatening danger to the Lieges or in a state offensive or threatening to be offensive to public decency—

That Jane McGuffock a Vagrant who has no fixed place of residence and whose relations if any exist, are unknown to the Petitioner was yesterday apprehended

(To be signed by Party applying) John Wilson

P. P.

apprehended by a Police Officer at or near Woodfoot in the parish of Moffat in this County; and the said Jane Mc Guffock is a Lunatic, and is in a state threatening danger to the Lieges, and is offensive or threatening to be offensive to Public decency Conform to Certificate of this date under the hands of Dr William Scott of Dumfries herewith produced

May it therefore please your Lordships to Consider this Petition to Grant Warrant for Committing the said Jane Mc Guffock to a place of safe Custody in the meantime as prescribed by said Act, to direct Notice to be given by the Petitioner to the Inspector of Poor of the Parish of Moffat within which the Lunatic was found, and apprehended of her apprehension and Committal and further to appoint a diet on which enquiry can be made into

into the condition of the said Jane Mc Guffock all in terms of said Act or to do otherwise as to your Lordships may sum just

According to Justice &c
(Signed) J. McCorrie P.Q.

Dumfries 6 March 1867.– Having considered the foregoing Petition and seen the Medical Certificate therein referred to Grants Warrant for committing the said Jane Mc Guffock to the Southern Counties Asylum near Dumfries as a place of safe custody in the meantime, in terms of S 15 of the Act 35 and 36 Vict Cap 54; appoints Notice to be given by advertisement once at least in each of the Dumfries Herald and Courier Newspapers of said Commitment and that it is intended to enquire into the condition of the said Jane Mc Guffock as a Lunatic within the Court House here upon Thursday the Fourteenth day of March current at one

(To be signed by Party applying) John Wilson

one o'clock afternoon; and further
directs Notice of the present
Petition and of the Signatures Com
mitted to be given to the In
spector of Poor of the Parish
of Moffat being the parish in
which the said Jane McGuffock
was found and apprehended all
in terms of the act founded
on - And further Grants Warrant
to officers of Court to bring the
said Jane Mc Guffock back from
said place of safe custody if that
shall be found necessary in
order to her being present at
the diet of Court above fixed
Signed / John P Grotier

Copy Medical Certificate

I William Scott Physician in
Dumfries do hereby certify that
I

I have this day examined Jane McGuffock a Vagrant at present in custody of the Police - that I have found her excited, labouring under mental delusions and quite incoherent in her talk, and that she is a Lunatic and in a state threatening danger to the Liegies and offensive or threatening to be offensive to Public Decency

This on Soul and Conscience

(Signed) William Scott M.D. &c

Dumfries
6 March 1867

A true Copy - Certified by
R. Jameson
Sheriff Clerk

Dumfries 11 March 1867.

(To be signed by Party applying)

John Wilson

P.P.

Copy

Petition

of

The Over Sheriff of

Dumfriesshire for

enquiry as to state

of Jane McGuffock

6th March 1867

Unto the Honourable the Sheriff
of Dumfriesshire and his
Substitute

The Petition of Thomas Corrie Procurator Fiscal
of Court for the Public Interest

Humbly Sheweth

That by the Act 25 and 26
Victoria Cap 54 entitled "An act to make
"further provision respecting Lunacy in Scotland"
Section 15 the Sheriff is empowered on the application
of the Procurator Fiscal of Court to Grant Warrant
for committing to a place safe custody any Lunatic
who may have been apprehended charged with
Assault or other offence inferring danger to the
Lieges, or who shall be found in a state threatening
danger to the Lieges or in a state offensive or
threatening to be offensive to public decency—

That Jane Mc Guffock a Vagrant who
has no fixed place of residence and whose
relations if any exist, are unknown to the
Petitioner was yesterday apprehended by a
Police Officer at or near Woodfoot in the
Parish of Moffat in this County; and the
said Jane Mc Guffock is a Lunatic, and in
a state threatening danger to the Lieges, and is
offensive or threatening to be offensive to
Public decency Conform to Certificate of
this date under the hands of Dr William
Scott of Dumfries herewith produced

May it therefore please your Lordships to
consider

(To be signed by Party applying) John Wilson

P. P.

consider this Petition to Grant Warrant committing the said Jane McGuffock to place of safe custody in the Meantime prescribed by said Act, to direct Notice to be given by the Petitioner to the Inspector of Poor of the said Parish of Moffat within which the Lunatic was found and apprehended of her apprehension and Committal; and further to appoint a diet on which enquiry can be made into the condition of the said Jane McGuffock all in terms of said Act or to do otherwise as to your Lordships may seem just

According to Justice &c

(Signed) Geo. Currie P.F.

Dumfries 6 March 1867. — Having considered the foregoing Petition and seen the Medical Certificate therein referred to Grants Warrant for committing the said Jane McGuffock to the Southern County Asylum near Dumfries as a Place of safe Custody in the meantime, in terms of S.15 of the Act 25 and 26 Vict Cap 54; appoints Notice to be given by Advertisement once at least each of the Dumfries Herald and Courier Newspapers of said Commitment and that is intended to enquire into the Condition of the said Jane McGuffock as a Lunatic within the County House here upon Thursday the Fourteenth day of March Current at One o'clock afternoon; and further directs Notice of the present Petition and of the Lunatics Committal to be given to the Inspector of Poor of the Parish of Moffat being the Parish in which the said Jane

Jane Mc Guffock was found and apprehended, all in terms of the act founded on — And further Grants Warrant to officers of Court to bring the said Jane Mc Guffock back from said place of safe custody if that shall be found necessary in order to her being present at the diet of Court above fixed

(Signed) John P Trotter

Copy Medical Certificate

I William Scott Physician in Dumfries do hereby certify that I have this day examined Jane Mc Guffock a Vagrant at present in custody of the Police — that I have found her excited, labouring under Mental delusions and quite incoherent in her talk, and that she is a Lunatic and in a state threatening danger to the Lieges and Offensive or threatening to be Offensive to Public Decency

This on Soul and Conscience

(Signed) William Scott MD &c

Dumfries
6 March 1867

A True Copy — Certified by
R. Sinclair
Solr

Dumfries 11 March 1867

(To be signed by Party applying) John Wilson

P. P.

Petition

of

The Prot Fiscal of

Dumfriesshire for

enquiry as to state

of Jane Mc Guffock

6th March 1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of John Wilson, Baxend, Colvend humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Wilson residing at Whitehill Colvend your Petitioner's (3) Sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Wilson to the Dumfries & Galloway Asylum and to sanction her admission into the the said Asylum.

(1) State degree of relationship or other capity in which Petitioner stands to Lunatic.

John Wilson

DATED this 8 (4) day of March One thousand eight hundred and 1869

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Wilson
2. Sex and Age,	Female - about 50 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Farmer daughter
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Whitehill, Colvend
7. Place where Found and Examined,	Whitehill do
8. Length of time Insane,	about 6 weeks
9. Whether first Attack,	No - third
10. Age (if known) on first Attack,	14 or 15 -
11. When and where previously under Examination and Treatment,	In the Southern Counties' Asylum
12. Duration of existing Attack,	about 6 ~~weeks~~
13. Supposed Cause,	Loss of her father
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No -
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	None
18. Date of becoming Chargeable,	None
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Wilson Farmer Barhead Colvend, her brother - Has a brother in the Asylum
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this 8th day of March One thousand eight hundred and 69

(*To be signed by Party applying*) John Wilson

P. p.

Medical Man Who

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Robson being a (1) Doctor of Medicine of the University Aberdeen &c and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Whitehill in the County Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Agnes Wilson, and that the said Agnes Wilson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Delusions. Believes that several persons are plotting against her to do her mischief. Does not wish to recognise & has an aversion to her relations.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, John Robson M.D.

Place of Abode, Mains Riddell

DATED this 8th day of March One thousand eight hundred and Sixty Seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Ramsay McCab being a (1) Graduate in Medicine of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern County Asylum in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Agnes Wilson, Whitehill Colvend and that the said Agnes Wilson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She has delusions and answers important questions in an incoherent manner.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Dr. Grierson informs me that it was mentioned to him by her brother that this was the third time it had been necessary to place her under treatment.

Name and Medical Designation, William Ramsay McCab M.D.

Place of Abode, Crichton Institution. Dumfries

DATED this ninth day of March One thousand eight hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Robson
being (1) a Doctor of Medicine
hereby certify, on soul and conscience, that I have this day, at (2) Whitehill
in the County of Kirkcudbright, seen and personally examined
Agnes Wilson, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Eight John Robson M.D.

DATED this ~~Eight~~ day of March One thousand eight hundred and Sixty seven

(1) State medical qualification. (2) State placeof examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I John Fitzarn Rutter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Wilson
Barend Colvend
Certificates under the hands of John Robson
and William Ramsay M'Nab, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Agnes Wilson residing at Whitehill Colvend and that the said
Agnes Wilson is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Wilson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Wilson which accompanied the said Petition.

DATED this Twelfth day of March One thousand eight hundred and Sixty seven

John P. Rutter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Abstract Reporter

Agnes Wilson
8 March
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (Sheriff) — *of the* (Shire) of Durham *and his Substitutes,—*

The Petition of Mrs Mercer Pool humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Anthony Pool

[1] State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (Son) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Anthony Pool to the Auckland Institution Durham and to sanction his admission into the the said Asylum.

Mercer Pool

[2] The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eighth (8) day of March One thousand eight hundred and sixty seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Anthony Pool
2. Sex and Age,	Male - 46.
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Draper in Newcastle
5. Religious Persuasion, so far as known,	an English Presbyterian
6. Previous Place of Abode,	Newcastle
7. Place where Found and Examined,	Lockwinden
8. Length of time Insane,	18 Months
9. Whether first Attack,	First
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	18 months
13. Supposed Cause,	misfortune in business matters
14. Whether subject to Epilepsy,	— yes.
15. Whether Suicidal,	— No
16. Whether Dangerous to others,	has threatened danger
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Petitioner as above, Lockwinden — None
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this 8th day of March One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) Mercer Pool

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Ferguson University of Edinburgh
being a (1) ~~Graduate of Medicine~~ & Edinburgh
and being in actual practice as a (2) physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Lochmaben
in the County of Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Anthony Pool residing at Lochmaben and that
the said Anthony Pool is a (5) person of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is subject to aberrations of judgment and intellect. Was in my presence violent to relatives

2. Other facts (if any) indicating Insanity communicated to me by others: (7) He has wandered from home purposelessly, is violent to his nearest relatives and some acts indicating mental derangement. As communicated to his mother

Name and Medical Designation, John Ferguson M.

Place of Abode, Lochmaben

DATED this Eighth day of March One thousand eight hundred and Sixty Seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Smith
being a (1) Graduate of the University of Ed
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Dumfries
in the County of Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Anthony Pool
the said Anthony Pool. and that
is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He at times appears to be depressed in spirits. I guess his business affairs are going wrong. At other times he becomes excited. & has on several occasions threatened violence on his mother & others. His language is quite incoherent

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mr Watt states that he has not been his usual steady self for the last eighteen months but more or less at the time mentioned above

Name and Medical Designation, John Smith M.D.

Place of Abode, Dumfries.

DATED this Eighth day of March One thousand eight hundred and 67.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Ferguson being (1) a Doctor of Medicine hereby certify, on soul and conscience, that I have this day, at (2) Lochmaben in the County of Dumfries, seen and personally examined Anthony Pool, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Ferguson

DATED this 8th day of March One thousand eight hundred and 67.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Wm Mercer Pool Church Place Lochmaben Certificates under the hands of John Ferguson and John Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Anthony Pool ~~the Petitioners son~~ and that the said ~~John Ferguson~~ Anthony Pool is a (5) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Anthony Pool as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Anthony Pool which accompanied the said Petition.

DATED this Ninth day of March One thousand eight hundred and Sixty seven. Two words delete.

John P. Trotter

To the Superintendent of the (7) Public *Asylum of* Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of* ~~the~~ (2) Wigtown and ~~of~~ Kirkcudbright *and his Substitutes,*— for the Stewartry of Kirkcudbright The Petition of John Hannah Inspector of Poor of the Kirkcudbright humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Nathaniel Palmer a pauper of the Parish of Kirkmabreck ~~your Petitioner's~~ (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Nathaniel Palmer to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

State degree of [illegible]tionship or other [illegible]city in which Peti[illegible]r stands to Luna[illegible]

John Hannah

The date of the [illegible]ion must be with[illegible]urteen clear days [illegible]ving the dates of [illegible] Medical Certifi[illegible].

DATED this Fourth (4) day of March One thousand eight hundred and Sixty Seven

STATEMENT.

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

Christian Name and Surname of Patient at length,	Nathaniel Palmer
Sex and Age,	Male aged 38
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Travelling Book Seller
Religious Persuasion, so far as known,	Protestant
Previous Place of Abode,	Kirkcudbright
Place where Found and Examined,	Kirkcudbright
Length of time Insane,	Four Months
Whether first Attack,	yes ~~Kirkcudbright~~
Age (if known) on first Attack,	—
When and where previously under Examination and Treatment,	—
Duration of existing Attack,	Four Months
Supposed Cause,	Weak Constitution
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	No
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkmabreck
Date of becoming Chargeable,	11th March 1865
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Palmer High St Kirkcudbright Father has been Insane
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Fourth day of March One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) John Hannah Insp of Poor

P. 6.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, David Blair being a (1) L. R. C. S. Edinr and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) High Street Kirkcudbright in the County Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Nathaniel Palmer a Pauper and that the said Nathaniel Palmer is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) from incoherent of speech, & delusive ideas.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His Mother says that night & day is holding conversation with imaginary person.

Name and Medical Designation, David Blair Surgeon

Place of Abode, Kirkcudbright

DATED this fourth day of March One thousand eight hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Cumming being a (1) Doctor of Medicine &c of Glasgow University and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) High St Kirkcudbright in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Nathaniel Palmer a pauper and that the said Nathaniel Palmer is a (5) an insane person and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) In speech he is coherent, is the subject of delusions, such as voices constantly which at one time mock and threaten him, fancies he has been poisoned in peculiar manner, Has a wild and scared look.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) By his mother, That during the last four months disposition has completely changed, That he constantly mutt if talking to some one, that he has been in this state the last four months, before which time he appears who had an attack of Delirium tremens

Name and Medical Designation, William Cumming Mr

Place of Abode, Kirkcudbright

DATED this fourth day of March One thousand eight hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of
, seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar Esq (1) Steward Substitute of the (2) stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3) David Blair
John Hannah
Certificates under the hands of David Blair
and William Cumming , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Nathaniel Palmer a Pauper and that the said
Nathaniel Palmer is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Nathaniel Palmer as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize his — Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Nathaniel Palmer which accompanied the said Petition. (five words deleted)

DATED this eighth day of March One thousand eight hundred and Seventy seven years.

W H Dunbar

To the Superintendent of the (7) Southern Counties Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Nathaniel Palmer
9th March
1887

James

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Ship or Stewartry.

Unto the Honourable the (1) ~~Steward~~ ~~of the~~ (2) ~~Stewartry~~ Sheriff of Wigton and Kirkcudbright *and his Substitutes,*—

The Petition of James McMichael, Inspector of Poor, Balmaclellan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Gibson residing at Gibshill your Petitioner's (3) ~~[illegible]~~ Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Gibson to the Sectarian Counties ~~S. C.~~ Asylum Dumfries and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

James McMichael

(4) The date of the Petition must be within four or six clear days following the dates of the Medical Certificates.

Dated this Eight (4) day of March One thousand eight hundred and Sixty seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Gibson
	Sex Female. Age about 35
	Single
	Pauper, previously a farm Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Barlay Parish of Girthon
7. Place where Found and Examined,	Gibshill Parish of Balmaclellan
8. Length of time Insane,	about five years since first attack
9. Whether first Attack,	the second attack
10. Age (if known) on first Attack,	— about 30
11. When and where previously under Examination and Treatment,	S. C. Asylum Dumfries about two years but worse lately
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	threatens Suicide
16. Whether Dangerous to others,	threatens others also
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Chargeable to the Parish of Girthon
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Gibson his Father Place of abode at Gibshill Balmaclellan
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Eight day of March One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) James McMichael Inspector of Poor Balmaclellan F.P.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Alfred McKinley Millman
being a (1) doctor of medicine of the University of Aberdeen
a member of the Royal College of Surgeons in England,
and being in actual practice as a (2) Physician and Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Gibbs Hill
in the parish of Balmaclellan in the County
Kirkcudbright separately from any other Medical Practitioner
visited and personally examined (4) Agnes Gibson (Pauper)
and that
the said Agnes Gibson is a (5) Insane person
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She appears to me a morbid and false opinion, that her state of health is so bad, as to incapacitate from performing any duties of life, and her argument seems to convince her that acting improperly by wasting her life in the closets and purposely in manner; - entertains a notion that she is treated ungenerously by her father and sister on account of the latter requiring to leave home and reside at home in order to take special charge of the former, who is timorous, superstitious and cowering in the highest degree.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Margaret Laughlan states - that she often threatens to take either her own life or her father's, as that nothing would be required at her hand for to destroy - that she frequently gets into paroxysms of weeping, crying aloud, raging &c - is frequently sullen and refuses to leave her room for days together - no appreciable cause being known. - she refuses to engage in any kind of domestic duties; and Laughlan states she would rather starve than cook his meals. Mrs Docherty who resides in the house with Gibson, says - she disturbs her greatly by her abuse - has heard her say she would cut her own throat. Gibson's father confirms these statements, and also says keeps her door bolted at nights, fearing she may inflict some bodily injury on him. His chief fear, however, is, that she will rather destroy herself than others.

Name and Medical Designation, Alfred McKinley Millman, M.B. &c.

Place of Abode, New Galloway

DATED this fifth day of March One thousand eight hundred and Sixty seven.

(1) Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a Pauper state so.

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

(6) State the facts.

(7) State the information, and from whom derived.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Robert Shaw
being a (1) Bachelor of Medicine & Master of Surgery of University of Edinburgh
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Gibbshill,
parish of Balmaclellan in the County
Kirkcudbright separately from any other Medical Practitioner
visited and personally examined (4) Agnes Gibson (Pauper)
and that
the said Agnes Gibson is a (5) insane person
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Deficiency of power; Sudden fits of Laughter without any apparent cause; hesitates in answering questions, great distrust & Suspicions of Strangers. & general gait of a Lunatic

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her father states that she has threatened herself to cut the throat of the woman with whom she lives & also to destroy him. that she will not get out of bed during the day & refuses all

Name and Medical Designation, Robert Shaw. M.D.

Place of Abode, Shankhill, Dumfries

DATED this Fifth day of March One thousand eight hundred and Sixty Seven years

(1) Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street, and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a pauper state so.

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

(6) State the facts.

(7) State the information, and from whom derived.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar, Esq. (1) Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) James McMichael Certificates under the hands of Alfred McKinlay Millman and Robert Shaw, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Gibson, Pauper and that the said Agnes Gibson is a (5) person of unsound mind and a proper Person, to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Gibson as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Gibson which accompanied the said Petition.

DATED this ~~Fourteenth~~ x day of March One thousand eight hundred and Sixty Seven years. (one word delete.)

W H Dunbar

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1
283

v Agnes Gibson
20th March
1867

1
283

Agnes Gibson
20/3/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Bedford and his Substitutes,—

The Petition of the Rev. Robert Grant Brown Westbourne Villas

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Caroline Fanny Crawford your Petitioner's (3) Sister-in-law by marriage is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mrs Caroline Fanny Crawford to the Crichton Royal Institution for Lunatics and to sanction her admission into the the said Asylum.

State degree of Lordship or other dignity in which Petitioner stands to Lunatic.

R Grant Brown

The date of the Petition must be within thirteen clear days preceding the dates of the Medical Certificates.

Dated this 16th (4) day of March One thousand eight hundred and Sixty seven.

STATEMENT.

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

1	Christian Name and Surname of Patient at length,	Caroline Fanny Crawford
2	Sex and Age,	Lady of forty nine 49
3	Married, Single, or Widowed,	Widow
4	Condition of Life, and previous Occupation (if any),	Widow of missionary to the Jews in Jerusalem.
5	Religious Persuasion, so far as known,	Church of England
6	Previous Place of Abode,	Clifton near Bristol
7	Place where Found and Examined,	1 Westbourne Villas Bedford.
8	Length of time Insane,	Three months
9	Whether first Attack,	First attack
10	Age (if known) on first Attack,	49.
11	When and where previously under Examination and Treatment,	Bedford up to present date
12	Duration of existing Attack,	Three months
13	Supposed Cause,	Change of life
14	Whether subject to Epilepsy,	No
15	Whether Suicidal,	Not intentionally so. She does not see the danger of
16	Whether Dangerous to others,	No only screeched getting out of a high window
17	Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	——— not a pauper
18	Date of becoming Chargeable,	
19	Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Eliza Clarke 44 Albion Street London. Cousin. Henrietta Crawford 1 Westbourne Villas Bedford daughter. Not known whether any of the family have been insane.
20	Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 16th day of March One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) R Grant Brown

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Robert Buchanan
being a (1) Member of the Royal College of Surgeons of Eng
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) No 1. Wellington
Villas. Bedford. in the County of
Beds separately from any other Medical Practitioner
visited and personally examined (4) Caroline Fanny Crawford
and that
the said Caroline Fanny Crawford is a (5) person of
Insane and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Asking the absurd questions namely, If Italy bottles
would be broken - what would they do with them for those
the Persons would be under what time would they stay.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Miss Caroline Matilda Crawford, daughter, states that
she spends her money in useless purchases - as it is all her
own earnings earned and has threatened to throw money
out of the window

Name and Medical Designation, Robert Buchanan

Place of Abode, 60 High Street Bedford

Dated this 16th day of March One thousand eight
hundred and Sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, George Pocock Goldsmith
being a (1) Member of the Royal College of Surgeons in
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) No 1 Wellington
Villas Bedford in the County of
Beds separately from any other Medical Practitioner,
visited and personally examined (4) Caroline Fanny Crawford, Wellington
and that
the said Caroline Fanny Crawford is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Talks all sorts of nonsense: - says that she
wants to buy the moon, and built in her
kitchen to keep oysters in. - Believes she
eaten twenty oysters, shells and all.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Miss Caroline Matilda Crawford, relates her spending
money, and making purchases without any regard
to their value; - talks nonsense constantly about
"German metaphysics".

Name and Medical Designation, George P. Goldsmith M.R.C.S.

Place of Abode, 4 Harpur Place Bedford

Dated this 16th day of March One thousand eight
hundred and Sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Dated this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) The Reverend Robert Grant Brown No 1 Westbourne Villa, Bedford,
Certificates under the hands of Robert Couchman
and George Beech Goldsmith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Caroline Fanny Crawford widow, Pebbleston Water in Law and that the said Mrs Caroline Fanny Crawford is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Caroline Fanny Crawford as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Caroline Fanny Crawford which accompanied the said Petition.

Dated this Eighteenth day of March One thousand eight hundred and Sixty seven

James Burns

To the Superintendent of the (7) Public Asylum of Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Renfrew *and his Substitutes,—*

The Petition of Mrs Elizabeth Jack or Greenlees residing at number fifty Love Street Paisley humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Greenlees your Petitioner's (3) son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander Greenlees to the Crichton Royal Institution for Lunatics Dumfries called Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Elizabeth Greenlees

The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty second (4) day of March One thousand eight hundred and sixty seven.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Alexander Greenlees.
Sex and Age,	male. aged 22 years.
Married, Single, or Widowed,	Single.
Condition of Life, and previous Occupation (if any),	No occupation.
Religious Persuasion, so far as known,	Protestant. Established Church of Scotland.
Previous Place of Abode,	Arran.
Place where Found and Examined,	Paisley.
Length of time Insane,	Since 1860 with intermissions.
Whether first attack,	This is the fourth attack.
Age (if known) on first Attack,	When fifteen years of age.
When and where previously under Examination and Treatment,	Gartnavel Asylum Glasgow for 6 months from Jany 1860. also Crichton Institution from February till Novr 1861 & from February 1862 till July 1864.
Duration of existing Attack,	Not known exactly but at least for a month.
Supposed Cause,	Not known, unless hereditary.
Whether subject to Epilepsy,	No.
Whether Suicidal,	No.
Whether Dangerous to others,	No.
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper.
Date of becoming Chargeable,	Do
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Elizabeth Jack or Greenlees 50 Love St Paisley his mother. His father, now dect, was for a time insane.
Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twenty second day of March One thousand eight hundred and sixty seven.

(*To be signed by Party applying*) Elizabeth Greenlees.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William M'Kechnie being a (1) Graduate of the University of Glasgow and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) within the County Buildings Paisley in the County of Renfrew separately from any other Medical Practitioner visited and personally examined (4) Alexander Greenlees Resident in Camphill Asylum and that the said Alexander Greenlees is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Suspicious and a fixed determination to engage in commercial pursuits of a worthless character, money, reckless and what means of the same

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Unsettled state of mind - continued wanderings about the country - anxious to deal in stock & speculate to a large extent - has no money - his brother & father have supplied large sums of money - his father & brother

Name and Medical Designation, W M'Kechnie M.D. Physician

Place of Abode, Greenhill House Paisley

Dated this 22nd day of March One thousand eight hundred and sixty seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Daniel Richmond being a (1) Graduate of the University of Glasgow and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) within the County Buildings Paisley in the County of Renfrew separately from any other Medical Practitioner visited and personally examined (4) Alexander Greenlees Resident in Camphill Asylum and that the said Alexander Greenlees is a (5) Person of Unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) An excited appearance and manner and talking of numerous sales and purchases of stock

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Unsettled State of Mind and habits wandering about the Country Prosecuting Commercial Speculations and Bargains to an extravagant and unwarrantable extent

Mr Archd Gardner Writer Paisley

Name and Medical Designation, Daniel Richmond

Place of Abode, 32 New Street Paisley

Dated this 22d day of March One thousand eight hundred and Sixty seven years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hodge Lazenne (1) Sheriff Substitute
of the (2) County of Renfrew
having had produced to me, with a Petition at the instance of (3) Mr. Elizabeth Lack or Greenlees residing at 50 Lone Street Paisley
Certificates under the hands of William McKechnie M.D. Paisley
and Daniel Richmond M.D. Paisley, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexander Greenlees before named and that the said Alexander Greenlees is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Greenlees as a Patient into the (6) Public Asylum at Dumfries called the × and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Greenlees which accompanied the said Petition.

× Southern Counties Asylum being a Department of the Crichton Royal Institution at Dumfries for Lunatics

Wm. Hodge

DATED this Twenty second day of March One thousand eight hundred and sixty seven

Wm. Hodge

To the Superintendent of the (7) Public Asylum at Dumfries called the Crichton Royal Institution for Lunatics.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Alexander Greenlees
22nd March
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of James Parker, Ploughman, Chapel Kirkpatrick Irongray humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Anne Parker, my wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Anne Parker to the Crichton Institution and to sanction her admission into the said Asylum.

(SIGNATURE) James Parker

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 31st (3) day of March One thousand eight hundred and Sixty seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Anne Parker
2. Sex and Age,	Female. 35 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	House wife
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Chapel Brae Kirkpatrick Irongray
7. Place where Found and Examined,	Glenfoot. Kirkpatrick Irongray
8. Length of time Insane,	6 days
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	35 years
11. When and where previously under Examination and Treatment,	None and nowhere
12. Duration of existing Attack,	6 days
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	James Parker. Chapel Brae Husband No
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNATURE)* *Name,* James Parker

DATED this 31st day of March One thousand eight hundred and Sixty seven

* To be signed by the Party applying.

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, James Munro
being a (1) Physician and Surgeon
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Glencaple
Kirkpatrick Juxta
Dumfries
in the County
separately from any other Medical Practitioner
visited and personally examined (4) Anne Parker, wife of James
Parker, Glencaple, Chapel
and
the said Anne Parker
is a (5) person
unsound mind
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Wild rambling manner. saying & crying out that
her soul is lost, fancying a great number
of ills, that she is too bad to be saved &c

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
the same facts

(SIGNED) *Name and Medical Designation,* James Munro M.D.

Place of Abode, Moffat

DATED this 30 day of March One thousand eight
hundred and Sixty seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate: e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, William Ramsay McNab
being a (1) Graduate in Medicine of the University
of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern
Crichton Asylum
Dumfries
in the County
separately from any other Medical Practitioner
visited and personally examined (4) Anne Parker, wife of James
Parker, Glencaple,
and
the said Anne Parker
is a (5) person
unsound mind
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) she is restless
and excited. and has delusions about her
soul being lost.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her attendant informs me that she has
been much excited during last night. sleeping
but little

(SIGNED) *Name and Medical Designation,* William Ramsay McNab M.

Place of Abode. Crichton Royal Institution

DATED this 4th day of April One thousand eight
hundred and Sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Anne Parker is a (1) person of unsound mind hereby further certify that the Case of the said Anne Parker is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, James Munro M.D. Surgeon

Place of Abode, Moffat

DATED this 30th day of March One thousand eight hundred and Sixty seven

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Lauderdale Maitland Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Parker, Sorghmans Chapel Kirkpatrick Juxta Certificates under the hands of James Munro M.D. and William Ramsay Mc Nab M.D., being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Anne Parker wife of Petitioner and that the said Anne Parker is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Anne Parker as a Patient into the (6) public Asylum of Southern Counties Dumfries and I authorize Re-v Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Anne Parker which accompanied the said Petition.

(SIGNATURE) L Maitland

DATED this Second day of April One thousand eight hundred and Sixty seven

To the Superintendent of the (7) public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

1/186

v Anne Parker

31/3/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Wigton and of Kirkcudbright and his Substitutes,—

the parish of Stoneykirk The Petition of Thomas Kennedy Inspector of Poor for humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret M.Cormick a Lunatic pauper ~~your Petitioner's~~ (3) presently chargeable to the Parish of Stoneykirk is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret M.Cormick to the Southern Counties Asylum at Dumfries and to sanction her admission into the the said Asylum.

(3) State degree of friendship or other affinity in which Petitioner stands to Lunatic.

Thomas Kennedy

(4) The date of the Petition must be within fifteen clear days including the dates of the Medical Certificates.

Dated this Twentyeighth (4) day of March One thousand eight hundred and Sixty seven

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STATEMENT.

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

1	Christian Name and Surname of Patient at length,	Margaret M.c Cormick
2	Sex and Age,	63½ years -
3	Married, Single, or Widowed,	Single —
4	Condition of Life, and previous Occupation (if any),	Domestic Servant -
5	Religious Persuasion, so far as known,	Protestant
6	Previous Place of Abode,	Whitpool
7	Place where Found and Examined,	Whitpool
8	Length of time Insane,	At Last for Lunatic 13th April 1862
9	Whether first Attack,	Not known —
10	Age (if known) on first Attack,	58 years about
11	When and where previously under Examination and Treatment,	In Parish of Stoneykirk
12	Duration of existing Attack,	Since 1862
13	Supposed Cause,	Hereditary
14	Whether subject to Epilepsy,	- Yes —
15	Whether Suicidal,	- No —
16	Whether Dangerous to others,	No
17	Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Stoneykirk
18	Date of becoming Chargeable,	12th April 1862
19	Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Wm Mc Cormick Farmer - Brother - Ardwell - Mother dead - Uncle —
20	Special circumstances (if any) preventing the insertion of any of the above particulars,	None —

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twentyeighth day of March One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) Thomas Kennedy Inspector.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Charles Mackenzie Ross Physician & Surgeon
being a (1) Physician & Surgeon.
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Whitepark
in the County
Wigtown
separately from any other Medical Practitioner
visited and personally examined (4) Margaret Mc Cormick
Lunatic pauper Whitepark
the said Margaret Mc Cormick is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Mt Subject. Violent & dangerous when roused. Incoherent in conversation. Violent & dangerous when roused. Incoherent in conversation. Violent & dangerous when roused. Incoherent in conversation

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Peter McLean Esquire (1) Sheriff Substitute of the (2) County of Wigtown having had produced to me, with a Petition at the instance of (3) Thomas Kennedy Inspector of the Poor of the Parish of Stoneykirk Certificates under the hands of Charles Morland Ross and Hugh Agnew, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret McCormick residing at Whilpool and that the said Margaret McCormick is a (5) Lunatic pauper and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret McCormick as a Patient into the (6) Counties Asylum ~~at~~ at Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret McCormick which accompanied the said Petition.

DATED this twenty ninth day of March One thousand eight hundred and sixty seven.

P. MacLean Sh. Sub.

To the Superintendent of the (7)
Asylum of The Southern Counties Asylum Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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v. v. Thangard Mc. Cormick

2/4/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Wigton & Kirkcudbright and his Substitutes, for Wigtownshire or any of them:

The Petition of William Henry Hughan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Ann Hamilton or Thompson your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Ann Hamilton or Thompson to the Southern Counties' Asylum and to sanction her admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

W H Hughan

(4) The date of the petition must be with fourteen clear days following the dates of the Medical Certificates.

DATED this 4th (4) day of April One thousand eight hundred and 67.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mary Ann Hamilton or Thompson
2. Sex and Age,	Female, 21 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Domestic servant
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	Newton Stewart
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	Two months and two weeks
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	. . . .
11. When and where previously under Examination and Treatment,	. . . .
12. Duration of existing Attack,	Two months and two weeks
13. Supposed Cause,	Consequences of childbirth
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Penninghame
18. Date of becoming Chargeable,	. . . .
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Sarah Deane, Newton Stewart Mother — Not known Robert Thompson Husband
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Carter Newton Stewart

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 4th day of April One thousand eight hundred and 67

(*To be signed by Party applying*) W H Hughan

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James Clark.
being a (1) Licentiate of the Faculty of Physicians a Glasgow.
and being in actual practice as a (2) Surgeon.
hereby certify, on soul and conscience, that I have this day, at (3) the Wigto Newton Stewart in the County Wigtownshire separately from any other Medical Practitione visited and personally examined (4) Mary Ann Hamilton, Newton Stewart and the said Mary Ann Hamilton is a (5) person of unsound mind and a proper person to be detaine under Care and Treatment, and that I have formed this opinion upon the followin grounds, viz.:—

(6) *State the facts.*

at times she is quite incoherent

1. Facts indicating Insanity observed by myself: (6)
Her temper and disposition are changed. She is to fits of anger when she curses her friends. She dislike to her infant and husband. She is disposed to asks to have her hair shorn & her body clothes washed in sheep

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
I have been informed by Thomas Dearie that said she will drown herself, or cut her throat that she attempted to choke his mother —

Name and Medical Designation, James Clark, Surg.

Place of Abode, Newton Stewart

DATED this Third day of April One thousand eight hundred and Sixty Seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Fugus McKenna
being a (1) Licentiate of the Faculty of Physicia Surgeons of Glasgow
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Wigtown Newton Stewart in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Ann Hamilton and that the said Mary Ann Hamilton is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

She talks incoherently

1. Facts indicating Insanity observed by myself: (6)
She is most anxious we give her the wa on the street to drink. Will not sit in the except in a state of nudity. Cries for un

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
I am informed by Mr. Dearie that she threatened to commit suicide by drown or cutting her own throat.

Name and Medical Designation, Fugus McKenna

Place of Abode, Newton Stewart.

DATED this Fourth day of April One thousand eight hundred and Sixty-Seven years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Macduff Rhind Esqure Sheriff Substitute (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) William Henry Hughan Inspector of Poor
Certificates under the hands of James Clark Surgeon
and Fergus McKenna Surgeon, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Mary Ann Hamilton or Thompson Pauper and that the said
Mary Ann Hamilton or Thompson is a (5) Person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Ann Hamilton or Thompson as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Ann Hamilton or Thompson which accompanied the said Petition.

A. Rhind

DATED this fifth day of April One thousand eight hundred and sixty seven

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Mary Ann Hamilton or Thomson

April 1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict. Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

[FORM I]

NOTICE OF DEATH, RECOVERY, TRANSFERENCE OF LIABILITY, OR REMOVAL FROM POOR-ROLL.

This Notice is given by Inspectors of Poor.

I HEREBY GIVE YOU NOTICE, That Mary Ann Hamilton or Thompson a Pauper Lunatic of the Parish of Penninghame resident in (1) Southern Counties Asylum at Dumfries, has ceased to be chargeable, as a Pauper Lunatic, to the said Parish, ~~on the~~ ~~death~~ by (2) Transference to the Roll of the Parish of Kilwinning; and please transmit a Form of obligation to the Inspector of Kilwinning.

Inspector.

W H Hughan

Penninghame Parish.

Dated this 2 3rd day of May One Thousand Eight Hundred and 67

To ~~the Secretary of the General Board of Lunacy~~

S H Gilchrist

(1) State the Asylum, or House, or Parish in which resident.

(2) Recovery, or Death, or Transference to the Roll of the Parish of , or Removal from the Poor-Roll. In cases of Death, cause to be stated.

Special circumstances (if any) preventing the insertion of any of the above particulars,

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, James Brown

DATED this Eleventh day of April One thousand eight hundred and Sixty Seven.

* To be signed by the Party applying.

P. T.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict. Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

) Sheriff or Steward.
) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,*—

or Sanquhar The Petition of James Brown Inspector

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Gilchrist my Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Gilchrist to the Southern Counties Asylum, and to sanction her admission into the said Asylum.

(SIGNED) James Brown

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Eleventh (3) day of April One thousand eight hundred and Sixty Seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Margaret Gilchrist
2. Sex and Age,	F. 70 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	United Presbyterian Church of Scotland
6. Previous Place of Abode,	Newtown Sanquhar.
7. Place where Found and Examined,	Newtown Sanquhar.
8. Length of time Insane,	Six Months
9. Whether first attack,	First
0. Age (if known) on first Attack,	69 to 70.
1. When and where previously under Examination and Treatment,	
2. Duration of existing Attack,	Six Months
3. Supposed Cause,	No cause can be assigned
4. Whether subject to Epilepsy,	No.
5. Whether Suicidal,	No.
6. Whether Dangerous to others,	No.
7. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Sanquhar.
8. Date of becoming Chargeable,	10th April 1867.
9. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	James Gilchrist Brother Newtown. Sanquhar No.
0. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* James Brown

DATED this Eleventh day of April One thousand eight hundred and Sixty Seven.

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Kay Surg[illegible] being a (1) Licentiate of the Facul[illegible] Physicians & Surgeons of Glasg[illegible] and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) her Bri[illegible] house Newton Sanguhar in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Margaret Gilch[illegible] Domestic Servant Pauper and that the said Margaret Gilchrist is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She sits beside the fire in a melancha[illegible] mumbling that she is lost having sought Christ aright.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) [illegible] ceased to do any work, is for the part melancholy - but at time [illegible] gets irritable and scolds her Bro[illegible] sister — From James Gilchrist

(SIGNED) *Name and Medical Designation,* Wm Kay Surg[illegible]

Place of Abode, Sanguhar

DATED this 11th day of April One thousand eight hundred and sixty seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, David Sharp being a (1) graduate in Medicine and Surgery of the Uni[illegible] of Edinburgh and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Margaret Gilchrist Domestic servant pauper and that the said Margaret Gilchrist is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She sits in a melancholy and despondent state, and though not[illegible] will scarcely answer questions; and complains [illegible] though she knows there is a Saviour she is lost.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Dr. McNab informs me that whenever spoken to she de[illegible] that she is lost.

(SIGNED) *Name and Medical Designation,* David Sharp M.B. M.C.

Place of Abode, Crichton Royal Institution

DATED this twelfth day of April One thousand eight hundred and sixty seven.

5

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate No. I., hereto annexed, to the effect that Margaret Gilchrist is a (1) person of unsound mind, hereby further certify that the Case of the said Margaret Gilchrist is One of Emergency, and I recommend the immediate removal of the said Margaret Gilchrist to an Asylum accordingly.

Name, Wm Kay Surgeon

Place of Abode, Langholm

DATED this 11th day of April One thousand eight hundred and sixty seven

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexander Dalle, Esquire (1) Advocate, Sheriff substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Brown Inspector of Poor Langholm Certificates under the hands of William Kay surgeon and David Sharp, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret Gilchrist Domestic servant Spinster and that the said Margaret Gilchrist is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Gilchrist as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Gilchrist which accompanied the said Petition.

(SIGNED) John A. Dalle

DATED this Thirtieth day of April One thousand eight hundred and sixty seven years

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

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Margaret Gilchrist

11/4/67

N.B.—The Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Unto the Honourable the (1) Sheriff of ~~the~~ (2) Wigton and his Substitutes,—

(1) Sheriff or Steward. (2) Shire or Stewartry.

The Petition of Thomas Kennedy Inspector of Poor of the parish of Stonykirk humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Booth residing at Sandmill Stonykirk your Petitioner's (3) Lunatic Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Booth to the Southern Counties Asylum at Dumfries and to sanction his admission into the said Asylum.

(3) State degree of relationship or other circumstances in which Petitioner stands to Lunatic.

Thomas Kennedy Inspector

DATED this Thirteenth (4) day of April One thousand eight hundred and Sixty seven

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	James Booth
Sex and Age,	Male 41 years
Married, Single, or Widowed,	Widower
Condition of Life, and previous Occupation (if any),	Labourer
Religious Persuasion, so far as known,	Protestant
Previous Place of Abode,	Sandmill
Place where Found and Examined,	Sandmill
Length of time Insane,	10 Mos ~~Years~~.
Whether first attack,	no
Age (if known) on first Attack,	41 years
When and where previously under Examination and Treatment,	Frequently in Crichton Asylum
Duration of existing Attack,	9 Mos
Supposed Cause,	not known
Whether subject to Epilepsy,	no
Whether Suicidal,	not to be suspected of
Whether Dangerous to others,	same as above
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Stonykirk
Date of becoming Chargeable,	Since July 1866
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Margaret Booth Sister Sandhill Stonykirk. None known to be subject to Insanity.
Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirteenth day of April One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) Thomas Kennedy Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Charles Morland Ross being a (1) Doctor of Medicine & Licentiate of the Royal College of Surgeons Edinburgh. and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Sandhead Parish of Stoneykirk Wigtown in the Cou separately from any other Medical Practit visited and personally examined (4) James Booth. Sandhead Stoneykirk - Pauper — an the said James Booth is a (5) person Insane and a proper person to be det under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) That his whole appearance indicates insanity - cannot be pre-vailed on to answer questions - obstinate in a his actions - inclines to violence - and the fa of his having been twice in an asylum before

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Sister states - that she is afraid of him de mischief - sometimes refuses food - has ke his bed since June 1866. Cannot be prevailed on to rise -

Name and Medical Designation, Cha Ross M D & L R C

Place of Abode, Lake Cottage

DATED this Thirteenth day of April One thousand e hundred and Sixty Seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Hugh Agnew being a (1) Licentiate of the College of Surgeo and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Sandhead Stoneykirk Wigtown in the Count separately from any other Medical Practitio visited and personally examined (4) James Booth - Sandhead Stoneykirk Pauper and the said James Booth is a (5) Lunatic and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) That I know he has been twice in an asylum before - the I have known him to attempt violence - that the formation of his head and general appearance indicates insanity -

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) That his sister and others feel alarmed for their own safety - and insist on his removal -

Name and Medical Designation, H Agnew Surgeon

Place of Abode, Sandhead Stoneykirk

DATED this 12th day of April One thousand eig hundred and Sixty Seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Charles Morland Ross
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Dated this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Macduff Rhind Esquire Advocate Sheriff Substitute
of the (3) County of Wigtown
having had produced to me, with a Petition at the instance of (4) Thomas Kennedy, Inspector of Poor of the Parish of Stoneykirk
Certificates under the hands of Charles Morland Ross, M.D.
and Hugh Agnew Surgeon , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5)
James Booth residing at Sandwell Stoneykirk, Pauper and that the said
James Booth is a (6) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Booth as a Patient into the (7) Southern Counties Asylum of Dumfries and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Booth which accompanied the said Petition.

Dated this fifteenth day of April One thousand eight hundred and sixty seven

M. Rhind

To the Superintendent of the (7) Southern Counties Asylum of Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/290

James Booth

16/4/67

James Booth

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of George Steel Nunnglow in Annan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Steel your Petitioner's (3) Wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Steel to the Royal Crichton Institution and to sanction her admission into the the said Asylum.

(3) State degree of relationship or otherwise in which Petitioner stands to Lunatic.

George Steel

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 17th (4) day of April One thousand eight hundred and 67

STATEMENT.

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

Christian Name and Surname of Patient at length,	Janet Carruthers M'Lean
Sex and Age,	Female 25 years
Married, Single, or Widowed,	married
Condition of Life, and previous Occupation (if any),	Comfortable and easy
Religious Persuasion, so far as known,	Established church of Scotland
Previous Place of Abode,	Bridge End Annan
Place where Found and Examined,	Nunnington Lodge Annan
Length of time Insane,	Six days
Whether first Attack,	First attack
Age (if known) on first Attack,	25 years
When and where previously under Examination and Treatment,	Nunnington Lodge Annan Six days
Duration of existing Attack,	
Supposed Cause,	Over anxiety about a serious illness of youngest baby and husband able suffering from typhoid fever
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	No but uses threatening symptoms of violence
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of the Family known to be or to have been Insane,	George Steel Husband Yes, Her Maternal grandmother but at a very advanced age
Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 17th day of April One thousand eight hundred and 67

(*To be signed by Party applying*) George Steel
Husband P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Agnew Black Bogie.
being a (1) Physician of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Newington Annan — in the County Dumfries — separately from any other Medical Practitioner visited and personally examined (4) Mrs Janet Steel, and the said Mrs Janet Steel — is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has delusions of a religious character; also of being poisoned; is violent; refuses food.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) In addition to the above, has lost her [illegible] to her relations on the ground that they [illegible] [illegible] [illegible] of her.

Mother & Servants.

Name and Medical Designation, A. B. Bogie.

Place of Abode, Fields Parks, Annan

DATED this seventeenth day of April One thousand eight hundred and sixty seven. —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, David Sharp
being a (1) graduate in Medicine and Surgery of the University of Edinburgh
and being in actual practice as a (2) Physician and Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Institution Dumfries in the County separately from any other Medical Practitioner visited and personally examined (4) Mistress Janet Steel Watchmans wife and the said Mrs Janet Steel is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is noisy and incoherent, and refuses to answer my questions, for she is [illegible] it is impossible I can be a doctor, that I am a minister of religion, indeed that I am Mr. Spurgeon but [illegible] altered, being very much thinner.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, David Sharp M.B., C.M.

Place of Abode. Crichton Royal Institution (late of Lo[illegible])

DATED this eighteenth day of april One thousand eight hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Agnew Black Bogie, being (1) a Physician of the University of Edinr. hereby certify, on soul and conscience, that I have this day, at (2) Newington Lodge, Annan, in the County of Dumfries, seen and personally examined Mrs Janet Steel, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Agnew B. Bogie, M.D.

DATED this seventeenth day of April One thousand eight hundred and sixty seven, —

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) George Steel, Newington Lodge Annan Certificates under the hands of Agnew Black Bogie and David Sharp, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Janet Steel, Petitioners wife and that the said Mrs Janet Steel is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Janet Steel as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Janet Steel which accompanied the said Petition.

DATED this Twentieth day of April One thousand eight hundred and Sixty Seven

John P. Trotter

To the Superintendent of the (7) Public *Asylum of* Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1066

Janet Steel

17/4/67

5/. p° 128

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of William Roy. 2 Observatory Place Maxwelltown humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Roy your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Roy to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

W. Roy

Dated this 19th (4) day of April One thousand eight hundred and Sixty seven.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Thomas Roy
Sex and Age,	Male. 40.
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Mercantile Clerk
Religious Persuasion, so far as known,	Episcopalian
Previous Place of Abode,	Observatory Place. Maxwelltown
Place where Found and Examined,	as above
Length of time Insane,	16 Years at intervals
Whether first attack,	no
Age (if known) on first Attack,	24 Years
When and where previously under Examination and Treatment,	Crichton Institution
Duration of existing Attack,	2 Months
Supposed Cause,	Drunkenness
Whether subject to Epilepsy,	no
Whether Suicidal,	no
Whether Dangerous to others,	yes
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Roy Observatory Place Maxwelltown. Father No
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 19th day of April One thousand eight hundred and Sixty seven.

(*To be signed by Party applying*) W Roy

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, John Dickson being a (1) Graduate of the Edinburgh Univ and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Observ Place in the Cou Kirkcudbright separately from any other Medical Practit visited and personally examined (4) Thomas Roy - Gent an the said Thomas Roy is a (5) person unsound mind and a proper person to be de under Care and Treatment, and that I have formed this opinion upon the foll grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Lot of control over himself as stimulants. Mind naturally weak intoxicated he is dangerous to others

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Has repeatedly been placed und restraint from the same cause. I am by his Father that he suffered from Sun when in Jamaica

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dun

DATED this 19th day of April One thousand hundred and Sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, William Smith Kerr being a (1) Graduate of the Glasgow Univers and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Cricht Royal Institution in the Cou Dumfries separately from any other Medical Practit visited and personally examined (4) Thomas Roy. Gaukers and the said Thomas Roy is a (5) Person a unsound mind and a proper person to be de under Care and Treatment, and that I have formed this opinion upon the foll grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Has strong symptoms of having had over indul in stimulants, says he has been lo the habit of losing control over himse

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Has been under restraint for one more than once.—

Name and Medical Designation, William S Ker

Place of Abode, Bacclaugh St Du

DATED this 20th day of April One thousand hundred and Sixty Seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Dickson being (1) a Graduate of the Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) Observatory Place in the County of Dumfries, seen and personally examined Thomas Roy - Gentleman, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Dickson MD

DATED this 19th day of April One thousand eight hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Malcolm Trotter Esqre (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Roy 2 Observatory Place Maxwelltown Certificates under the hands of John Dickson and William Smith Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Thomas Roy, Petitioner's Son and that the said Thomas Roy is a (5) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Roy as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Roy which accompanied the said Petition.

DATED this Twelfth day of April One thousand eight hundred and Sixty Seven years

J. Malcolm Trotter

To the Superintendent of the (7) Public Asylum of Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1069

Thomas Roy

19/11/69

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of Adam Semple, Inspector of Poor of Glencairn humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Hunter, Dressmaker, Annyhive your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Hunter to the Southern Counties Asylum Dumfries and to sanction her admission into the the said Asylum.

(3) State degree of Pauperism or other particularity in which Petitioner stands to Lunacy.

Adam Semple

Dated this Twenty Seventh (4) day of April — One thousand eight hundred and Sixty seven.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1 Christian Name and Surname of Patient at length,	Janet Hunter
2 Sex and Age,	Female 40
3 Married, Single, or Widowed,	Widowed
4 Condition of Life, and previous Occupation (if any),	Dressmaker
5 Religious Persuasion, so far as known,	Protestant
6 Previous Place of Abode,	Pumpark & Morton Moniaive, Glencairn
7 Place where Found and Examined,	Moniaive, Glencairn
8 Length of time Insane,	About One year
9 Whether first Attack,	First attack
10 Age (if known) on first Attack,	38
11 When and where previously under Examination and Treatment,	No where
12 Duration of existing Attack,	One year
13 Supposed Cause,	Not Known
14 Whether subject to Epilepsy,	no
15 Whether Suicidal,	no
16 Whether Dangerous to others,	not
17 Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Durrisdeer
18 Date of becoming Chargeable,	Twenty Seventh of April 1867
19 Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Residing with his mother Mary Black Moniaive, Glencairn and no member of the family has been known to be Insane
20 Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twenty Seventh day of April — One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) Adam Semple

Inspector of Poor, Glencairn

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, David Sharp.
being a (1) graduate in Medicine and Surgery of the University of Edinburgh
and being in actual practice as a (2) Physician and Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties asylum Dumfries in the County of Dumfries
separately from any other Medical Practitioner, visited and personally examined (4) Janet Hunter, a widow and pauper
the said Janet Hunter is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) she says that her sisters and sisters call her a whore, and would take her life if so minded that the minister of her parish has four times called her a whore from the pulpit, and that every Sunday he mis calls her in some way or other.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr. Semple the inspector of poor of Glencairn, says that she states that every person is conspiring against her, especially her own friends, and that this statement is totally without foundation.

Name and Medical Designation, David Sharp. M.B.C.M.

Place of Abode, Crichton Royal Institution Dumfries

DATED this twenty seventh day of april One thousand eight hundred and sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Paton
being a (1) Licentiate of the Faculty of Physicians & Surgeons Glasgow.
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) North St. Dumfries in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Janet Hunter a widow and pauper
the said Janet Hunter is a (5) Person of unsound mind and that a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) ~~Her general appearance~~ ~~shows that she~~ ~~is in love with the Minister~~ ~~Speaks of him~~ ~~Shrieks and raves on the Inspector~~ ~~And is disposed to strike~~ ~~Obscene language~~ ~~wrote most absurd letter to the Minister~~ ~~complaining~~ ~~delusions of mind~~ imagining her mother & sister Conspiring against her

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Spoke out in the church and in a crowd she called her a whore, wrote several absurd letters to the Minister and on false delusions of mind

Name and Medical Designation, Wm Paton Surgeon

Place of Abode, Dalgleston Mansion

DATED this 27th day of April One thousand eight hundred and sixty seven years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, David Sharp
being (1) a graduate in Medicine and Surgery of the University of Edinburgh.
hereby certify, on soul and conscience, that I have this day, at (2) the Southern Counties asylum Dumfries
in the County of Dumfries, seen and personally examined
Janet Hunter, widow and pauper, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

David Sharp. M.B. C.M.

DATED this twenty seventh day of April One thousand eight hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Adam Semple Inspector of Poor of Glencairn
Certificates under the hands of David Sharp
and William Paton, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Hunter, Dressmaker, Moniaive a Pauper and that the said Janet Hunter is a (5) Person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Hunter as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Hunter which accompanied the said Petition.

DATED this Thirtieth day of April One thousand eight hundred and Sixty Seven

John P. Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

N.B.—This FORM shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward.
Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Sheriffdom of Wigton & Kirkcudbright *and his Substitutes,*—

The Petition of John Tandy Butler, Galloway House humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Francom or Tandy your Petitioner's (3) wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Francom or Tandy to the Orchton Royal Institution and to sanction her admission into the the said Asylum.

State degree of ...tionship or other ...city in which Peti...er stands to Luna...

John Tandy

DATED this twentieth (4) day of April One thousand eight hundred and Sixty Seven

The date of the ...tion must be with... ...ourteen clear days ...wing the dates of Medical Certifi...a.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Mary Francom or Tandy.—
Sex and Age,	Female - 53.
Married, Single, or Widowed,	Married
Condition of Life, and previous Occupation (if any),	wife of Petitioner John Tandy
Religious Persuasion, so far as known,	Protestant -
Previous Place of Abode,	3 Victoria Terrace Beaufort Street London -
Place where Found and Examined,	Galloway House in the County of Wigtown
Length of time Insane,	Doubtful - but probably about a year
Whether first Attack,	First -
Age (if known) on first Attack,	—
When and where previously under Examination and Treatment,	—
Duration of existing Attack,	Probably about a year. -
Supposed Cause,	Two attacks of rheumatic fever, family distress and hereditary predisposition
Whether subject to Epilepsy,	No
Whether Suicidal,	Yes
Whether Dangerous to others,	Not known to be so
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
Date of becoming Chargeable,	—
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Tandy, the petitioner - Husband a niece known to be so - & in asylum
Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this twentieth day of April One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) John Tandy

P. P.

MEDICAL CERTIFICATE, No. I.

(1) Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a Pauper state so.

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

I, the undersigned, Dunbar White being a (1) Graduate in Medicine of the University of Edinburg and a Licentiate of the Royal College of Surgeons of Edinbu and being in actual practice as a (2) Physician and Surgeon in Whitt hereby certify, on soul and conscience, that I have this day, at (3) Galloway Ho the parish of Sorbie in the Coun Wigton separately from any other Medical Practiti visited and personally examined (4) Mary Francom or Tandy wife of residing with her husband in the said Galloway House and the said Mary Francom or Tandy is a (5) person of u Mind and a proper person to be dets under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

(6) State the facts.

1. Facts indicating Insanity observed by myself: (6) The Patient has been in Great nervousness, and restlessness by day & by night for some time, and very despondent, as well as den fits of excitement under which she jumps suddenly & wildly from her bed, strikes herself, and dash against any hard object she can find. She requires constant watching by day & by night to preven injuring herself—

(7) State the information, and from whom derived.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) From her husband and other servants in Galloway House I have ascertained that she often beats h wishes to tear it open, strikes her head against hard objects, has often threatened to commit su actually attempted to strangle herself a few days ago, and yesterday ~~[illegible]~~ under pretence o leaving her room for needful purposes—that she got out in a state of undress, ran towards the sea, a with a view of drowning herself, which she has often threatened to do—

Name and Medical Designation, Dunbar White M.D

Place of Abode, Whithorn, Wigtonshire

DATED this twentieth day of April One thousand eig hundred and sixty seven —

MEDICAL CERTIFICATE, No. II.

(1) Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street, and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a pauper state so.

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

I, the undersigned, Mex^r Mc Millan being a (1) Licentiate of the Royal College of Surgeons Edin and being in actual practice as a (2) Surgeon in Whithorn hereby certify, on soul and conscience, that I have this day, at (3) Galloway Hou in the Parish of Sorbie in the County o Wigtown separately from any other Medical Practitione visited and personally examined (4) Mary Francom or Tandy Wife of John Tandy residing at Galloway House and th the said Mary Francom or Tandy is a (5) person of unsou Mind and a proper person to be detain under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) State the facts.

1. Facts indicating Insanity observed by myself: (6)

I have observed her very restless and excited

(7) State the information, and from whom derived.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

She requires constant watching by night and by day to preven from injuring herself has often threatned and once or twice attempted to commit s these facts I ascertained from her husband and other Servants of the House

Name and Medical Designation, Mex^r Mc Millan Surgeon

Place of Abode, Whithorn

DATED this Twentieth day of April One thousand eight hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Macduff Rhind Esquire (1) Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) John Jandy, Butler, Galloway House
Certificates under the hands of Dunbar White
and Alexander M'Lellan, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Mary Brancom or Jandy — the wife of the said John Jandy and that the said Mary Brancom or Jandy — is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Brancom or Jandy — as a Patient into the (6) Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Brancom or Jandy — which accompanied the said Petition.

DATED this twentieth day of April One thousand eight hundred and Sixty Seven

M. Rhind

To the Superintendent of the (7) Asylum of
Crichton Royal Institution

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

April 22/07.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes.*—

The Petition of John McKerlie Burnbrigh Mill humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Ann McKerlie ~~Husband~~ Wife your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Ann McKerlie to the S C Asylum Dumfries he and to sanction her admission into the the said Asylum.

(3) State degree of relationship or other circumstance in which Petitioner stands to Lunatic.

John McKerlie

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 29 (4) day of April One thousand eight hundred and 67 ~

STATEMENT.

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

Christian Name and Surname of Patient at length,	Mary Ann Mc. Kerlie
Sex and Age,	Female. 40.
Married, Single, or Widowed,	Married.
Condition of Life, and previous Occupation (if any),	No occupation. Housewife
Religious Persuasion, so far as known,	The Church
Previous Place of Abode,	Gairmuir.
Place where Found and Examined,	Home
Length of time Insane,	Two Months
Whether first Attack,	Second attack
Age (if known) on first Attack,	About 35 years old
When and where previously under Examination and Treatment,	At Home: Then at Liverpool Asylum.
Duration of existing Attack,	About two months
Supposed Cause,	A shock from her son Committing Suicide
Whether subject to Epilepsy,	No.
Whether Suicidal,	Inclined to Suicide
Whether Dangerous to others,	No.
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not a pauper.
Date of becoming Chargeable,	—
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Mc. Kerlie, Burnbrigh Mill Husband. Brother Kenmuir: her son Who Committed Suicide two months Ago For a few months before he did that act. None.
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this 29 day of April One thousand eight hundred and Sixty Seven ~

(To be signed by Party applying) John McKerlie

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an Idiot, *or* a person of unsound mind.

I, the undersigned, Andrew Crichton Chalmers being a (1) Doctor of Medicine & Edinburgh Licentiate of the Royal College of Surgeons Ed and being in actual practice as a (2) Physician Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Bankh Dumfries in the Co separately from any other Medical Pract visited and personally examined (4) Mary Anne Mc Kerlie at the said Mary Anne Mc Kerlie is a (5) Lunat and a proper person to be d under Care and Treatment, and that I have formed this opinion upon the fol grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is depres Incoherent: She complains of violent acting her friends Delusions Seem of Persecution that she attempt Exercise -

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Lunacy & the above by her Husband & who tells me she attempted to Shot herself last Thursday -

Name and Medical Designation, Andr. C. Chalmers

Place of Abode, Dumfries

DATED this 29th day of April One thousand hundred and Sixty Seven -

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, or an idiot, *or* a person of unsound mind.

I, the undersigned, David Sharp being a (1) graduate in Medicine and Surgery of the University Edinburgh and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southe Counties asylum Dumfries in the Com Dumfries separately from any other Medical Practit visited and personally examined (4) Mary Anne Mc Kerlie, housewife and the said Mary Anne Mc Kerlie is a (5) person of unsound mind and a proper person to be det under Care and Treatment, and that I have formed this opinion upon the foll grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She tells me sh since her sons death she has been very low spirited an melancholy, that she gets only about half an hours at night that she often feels tempted to run wild over t Country; and admits that she would like to do herself some i

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

None.

Name and Medical Designation, David Sharp M.B., C.M

Place of Abode, Crichton Royal Institution Dumfries

DATED this twenty ninth day of April One thousand hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Andrew Crichton Chalmers being (1) a doctor of Medicine & the County of Dumfries hereby certify, on soul and conscience, that I have this day, at (2) Burbrigh Mill in the County of Dumfries, seen and personally examined Mary Anne McKerlie, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Andr. C. Chalmers M.D.

Dated this 29th day of April One thousand eight hundred and Sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexr. Trotter Esqre. (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John McKerlie Burbrigh Mill Certificates under the hands of Andrew Crichton Chalmers and David Sharp, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Ann McKerlie, wife of Petitioner and that the said Mary Ann McKerlie is a (5) Lunatic and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Ann McKerlie as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Ann McKerlie which accompanied the said Petition.

Dated this Eighteenth day of April One thousand eight hundred and Sixty seven.

John A. Trotter

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Mary Anne McKerlie
29th April
1867

Blow on Head

20 & 21 *Vict., Cap.* 71. *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~the~~ (2) Wigtown & Kirkcudbright or ~~and~~ *his Substitutes,*—

The Petition of Andw Wales Inspector of Poor Old Luce humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Andw McCubbin is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Andw McCubbin to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Andw Wales Inspr of Poor

The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty ninth (3) day of April one thousand eight hundred and Sixty seven years

STATEMENT.

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

1.	Christian Name and Surname of Patient at length,	Andrew McCubbin
2.	Sex and Age,	Male Fifty four years
3.	Married, Single, or Widowed,	
4.	Condition of Life, and previous Occupation (if any),	Single Fishermen
5.	Religious Persuasion, so far as known,	Protestant
6.	Previous Place of Abode,	Glenluce
7.	Place where Found and Examined,	At his own house Glenluce
8.	Length of time Insane,	about ten days. apparently nervous some time previously
9.	Whether first Attack,	First
10.	Age (if known) on first Attack,	Fifty Four years
11.	When and where previously under Examination and Treatment,	0
12.	Duration of existing Attack,	Ten days
13.	Supposed Cause,	Low diet proximate Cause,
14.	Whether subject to Epilepsy,	Had Chorea when young
15.	Whether Suicidal,	Yes
16.	Whether Dangerous to others,	Doubtful through fear
17.	Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Old Luce when pauperized
18.	Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Jean McCubbin or Blain Sister Glenluce. One Sister Mrs McTaggart Hesterical. Mother and Grand mother said to have been both insane
19.	Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* Andw Wales Inspector of Poor

DATED this Twenty ninth day of April one thousand eight hundred and Sixty Seven years

[4.] * To be Signed by the Party applying.

Mary Anne McCubbin 29th April 1867

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William McCormack ~~Surgeon~~ being a (1) Surgeon and General practitioner and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Glen[illegible] in the Co[illegible] of Wigtown separately from any other Medical Pract[illegible] visited and personally examined (4) Andrew McCubbin Fisherman & interim pauper and the said Andrew McCubbin is a (5) person of unsound mind and a proper Person to be d[illegible] under Care and Treatment, and that I have formed this opinion upon the fol[illegible] grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) complains there are people in the house of an unseen to very restless, and has a very peculiar [illegible] Jealous of things that have no existence. [illegible] immediately after. He had attempted to commit Suicide on [illegible]

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His sister Mrs McTaggart stated that attempted twice to strangle himself

(SIGNED) *Name and Medical Designation,* } W McCormack

Place of Abode, Glenluce

DATED this 21 day of April One thousand hundred and sixty seven years —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Rob D Rose being a (1) Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Prison Wigtown and — in the Cour[illegible] Wigtown separately from any other Medical Practiti[illegible] visited and personally examined (4) Andrew McCubbin a pauper presently confined in the Prison of Wigtown and the said Andrew McCubbin — is a (5) person of unsound mind — and a proper person to be deti[illegible] under Care and Treatment, and that I have formed this opinion upon the follo[illegible] grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He labours u[illegible] hallucinations — for instance, he believes that he has brou[illegible] a plague on the land and also that he is under confine[illegible] for stealing straw, he has a vaccant stare and his gen[illegible] appearance altogether indicates an unsound state of min[illegible]

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) I am told by his Present Keepers that he has attempted to knock his head against the wall and would injure him[illegible] to danger of his life if not carefully watched. — He has alrea[illegible] injured himself severely by knocking on his head with a stone [illegible] was told me by the Inspector of Poor Mr Wales. Rob D Rose

(SIGNED) *Name and Medical Designation,* } Rob D Rose

Place of Abode Wigtown

DATED this 29th day of April one thousand e[illegible] hundred and sixty seven years —

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of one thousand eight hundred and

(1) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Macduff Rhind Esquire (1) Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Andrew Wales Inspector of Poor Old Luce
Certificates under the hands of William McCormack Surgeon
and Robert Duncan Rose Surgeon, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Andrew McCubbin a pauper and that the said
Andrew McCubbin is a (5) ~~Lunatic~~ person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Andrew McCubbin as a Patient into the (6) Southern Counties Asylum of Dumfries, at Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Andrew McCubbin which accompanied the said Petition.

(SIGNED) M. Rhind

DATED this twenty ninth day of April one thousand eight hundred and sixty seven years

To the Superintendent of the (7)
Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (1) County of Dumfries *and his Substitutes,*—

The Petition of John Dinwoodie Inspector of the Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Boe your Petitioner's (2) Pauper residing in Dumfries is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Boe to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(1) State degree of relationship or other society in which Petitioner stands to Lunatic.

John Dinwoodie

DATED this Third (3) day of May One thousand eight hundred and Sixtyseven

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Boe
2. Sex and Age,	Male 38 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Engine fitter
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	— do —
8. Length of time Insane,	not known
9. Whether first Attack,	yes
10. Age (if known) on first Attack,	about 38 years
11. When and where previously under Examination and Treatment,	Dumfries
12. Duration of existing Attack,	about a month
13. Supposed Cause,	supposed to be strong drink
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	3 May 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	not known do
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Third day of May One thousand eight hundred and Sixtyseven

(*To be signed by Party applying*) John Dinwoodie Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Marshall being a (1) Graduate of the Faculty of Physicians Surgeons Glasgow and Edin. of St. Dr. and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Jail Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) James Boe a Pauper and that the said James Boe is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks incoherently Declares that a butcher has got [illegible] top of his house and [illegible] [illegible] in great [illegible] and that he [illegible]

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The police state that he has been very violent towards his wife and neighbours

Name and Medical Designation, } Marshall [illegible]

Place of Abode, Buccleuch Street Dumfries

DATED this 3d day of May One thousand eight hundred and Sixty seven years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Scott being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Prison in Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) James Boe a Pauper and that the said James Boe is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has delusions and says that he is kept from sleeping by Ghosts &c. that all the ale casks in his shop have been emptied on the roof of his house &c.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His wife makes statements [illegible] to the above and declares that he has threatened to murder her with a Knife

Name and Medical Designation, } William Scott M.D.

Place of Abode, Dumfries

DATED this 3d day of May One thousand eight hundred and Sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Ritchie Trotter Esqre (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Brunwoods
Inspector of Poor Dumfries
Certificates under the hands of William Marshall
and William Scott , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Bob a Pauper residing in Dumfries and that the said James Bob is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Bob as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Bob which accompanied the said Petition.

DATED this Third day of May One thousand eight hundred and Sixty three

John R Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

v James Boe

3rd May

1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries and his Substitutes.—

The Petition of Susanna Pool Swordwell

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alice Pool

(3) State degree of relationship or other ability in which Petitioner stands to Lunatic.

your Petitioner's (3) Mother Daughter

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alice Pool to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

Susanna Pool

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Four (4) day of May One thousand eight hundred and Sixty Seven

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STATEMENT.

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

Christian Name and Surname of Patient at length,	Alice Pool
Sex and Age,	Female 36 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Farm Labour,
Religious Persuasion, so far as known,	United Presbyterian
Previous Place of Abode,	Swordwell
Place where Found and Examined,	Swordwell
Length of time Insane,	Five years
Whether first Attack,	First
Age (if known) on first Attack,	31
When and where previously under Examination and Treatment,	Swordwell
Duration of existing Attack,	Five years
Supposed Cause,	Religion
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	yes
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Annan
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Susanna Pool (Mother) Swordwell Annan No
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Four day of May One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) Susanna Pool

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Thomas Williamson being a (1) Licentiate of the Royal College of Surgeons in Edinburgh and being in actual practice as a (2) General Medical Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Sword... in the Parish of Annan in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Alice Pool residing with Mrs Robertson (working) at Sordale and the said Alice Pool is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(7) *State the facts.*

1. Facts indicating Insanity observed by myself: (7) Excitement and Speech, Requiring Confinement in a darkened room to prevent her disturbing others of me without proper [illegible]

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her mother informs me that for many days she about 3 or 4 o'clock every morning becomes boisterous and continues for 2 or 3 hours with the exception of clothing and Bedclothes, and even dishes that she can get hold of.

Name and Medical Designation, Thomas Williamson

Place of Abode, Annan

DATED this third day of May One thousand eight hundred and Sixty seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James Little being a (1) Doctor of Medicine of the University of [illegible] and being in actual practice as a (2) General Medical Person hereby certify, on soul and conscience, that I have this day, at (3) Swordale in the Parish of Annan in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Alice Pool residing with her mother at Swordale at the said Alice Pool is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(7) *State the facts.*

1. Facts indicating Insanity observed by myself: (7) Her filthy habits profane excitement language, violence and her appearance generally

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her Mother informs me that sometimes she destroys her clothes and bed clothes in any violent state they are using abusive language to them and could not be left alone.

Name and Medical Designation, James Little M.D.

Place of Abode, Annan

DATED this third day of May One thousand eight hundred and Sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Thomas Williamson Surgeon being (1) Licentiate of the Royal College of Surgeons of Edin hereby certify, on soul and conscience, that I have this day, at (2) Sundrell in the County of Dumfries, seen and personally examined Alice Pool, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Thomas Williamson Surgeon

DATED this third day of May One thousand eight hundred and Sixty seven years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexr Trotter Esqre (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Susanna Pool Sundrell Annan Certificates under the hands of Thomas Williamson and James Little, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alice Pool Petitioners daughter and that the said Alice Pool is a (5) Lunatic and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alice Pool as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alice Pool which accompanied the said Petition.

DATED this Sixth day of May One thousand eight hundred and Sixty seven

J Alex Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

J. Alice Pool

6th May

1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

heriff or Steward.
hire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,*—

The Petition of Robt. C. McCulloch, Kirkland of Longcastle Kirkinner humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Alexander McCulloch your Petitioner's (3) brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Alexander McCulloch to the Crichton Royal Institution and to sanction his admission into the the said Asylum.

State degree of tionship or other city in which Peti- r stands to Luna-

Robt. C. McCulloch

The date of the ion must be with- urteen clear days ving the dates of Medical Certifi- .

DATED this Sixth (4) day of May One thousand eight hundred and Sixty seven.

STATEMENT.

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

Christian Name and Surname of Patient at length,	William Alexander McCulloch
Sex and Age,	male 21
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Farmer
Religious Persuasion, so far as known,	Protestant
Previous Place of Abode,	Kirkland Kirkinner
Place where Found and Examined,	Crichton Royal Institution
Length of time Insane,	about 8 months
Whether first Attack,	yes
Age (if known) on first Attack,	21
When and where previously under Examination and Treatment,	
Duration of existing Attack,	
Supposed Cause,	
Whether subject to Epilepsy,	no
Whether Suicidal,	no
Whether Dangerous to others,	yes
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Alex McCulloch Esqr Kirkland of Longcastle Kirkinner Father.
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this Sixth day of May One thousand eight hundred and Sixty seven.

(*To be signed by Party applying*) Robt. C. McCulloch

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Thomson being a (1) Doctor of Medicine of the University of Glasgow Licentiate of the Faculty of Physicians & Surgeons and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Royal Institution Dumfries in the County separately from any other Medical Practitioner visited and personally examined (4) William McCulloch Farmer Son. Kirkland. by Newton Stewart a the said William Alexander McCulloch is a (5) person of unsound mind and a proper person to be under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) On taciturn and refusing to enter into conversation on at first to think I was his mother, and wanted take a walk — Expressionless depressed — did seem to distinguish me from his mother though he had

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Told by Dr. Gilchrist and attendant that he has only a few days out the institution — may return home found his father dead the house burned thought he had seen his father there on the same afternoon that

Name and Medical Designation, Alex Thomson M.

Place of Abode, Dumfries

DATED this Sixth day of May One thousand hundred and sixty-seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, David Sharp being a (1) graduate in Medicine and Surgery of the University of Edinburgh and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) William Mc. Culloch. Farmer - Kirkland. a the said William Mc. Culloch is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is in the state of fear and alarm that he will scarcely allow any one to approach him; but mutters that he is in fear of his life. his alarm is so great as to render him quite incapable of any conversation.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Dr. Gilchrist tells me that he said William Mc. Culloch informed him that his father was dead and this though he has only left him this morning

Name and Medical Designation, David Sharp. M.B., C.M.

Place of Abode. Crichton Royal Institution

DATED this sixth day of May One thousand hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, J. G. Wright M.C.
being (1) Graduate of the University of Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal Institution
in the County of Dumfries, seen and personally examined
William Alexander McCulloch and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

J. G. Wright M.C.

DATED this fifth day of May One thousand eight hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Advocate, Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Robt. C. McCulloch
Rockland of Longcastle Kirkinner
Certificates under the hands of Alexander Thomson
and David Sharp, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Alexander McCulloch petitioners brother and that the said William Alexander McCulloch is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Alexander McCulloch as a Patient into the (6) public Asylum of Crichton Royal Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Alexander McCulloch which accompanied the said Petition.

DATED this seventh day of May One thousand eight hundred and sixty seven

John P. Trotter

To the Superintendent of the (7) public
Asylum of Crichton Royal Institution
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (1) Sheriffdom of Dumfries *and his Substitutes,—*

The Petition of Robert Scott Inspector of Poor of the Parish of Kerrick humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Douglas Dressmaker Auchencairn your Petitioner's (2) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Douglas Dressmaker to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Robt Scott Inspector of Poor, Kerrick

DATED this Thirteenth (3) day of May One thousand eight hundred and Sixty Seven

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Janet Douglas
2. Sex and Age,	Female age unknown to Petitioner
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Dressmaker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Balmaghie
7. Place where Found and Examined,	Auchencairn
8. Length of time Insane,	Two days
9. Whether first Attack,	No
10. Age (if known) on first Attack,	Unknown to Petitioner
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
12. Duration of existing Attack,	Two days
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Rather by inclined to suicide
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kerrick
18. Date of becoming Chargeable,	Tenth May 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	unknown to Petitioner
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	The Patient is a stranger to Petitioner and knows nothing more about her than she is able or willing to relate herself

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this Thirteenth day of May One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) Robt Scott Inspector of Poor Parish of Kerrick

By Castle Douglas P.O.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Gregor Mene
being a (1) Member of the Royal College of Surgeons Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Auchencairn Village Kirkcudbrightshire in the C.
separately from any other Medical Prac
visited and personally examined (4) Janet Douglas Dressmaker Pauper Auchencairn Kirkcudbrightshire — a
the said Janet Douglas is a (5) person
unsound mind and a proper person to be
under Care and Treatment, and that I have formed this opinion upon the fo
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) she talks in rambling unconnected way. has strange ideas on religious subjects at one time singing. then at another praying with a very loud voice

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Robert Cleghorn informs me that she would have gone into the open street in a state of nudity if she has not been pursued by force. And has an idea that she should commit herself for public

Name and Medical Designation, Gregor Mene
Member of the Royal Co

Place of Abode, Auchencairn Village Kirkcudbr

DATED this Tenth day of May One thousand
hundred and sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Ramsay McNeil
being a (1) Graduate in Medicine of the University of Edinburgh.
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the Coun
Dumfries
separately from any other Medical Practiti
visited and personally examined (4) Janet Douglas. Pauper. Dressmaker. Auchencairn and
the said Janet Douglas is a (5) person
unsound mind. and a proper person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She answers qu in a rambling incoherent manner — has very confu ideas upon religious subjects — complains that she ca sleep at night — and states that she has confused her mind by too study of religious subjects

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) the fact of her having been in an asylum before

Name and Medical Designation, William Ramsay McNeil M

Place of Abode, Southern Counties Asylum Dum

DATED this fourteenth day of May One thousand e
hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Gregor Skene being (1) a Member of the Royal College of Surgeons Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Auchencairn in the County of Kirkcudbright. , seen and personally examined Janet Douglas. Dressmaker. , and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Gregor Skene
Member of the Royal College of Surgeons Edinburgh.

DATED this Fourteenth day of May. One thousand eight hundred and Sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Scott Inspector of Poor Kerrick Certificates under the hands of Gregor Skene and William Ramsay M'Nab , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Douglas, Dressmaker, Auchencairn, a Pauper and that the said Janet Douglas is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Douglas as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Douglas which accompanied the said Petition.

DATED this Fourteenth day of May One thousand eight hundred and Sixty seven years

J. Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

288

✓ Janet Douglas

11th May

1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Henry Chas. Adolphus Clarke humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Marion Louisa Clarke your Petitioner's (3) Daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Marion Louisa Clarke to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

Lizayre L of Man

MRCS. L. LAC

State degree of tionship or other city in which Peti- r stands to Luna-

H. H. Clarke

The date of the ion must be with- urteen clear days wing the dates of Medical Certifi-

Dated this 6th (4) day of May One thousand eight hundred and sixty seven —

STATEMENT.

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

Christian Name and Surname of Patient at length,	Marion Louisa Clarke
Sex and Age,	Female 19 in July
Married, Single, or Widowed,	Single —
Condition of Life, and previous Occupation (if any),	~~Sir~~ Gentlewoman —
Religious Persuasion, so far as known,	Protestant —
Previous Place of Abode,	Isle of Man —
Place where Found and Examined,	Do. Do. —
Length of time Insane,	~~Two~~ Two years since —
Whether first Attack,	Yes —
Age (if known) on first Attack,	17 —
When and where previously under Examination and Treatment,	No regular Treatment
Duration of existing Attack,	—
Supposed Cause,	Uterine
Whether subject to Epilepsy,	Yes —
Whether Suicidal,	No —
Whether Dangerous to others,	Yes —
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
Date of becoming Chargeable,	—
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of her Family known to be or to have been Insane,	Henry C. A. Clarke. Father. No Member on either side afflicted with insanity
Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 6th day of May One thousand eight hundred and sixty seven

(*To be signed by Party applying*) H. H. Clarke

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, George Greene. 5 Hadfield Terrace Douglas
being a (1) Doctor of Medicine of the Univ. Edin.
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) The Cottage — Isle of Man in the County
separately from any other Medical Practitioner visited and personally examined (4) Miss Marian Louisa Clarke
and a proper person to be under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Paroxysms of rage coming on without provocation and during the attempted to break & spoil anything within her reach — violence to father and brother in my presence; also attempted to injure herself. Was decidedly dangerous without any manifest reason.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her father tells me that she is continually endeavouring to escape from home and that she is sometimes for days away — that her appetite is voracious & that she frequently threatens to injure the house — usually her youngest sister.

Name and Medical Designation, George Greene. M.D. &c.
Place of Abode, 5 Hadfield Terrace, Douglas, Isle of Man

DATED this sixth day of May One thousand eight hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Thomas Gwynn
being a (1) Member of the College of Surgeons London
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Cottage Douglas Isle of Man in the County
separately from any other Medical Practitioner visited and personally examined (4) Miss Marian Louisa Clarke
and a proper person to be under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—
the said Miss Marian Louisa Clarke is a (5) Person of unsound mind

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Great mental excitement on this subject — great dejection & the slightest interference as to her welfare from Parents to whom she owes considerable ardent and unbounded affection for the slightest query whether is also an ungovernable temperament quite unusual in a boy

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her Father informed me, that she is continually endeavouring to escape from Home — like all boys she has fallen to meet — has a considerable dislike for younger Sister and when in anyway disappointed threatens violence and will attempt to injure either her mother

Name and Medical Designation, Thomas Gwynn Surgeon — R. C. S.
Place of Abode, Ramsey — Isle of Man

DATED this 6th day of May One thousand eight hundred and sixty seven —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Adam Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Henry Charles Adolphus Clarke, The Cottage Jerusalem in the Isle of Man
Certificates under the hands of George Green
and Thomas Gwynn , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Miss Marion Louisa Clarke, the Petitioners daughter — and that the said Marion Louisa Clarke — is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Marion Louisa Clarke — as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Marion Louisa Clarke — which accompanied the said Petition.

DATED this Thirteenth day of May One thousand eight hundred and Sixty Seven

John A Trotter

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Miss Marion Louisa Clarke

14th May

1867

20 & 21 *Vict. Cap.* 71, *Sect.* 37.

NOTICE OF ADMISSION.

I HEREBY GIVE NOTICE, That (1)

was received into this House as a (2)

Patient on the (3) day of

and I hereby transmit a Copy of the Order and Medical Certificates and Statement on which he was received.

Subjoined is a Report with respect to the mental and bodily condition of the above-named Patient.

(SIGNED) *Superintendent.*

DATED at this (4) day of

one thousand eight hundred and

To the Secretary of the
General Board of Lunacy.

REPORT.

I HAVE this day (4) seen and personally examined

the Patient named in the above Notice,

and hereby report and certify, with respect to mental state, that (5)

and with respect to bodily health and condition, that (6)

(SIGNED)

(7)

DATED this day of one thousand eight hundred and

(1) Name and Designation.
(2) Private or Pauper.
(3) Some day within fourteen days after the date of the Order of the Sheriff; or within twenty-one days, if the Order be granted by the Sheriff of Orkney and Shetland.
(4) Some day not less than two clear days after the admission of the Patient, and before the expiration of fourteen clear days after admission.
(5) Insert particulars.
(6) Insert particulars.
(7) And Designation.

[4*]

(*Copies.*)

PETITION TO THE SHERIFF TO GRANT ORDER FOR TH
RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Stewartry *of* Kirkcudbright & Wigtown *and his Substitutes,*—

The Petition of Thomas Kennedy Inspector of Pa in the County of Wigtown humbly sheweth that it appears from the subjoined Statement and accompany Medical Certificates, that Elizabeth McQuillan or Davidson is at present in a state of Mental Derangement, and a proper person for treatment in Asylum for the Insane. May it therefore please your Lordship to authorize the tr mission of the said Eliz^th McQuillan or Davidson to Southern Counties Asylum Dumfries and to sanction ~~his~~ her admis into the said Asylum.

(SIGNED) Thomas Kennedy Inspec

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twentysecond (3) day of May one thous eight hundred and Sixty seven years.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Elizabeth McQuillan or Davidson
2. Sex and Age,	Female aged 50 years.
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Domestic
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	High Mye. Stoney Kirk
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	Ten weeks.
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	About 50 years.
11. When and where previously under Examination and Treatment,	No where
12. Duration of existing Attack,	Ten weeks
13. Supposed Cause,	Change of Life
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes threatens to be
16. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Stoney Kirk
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	James McQuillan. Husband High Mye. Stoney Kirk. No of his family insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None —

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, Thomas Kennedy Inspector of Poor Stoney Kirk

DATED this Twentysecond day of May one thousand eight hundred and Sixty

* To be Signed by the Party applying.

(*Copies.*)

MEDICAL CERTIFICATE, No. I.

undersigned, Charles MacLaurin Ross
(1) Doctor of Medicine & Surgeon. under
Letters of the Royal College of Surgeons
Dublin
ng in actual practice as a (2) Physician & Surgeon
certify, on soul and conscience, that I have this day, at (3) High St. Mye.
the Parish of Stoney Kirk in the County of
Midlothian separately from any other Medical Practitioner,
and personally examined (4) Elizabeth Mac Quillan or Davidson
and that
Elizabeth Mac Quillan or Davidson is a (5) Person Person
and a proper Person to be detained
are and Treatment, and that I have formed this opinion upon the following
, viz. :—
Facts indicating Insanity observed by myself: (6) That she constantly
uses abusive expressions on those around her —
spins herself round & dancing — and has sometimes
odes wild & frantic gesticulations — from
which there is no escape — using perpetually
the expression of Lord have mercy on my soul &c
Other facts (if any) indicating Insanity communicated to me by others: (7)
— she imagines by whom stated — has a strong
desire to commit Suicide — or murder on her
family — sleeps almost under — picking &
pulling clothes — refuses food &c

(SIGNED) *Name and Medical Designation,* C. Mac. Ross M.D. & L.R.C.P.E.

Place of Abode, Laphenbattoch Stoney Kirk

TED this twenty seventh day of May — One thousand eight
l and Eighty seven years —

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

undersigned, Hugh Aymer
(1) Licentiate of the College of Surgeons
Edinburgh
ng in actual practice as a (2) Surgeon
certify, on soul and conscience, that I have this day, at (3) High Mye
the Parish of Stoney Kirk in the County of
Midlothian separately from any other Medical Practitioner,
and personally examined (4) Elizabeth Mac Quillan or
Davidson and that
Elizabeth Mac Quillan or Davidson is a (5) Person of
unsound mind and a proper person to be detained
are and Treatment, and that I have formed this opinion upon the following
, viz. :—
Facts indicating Insanity observed by myself: (6) She is muttering
incoherently, frowns, clasps her right hand constantly
crying threatens violence to herself and bottom
Lunatic with evil spirits from which there
is no escape —
Other Facts (if any) indicating Insanity communicated to me by others: (7)
She has a desire to commit Suicide. Has
a desire to rush up a chisel & stab her family
mostly her Mother an aged Fool. Muttering
& crying & desire to be violent &c

(SIGNED) *Name and Medical Designation,* Hugh Aymer Surgeon

Place of Abode Laughead. Stoney Kirk

ATED this twenty seventh day of May one thousand eight
d and Eighty seven years

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

(Copies.)

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (1)
of the said hereby further certify that the Case is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of one thousand eight hundred and

(1) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Peter MacLean Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Thomas Kennedy Inspector of Poor Stoneykirk
Certificates under the hands of Charles Mortimer Kyd, M.D.
and Hugh Agnew Surgeon, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Elizabeth M'Quillan or Davidson Pauper and that the said Elizabeth M'Quillan or Davidson is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth M'Quillan or Davidson as a Patient into the (6) Public Asylum of Dumfries and I authorize you to cause Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth M'Quillan or Davidson which accompanied the said Petition.

(SIGNED) Peter MacLean Sheriff Substitute

DATED this twenty third day of May one thousand eight hundred and sixty seven years

To the Superintendent of the (7) Southern Counties Asylum of Dumfries

(2) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(3) State whether a County or Stewartry.
(4) Insert Name and Designation.
(5) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict., Cap.* 71., *Sect,* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

heriff or Steward. hire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitute*—

The Petition of James Wardrope

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Edgar, your Sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Edgar to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) James Wardrope

The date of the ion must be with- urteen clear days ring the dates of Medical Certifi- .

DATED this Twenty fifth day of May One thousand eight hundred and Sixty Seven

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STATEMENT.

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

Christian Name and Surname of Patient at length,	Agnes Edgar
Sex and Age,	Female - About 50.
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Domestic Servant
Religious Persuasion, so far as known,	Church of Scotland
Previous Place of Abode,	Carlisle
Place where Found and Examined,	Rockfortham
Length of time Insane,	Six months
Whether first attack,	First
Age (if known) on first Attack,	50 Years
When and where previously under Examination and Treatment,	
Duration of existing Attack,	Six months
Supposed Cause,	Not Known
Whether subject to Epilepsy,	Yes
Whether Suicidal,	Yes
Whether Dangerous to others,	Yes
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Mary Edgar (wife of James Wardrope) Rockfortham Sister Mother died in fortmouth asylum
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* James Wardrope

DATED this Twenty fifth day of May One thousand eight hundred and Sixty Seven —

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Young being a (1) Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Ecclefechan in the Parish of Hoddam in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Agnes Edgar a domestic servant and the said Agnes Edgar is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

She jumped out of bed in a state of great excitement, screamed loudly, upset chairs and tables at those who prevented her from leaving the house on Monday, at the attempts to commit suicide

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Her sister (Mrs Wardrope) states that she often behaves in the manner stated above.

(SIGNED) *Name and Medical Designation,* William Young, Surgeon

Place of Abode, Ecclefechan

DATED this twenty fifth day of May One thousand eight hundred and sixty seven

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Agnes Mack Begg being a (1) Physician of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Ecclefechan in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Agnes Edgar, and the said Agnes Edgar is a (5) lunatic & unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Almost Complete Dementia - also Weakness of reasoning powers.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Has attempted to commit suicide, Brother in law & sister. — Is subject to violently Cries

(SIGNED) *Name and Medical Designation,* A. M. Begg, M.D.

Place of Abode, Bridge Park, Annan

DATED this 25th day of May One thousand eight hundred and Sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that
is a (2) hereby further certify that the Case
of the said is One of Emergency, and I recommend the immediate removal of the said
to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Alexander Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) James Wardrope
Manse Ecclefechan
Certificates under the hands of William Young
and Agnew Black Bogie , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Edgar, Domestic Servant, Ecclefechan, Parish Hutton and that the said Agnes Edgar is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Edgar as a Patient into the (6) Public Asylum of Southern Counties Dumfries, and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Edgar which accompanied the said Petition.

(SIGNED) J. Alex. Trotter.

DATED this Twenty Seventh day of May One thousand eight hundred and Sixty Seven Years

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

Agnes Edgar

27th May

1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Orkney *and his Substitutes*

The Petition of Revd Robert Hiddleston of Orphir Orkney humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that my wife Isabella Hiddleston your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Isabella Hiddleston to the Crichton Royal Institution and to sanction her admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Robert Hiddleston

The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 23 (4) day of May One thousand eight hundred and Sixty seven

STATEMENT.

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

1.	Christian Name and Surname of Patient at length,	Isabella Hiddleston
2.	Sex and Age,	55 Female
3.	Married, Single, or Widowed,	Married
4.	Condition of Life, and previous Occupation (if any),	Ministers Wife
5.	Religious Persuasion, so far as known,	Presbyterian
6.	Previous Place of Abode,	Manse of Orphir Orkney
7.	Place where Found and Examined,	~~Orphir Ork~~ Kirkwall Orkney
8.	Length of time Insane,	Five weeks
9.	Whether first Attack,	Yes
10.	Age (if known) on first Attack,	55
11.	When and where previously under Examination and Treatment,	No where
12.	Duration of existing Attack,	Five weeks
13.	Supposed Cause,	Fright from a runaway horse
14.	Whether subject to Epilepsy,	No
15.	Whether Suicidal,	No
16.	Whether Dangerous to others,	No
17.	Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18.	Date of becoming Chargeable,	
19.	Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Revd Robert Hiddleston Manse of Orphir Orkney her husband
20.	Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 23^d day of May One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) Robert Hiddleston

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Alex R Duguid M.D.
being a (1) Graduate of the University of Edin.r & Licentiate of the Royal College of Surgeons Edinburgh
and being in actual practice as a (2) general practitioner
hereby certify, on soul and conscience, that I have this day, at (3) No 1 Victoria St. Kirkwall in the County of Orkney separately from any other Medical Practitioner visited and personally examined (4) Mrs Middleton
the said Mrs Middleton is a (5) a lunatic
and a proper person to be under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She keeps talking incessantly against her to do her goods & to burn the premises around her, with a view to her destruction. Expression of her face & eyes is intensely maniacal.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband states that she often gets into a state of violent excitement, & on one occasion gave peremptory orders to some bed furniture, to prevent, as she said, it being burned.

Name and Medical Designation, Alex R Duguid M.D.

Place of Abode, Victoria St. Kirkwall

DATED this 20th day of May One thousand hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James H Logie M.D.
being a (1) Graduate of the University of Edinburgh & Licentiate of the Royal College of Surgeons Edin.
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Kirkwall in the County of Orkney separately from any other Medical Practitioner visited and personally examined (4) Mrs Isabella Middleton
the said Mrs Middleton is a (5) insane
and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
1st Her appearance, which is very Maniacal.
2d She reports that she is surrounded by enemies to destroy her that her food is poisoned that persons talk at her & torment her &c &c &c

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Having seen her often myself while under Chloroform I have not questioned others on the subject but her husband & friends have stated many circumstances of a similar character to those given above.

Name and Medical Designation, James H Logie

Place of Abode, Kirkwall

DATED this 22 day of May One thousand hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Robertson Sheriff ~~Substitute~~
of the (3) County of Orkney
having had produced to me, with a Petition at the instance of (3) Robert Heddleston
Minister of the Parish of Orphir in the County of Orkney
Certificates under the hands of Alex R Duguid M.D. in Kirkwall
and James St Lage M.D. in Kirkwall, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Isabella Heddleston wife of the said Rev R Heddleston and that the said Isabella Heddleston is a (5) Insane person

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Isabella Heddleston as a Patient into the (6) Lunatic Asylum of ~~[illegible]~~ Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Isabella Heddleston which accompanied the said Petition.

Crichton Royal Institution Dumfries

Dated this twenty third day of May One thousand eight hundred and Sixty Seven

James Robertson

To the Superintendent of the (7) ~~Royal Public Lunatic~~
Asylum of ~~[illegible]~~ Crichton Royal Institution
Crichton Royal Institution Dumfries
J R

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1071

Isabella Middleton

30/5/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Unto the Honourable the (1) Sheriff *of the* (1) County of Dumfries *and his Substitutes,*—

The Petition of William Brown Learmonth

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that, George Learmonth your Petitioner's (2) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Learmonth to the Crichton Royal Institution and to sanction his admission into the said Asylum.

William Brown Learmonth

DATED this ninth (3) day of June One thousand eight hundred and sixty seven years.

STATEMENT.

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

1.	Christian Name and Surname of Patient at length,	George Learmonth
2.	Sex and Age,	Male, about fifty years
3.	Married, Single, or Widowed,	Single
4.	Condition of Life, and previous Occupation (if any),	Nurseryman - Master.
5.	Religious Persuasion, so far as known,	Established Church of Scotland
6.	Previous Place of Abode,	90 English Street, Dumfries
7.	Place where Found and Examined,	Do
8.	Length of time Insane,	Five days
9.	Whether first attack,	First attack
10.	Age (if known) on first Attack,	As above
11.	When and where previously under Examination and Treatment,	Nowhere
12.	Duration of existing Attack,	Five days
13.	Supposed Cause,	Over mental & bodily labour, long hours &c.
14.	Whether subject to Epilepsy,	No
15.	Whether Suicidal,	Threatened to commit suicide
16.	Whether Dangerous to others,	Rather
17.	Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18.	Date of becoming Chargeable,	
19.	Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Brown Learmonth, full brother 90 English Street, Dumfries. No member of the family ever known, as far as can be traced back, ever insane.
20.	Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this ninth day of June One thousand eight hundred and sixty seven years

(*To be signed by Party applying*) William Brown Learmonth

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James M. McCulloch M. [illegible]
being a (1) Graduate of the University of Edinburg[illegible]
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) 90 Englis[illegible]
Dumfries in the
Dumfries separately from any other Medical Pr[illegible]
visited and personally examined (4) George Learmont, Nursery[illegible]
the said George Learmont is a (5) person
unsound mind and a proper person to b[illegible]
under Care and Treatment, and that I have formed this opinion upon the
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) By times tac[illegible]
to speak, look &c. at other very violent, incohe[illegible]
talkative. No particular delusion but talks & in[illegible]
sorts of nonsense. Threatened suicide & attempted to [illegible]
the window &c. very little sleep.

(7) *State the information, and from whom derived.*

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

Name and Medical Designation, James M. McCulloch M.

Place of Abode, 38 Castle Street, Dumfri[illegible]

DATED this ninth day of June One thous[illegible]
hundred and sixty seven years.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of the University of [illegible]
and Licentiate of the Faculty of Physicians & Surg[illegible]
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) 90 Engl[illegible]
Street Dumfries in the C[illegible]
Dumfries separately from any other Medical Prac[illegible]
visited and personally examined (4) George Learmont.
Nurseryman
the said George Learmont is a (5) person
of unsound mind and a proper person to be
under Care and Treatment, and that I have formed this opinion upon the f[illegible]
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Restless an[illegible]
sleepless at night - talks incoherently
and has delusions and supposes he [illegible]
various things not present —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others:
Told by his sister & others that he has be[illegible]
violent - and screams at times loudly - threate[illegible]
suicide and to jump out of window - see[illegible]
things not present &c

Name and Medical Designation, Alex: Thomson [illegible]

Place of Abode, 27 Castle St Dumfries

DATED this Ninth day of June One thousan[illegible]
hundred and sixty seven years —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James M: McCulloch M: D: &c.
being (1) a Physician practising in Dumfries
hereby certify, on soul and conscience, that I have this day, at (2) 90 English Street
in the County of Dumfries, seen and personally examined
George Learmont, Nurseryman, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

James M: McCulloch M: D: &c.

DATED this Ninth day of June One thousand eight hundred and Sixty seven years.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

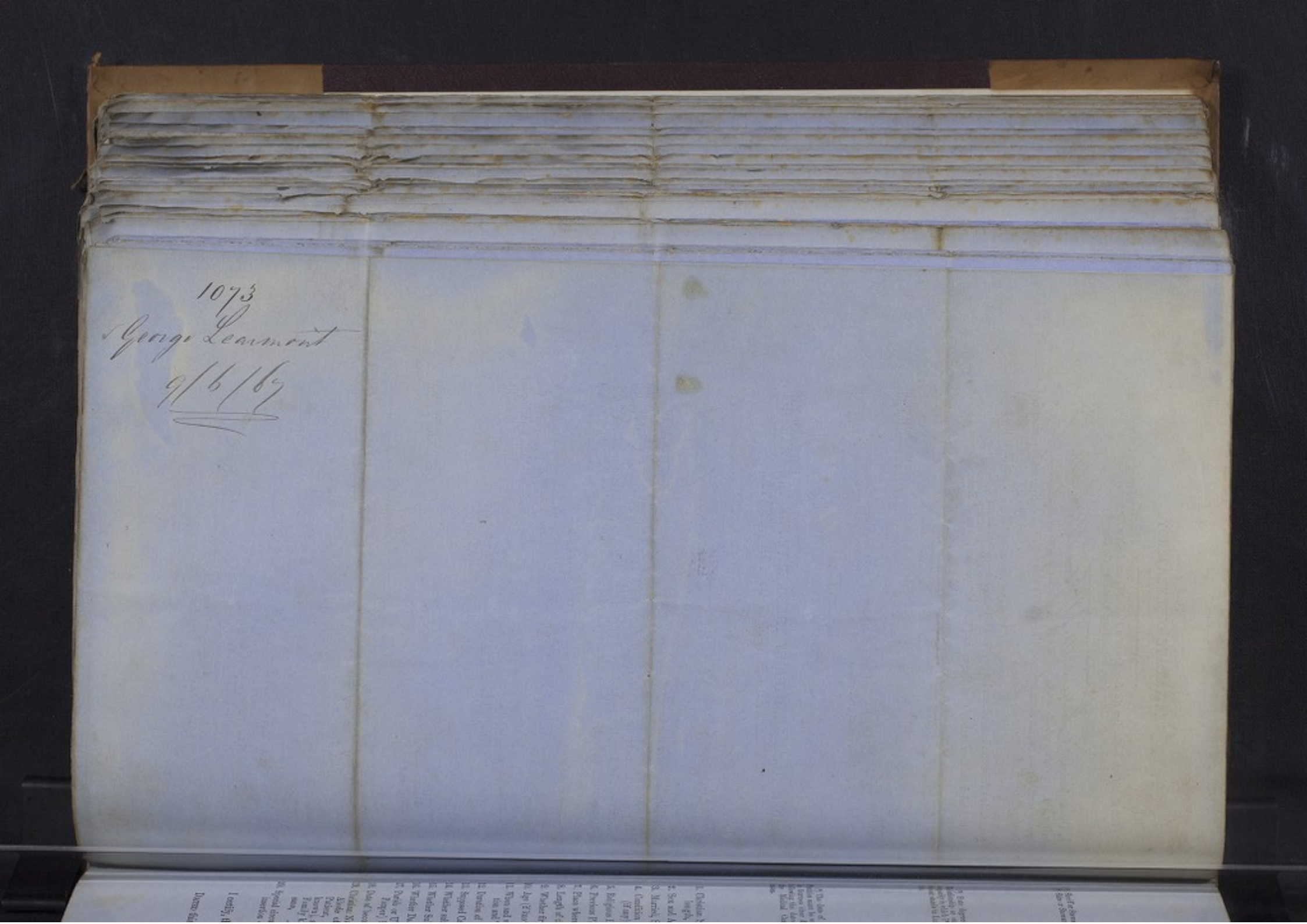
I, John Alexr Trotter Esqre (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) William Brown Learmont, 90 English Street, Dumfries,
Certificates under the hands of James M: McCulloch
and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) George Learmont, Nurseryman, Dumfries and that the said George Learmont is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Learmont as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Learmont which accompanied the said Petition.

DATED this Tenth day of June One thousand eight hundred and Sixty seven

John A Trotter

To the Superintendent of the (7) Public Asylum of Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.



1073

George Learmont

9/6/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries — *and his Substitutes,—*

The Petition of Adam Watson, Farmer, Farthingwell, Dunscore, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Watson —— your Petitioner's (3) daughter, residing with him at Farthingwell, Dunscore is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Watson —— to the Southern Counties Asylum Dumfries — and to sanction her admission into the the said Asylum.

(3) State degree of Lordship or other County in which Petitioner stands to Lunatic.

Adam Watson

DATED this Fourteenth (4) day of June —— One thousand eight hundred and Sixty seven.

(4) The date of the petition must be within fourteen clear days preceding the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Elizabeth Watson
Sex and Age,	Female - About 24 years -
Married, Single, or Widowed,	Single.
Condition of Life, and previous Occupation (if any),	Farmer's daughter
Religious Persuasion, so far as known,	Established Church of Scotland
Previous Place of Abode,	Farthingwell, Dunscore
Place where Found and Examined,	Dumfries.
Length of time Insane,	Shewn symptoms of insanity for some years
Whether first Attack,	Yes
Age (if known) on first Attack,	About Twenty years
When and where previously under Examination and Treatment,	Never - Nowhere -
Duration of existing Attack,	Several years, but worse for a few weeks
Supposed Cause,	Grief for death of mother and sisters.
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	No
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not a pauper
Date of becoming Chargeable,	—
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of the Family known to be or to have been Insane,	Adam Watson the Petitioner is her father. None of her relations ever known to have been insane
Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Fourteenth day of June —— One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) Adam Watson

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Berthwick M.D. being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) No 15 Buccleuch Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Elizabeth Watson, Farmers Daughter and the said Elizabeth Watson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Manner excited and violent. Conversation rambling and incoherent. Expression indicates a weak mind

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Father states that she refuses to work and often wanders at night, and that the servants are from her abusing them

Name and Medical Designation, } Alex Berthwick M.D.

Place of Abode, Dumfries

DATED this 14th day of June One thousand eight hundred and sixty seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or *otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Murray being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Buccleuch Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Elizabeth Watson, Farmers Daughter and the said Elizabeth Watson is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Manner very excited, Ideas confused, conversation incoherent & contradictory, states that her Father is the person who should be sent to the Asylum, imagines that her Father is blind

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her Father states that the servants have left the house, in consequence of ill treatment, about at night &c &c

Name and Medical Designation, } P. Murray M.D.

Place of Abode, Buccleuch St Dumfries

DATED this 14th day of June One thousand eight hundred and 67/4

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Adam Watson Farmer, Barthingwell Dunscore
Certificates under the hands of Alexander Borthwick
and Patrick Munro , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Watson, Petitioners daughter and that the said Elizabeth Watson is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Watson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Watson which accompanied the said Petition.

DATED this Fourteenth day of June One thousand eight hundred and Sixty seven

John P. Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

✓ Elizabeth Waters
14/6/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Stewart. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of Michael Hunter, Carrier Moniave

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Hunter, Grocer Dunscore your Petitioner's (3) brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Hunter to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of relationship or other circumstance in which Petitioner stands to Lunatic.

Michael Hunter

DATED this fifteenth (4) day of June One thousand eight hundred and sixty seven

(4) The date of the Petition must be within fifteen clear days preceding the dates of the Medical Certificates.

STATEMENT.

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

1	Christian Name and Surname of Patient at length,	William Hunter.
2	Sex and Age,	male. 48.
3	Married, Single, or Widowed,	Married
4	Condition of Life, and previous Occupation (if any),	Grocer.
5	Religious Persuasion, so far as known,	Free Church.
6	Previous Place of Abode,	Sandywell Dunscore
7	Place where Found and Examined,	Southern Counties Asylum
8	Length of time Insane,	9 years.
9	Whether first attack,	no
10	Age (if known) on first Attack,	39.
11	When and where previously under Examination and Treatment,	Southern Counties Asylum
12	Duration of existing Attack,	3 days.
13	Supposed Cause,	not known.
14	Whether subject to Epilepsy,	no.
15	Whether Suicidal,	~~has~~ threatened to do so
16	Whether Dangerous to others,	no
17	Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper.
18	Date of becoming Chargeable,	
19	Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Michael Hunter. Brother. Carrier Moniave.
20	Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this fifteenth day of June One thousand eight hundred and sixty seven.

(*To be signed by Party applying*) Michael Hunter

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an Idiot, or a person of unsound mind.*

I, the undersigned, John Dickson being a (1) graduate of the Edinburgh Univ and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) South Counties Asylum Dumfries in the separately from any other Medical Pr visited and personally examined (4) William Hunter, Pa the said William Hunter is a (5) Lun and a proper person to be under Care and Treatment, and that I have formed this opinion upon the grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

He is violent, rambling and incoh
boisterous in his conduct & manner
probably be dangerous.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

The above has been his condition for
time

Name and Medical Designation, John Dickson

Place of Abode, Castle Street, Du

DATED this 17th day of June One thousa hundred and sixty seven

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an Idiot, or a person of unsound mind.*

I, the undersigned, William Smith Kerr being a (1) Doctor of Medicine and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Lunatic Counties Asylum Dumfries in the C separately from any other Medical Pra visited and personally examined (4) William Hunter, Ge Dumfries, the said William Hunter is a (5) Lunatic and a proper person to be under Care and Treatment, and that I have formed this opinion upon the f grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

He is greatly excited, shouting & s
incoherently. He looks & evidently o

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Has already been a patient in t
Asylum.

Name and Medical Designation, William S Kerr

Place of Abode. Buccleuch St. Dum

DATED this 17th day of June One thousan hundred and Sixty Seven.

No. I.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned Alexander Bethune being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) the Southern Counties Asylum in the County of Dumfries, seen and personally examined William Hunter, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Alex Bethune M.A. M.D.

DATED this 15th day of June One thousand eight hundred and Sixty Seven Years

(1) State Medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Malcolm Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Michael Hunter Carrier Minnyhive Certificates under the hands of John Dickson and William Smith Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Hunter, Grocer, Dumfries and that the said William Hunter is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Hunter as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Hunter which accompanied the said Petition.

DATED this Seventeenth day of June One thousand eight hundred and Sixty Seven

J Mal P Trotter

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1
302

A William Hamilton.
15/6/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes*

The Petition of Benjamin Bell, Rosebank humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Bell your Petitioner's (3) Sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Bell to the Crichton Royal Institution and to sanction her admission into the the said Asylum.

State degree of ationship or other acity in which Peti- r stands to Luna-

× Benjamin Bell

The date of the tion must be with- ourteen clear days wing the dates of Medical Certifi- s.

Dated this 17th (4) day of June One thousand eight hundred and Sixty seven

STATEMENT.

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

Christian Name and Surname of Patient at length,	Margaret Bell
Sex and Age,	Female 58 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Gentlewoman
Religious Persuasion, so far as known,	Established Church of Scotland
Previous Place of Abode,	Dumfries
Place where Found and Examined,	Rosebank L. C. R. Institution
Length of time Insane,	A few days
Whether first Attack,	No
Age (if known) on first Attack,	Not known
When and where previously under Examination and Treatment,	In Crichton Institution
Duration of existing Attack,	A few days
Supposed Cause,	Not known
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	No
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Benjamin Bell, Rosebank Brother.
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 17th day of June One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) × Benjamin Bell

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Mona[illegible], being a (1) Graduate of the University of La[illegible] and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution, Dumfries in the Cou[illegible] separately from any other Medical Practiti[illegible] visited and personally examined (4) Margaret Bell Gra[illegible] the said Margaret Bell is a (5) Insane pa[illegible] and a proper person to be de[illegible] under Care and Treatment, and that I have formed this opinion upon the foll[illegible] grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) On my first commencement to examining that she talked with Spirits, that suffering from her Mothers curse & [illegible] she can be cured only by Prayer &[illegible]

2. Other facts (if any) indicating Insanity communicated to me by others: (7) By Borthwick who attended her me, that she has refused to eat wandered about at night &c[illegible]

Name and Medical Designation, P Murray

Place of Abode, Buccleuch St Dum[illegible]

Dated this 17 day of June One thousand hundred and 67

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson being a (1) Graduate of the Edinburgh Univ[illegible] and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution, Dumfries in the Coun[illegible] separately from any other Medical Practiti[illegible] visited and personally examined (4) Margaret Bell, Gentlewo[illegible] and the said Margaret Bell is a (5) Insane [illegible] and a proper person to be deta[illegible] under Care and Treatment, and that I have formed this opinion upon the follo[illegible] grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Violent, & in[illegible] to conversation with Spirits, to whom s[illegible] all her actions. Refuses to take food, she has been commanded to fast.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) By Borthwick informing me that she has been in the habit of wandering about [illegible] during night &c

Name and Medical Designation, John Dickson M[illegible]

Place of Abode, Castle St Dumfr[illegible]

Dated this 17th day of June One thousand [illegible] hundred and Sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Alexander Berthwick being (1) Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Rosebank in the County of Dumfries, seen and personally examined Miss Margaret Bell, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Alex Berthwick

Dated this 16th day of June One thousand eight hundred and Sixty Seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, John Pitcairn Trotter Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Benjamin Bell Rosebank, Dumfries Certificates under the hands of Patrick Murray and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret Bell, Petitioners' sister and that the said Margaret Bell is a (5) person of unsound mind and an insane person and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Bell as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Bell which accompanied the said Petition.

Dated this Eighteenth day of June One thousand eight hundred and Sixty Seven

John P Trotter

To the Superintendent of the (7) Public Asylum of Crichton Institution Dumfries

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1074
S Margaret Bell
16/6/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries. *and his Substitutes,—*

The Petition of Malcolm M'Farlane Inspector of Poor, Lesswalt

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Spiers ~~is~~ a lunatic Pauper On Roll residing in James Campbells house Stranraer your Petitioner's (3) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Spiers to the Brethren Counties Asylum Dumfries and to sanction the admission into the said Asylum.

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Malcolm M'Farlane

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 29th (4) day of June One thousand eight hundred and Sixty Seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Spiers
2. Sex and Age,	Female
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Spring
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Maybole
7. Place where Found and Examined,	Maybole
8. Length of time Insane,	
9. Whether first attack,	no
10. Age (if known) on first Attack,	not known
11. When and where previously under Examination and Treatment,	At Dumfries
12. Duration of existing Attack,	
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lesswalt Parish
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Her Sister Mary Hendry in Wigtown no Relation known to have been Insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twentieth day of June One thousand eight hundred and Sixty Seven.

(To be signed by Party applying) Malcolm M'Farlane

Inspector of Poor

P.P.

Lesswalt,

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, David Easton
being a (1) Doctor of medicine and Licentiate of the Royal Coll[illegible] of Surgeons Edinburgh
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) High Str[illegible] Stranraer Wigtown in the Co[illegible]
separately from any other Medical Pract[illegible]
visited and personally examined (4) Agnes Speirs, Sewer, High Str[illegible] Stranraer.
the said Agnes Speirs is a (5) Pauper Lu[illegible]
and a proper person to be de[illegible]
under Care and Treatment, and that I have formed this opinion upon the fol[illegible] grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is restless almost constantly roll about; When alone she is very [illegible] sings & laughs allowed. Her conversation is incoh[illegible] and blasphemous in the extreme. At times she [illegible] threatening about some persons unknown, When [illegible] in any way she becomes furious.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) James & Mrs Campbell, with whom she [illegible] corroborates the above.

Name and Medical Designation, David Easton M.D.

Place of Abode, Stranraer

DATED this 17th day of June One thousand hundred and sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George I. Hearder
being a (1) Doctor of Medicine of the University St Andrews
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) The South Counties Asylum Dumfries in the Cou[illegible]
separately from any other Medical Practit[illegible]
visited and personally examined (4) Agnes Speirs, Sewer, [illegible] High Street, Stranraer, Pauper, [illegible]
the said Agnes Speirs is a (5) Lunatic
and a proper person to be det[illegible]
under Care and Treatment, and that I have formed this opinion upon the foll[illegible] grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) is preoccupied in manner; incoherent in conversation; restless and excitable; her understanding is mish[illegible] weakened, as is also her memory, especi[illegible] of recent event.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, George I. Hearder

Place of Abode, Powick Wr Worce[illegible]

DATED this 26th day of June One thousand hundred and sixty-seven.

CERTIFICATE OF EMERGENCY.[a]

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Ramsay McClure being (1) a graduate in Medicine of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum in the County of Dumfries, seen and personally examined Agnes Speirs. Pauper., and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

W. R. McClure M. D. Edin.

DATED this 21st day of June One thousand eight hundred and Sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Malcolm McFarlane Inspector of Poor Leswalt Certificates under the hands of David Easton and George J. Warder, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Speirs Tenter Wyk Street Stranraer a Pauper and that the said Agnes Speirs is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Speirs as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Speirs which accompanied the said Petition.

DATED this Twenty Sixth day of June One thousand eight hundred and Sixty seven years James Gordon

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Stewart. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) County *of* Dumfries — *and his Substitutes.*

The Petition of M. McFarlane Inspector of Poor Lesmahagow humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Spiers is a Pauper on your Petitioner's (3) Roll and is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Spiers to the Dumfries Southern Counties Asylum, and to sanction the admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

M. McFarlane

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 20th (4) day of June One thousand eight hundred and Sixty Seven.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Spiers
2. Sex and Age,	Female
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Sewing
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Maybole
7. Place where Found and Examined,	Do
8. Length of time Insane,	
9. Whether first attack,	No
10. Age (if known) on first Attack,	When Young
11. When and where previously under Examination and Treatment,	Dumfries Asylum Repeatedly
12. Duration of existing Attack,	
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lesmahagow Parish.
18. Date of becoming Chargeable,	A number of years ago
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Her Sister Mary resides in Maybole — No Relative known to have been Insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Twentieth day of June One thousand eight hundred and Sixty Seven.

(*To be signed by Party applying*) M. McFarlane
Inspector of Poor
Lesmahagow

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, David Easton
being a (1) Doctor of Medicine & Licentiate of the
College of Surgeons Edinburgh
and being in actual practice as a (2) General practitioner
hereby certify, on soul and conscience, that I have this day, at (3) High S
Stranraer in the C
My Town separately from any other Medical Prac
visited and personally examined (4) Agnes Speirs
the said Agnes Speirs is a (5) pauper l
and a proper person to be
under Care and Treatment, and that I have formed this opinion upon the f
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is restle
Syd constantly rolling about, wheneber talking s
Religion alternately. Her conversation is incoherent
blasphemous in the extreme. At times she talks Mu
about some unknown person. When opposed in an
she becomes much excited—

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The above facts corroborate
Campbell & Mrs Campbell (Next door
resides)

Name and Medical Designation, David Easton

Place of Abode, Stranraer.

DATED this 1st day of June One thousand
hundred and sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Easton
being a (1) Licentiate of the Royal College of Physicians
& Surgeons Glasgow
and being in actual practice as a (2) general practitioner
hereby certify, on soul and conscience, that I have this day, at (3) High Str
Stranraer in the Cou
Nigtown separately from any other Medical Practit
visited and personally examined (4) Agnes Speirs
the said Agnes Speirs an
is a (5) pauper lu
and a proper person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is very ex
excited, talks incoherently and very pro
is suspicious of visitors. Mind is very cha
in her appearance and on the slightest
opposition becomes furious.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Messrs Campbell & Mrs Campbell corro
the above facts

Name and Medical Designation, James Easton L.R.C.P.

Place of Abode, Stranraer

DATED this 1st day of June One thousand
hundred and Sixty Seven.

No. I.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Ramsay McCabe being (1) a graduate in Medicine of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum in the County of Dumfries, seen and personally examined Agnes Spiers, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

William Ramsay McCabe M.D.

Dated this 21st day of June One thousand eight hundred and Sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, (3)
of the (4)
having had produced to me, with a Petition at the instance of (5)

Certificates under the hands of
and , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) and that the said
is a (7)

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said as a Patient into the (8) Asylum of and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said which accompanied the said Petition.

Dated this day of One thousand eight hundred and

To the Superintendent of the (9)
Asylum of

(3) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(4) State whether a County or Stewartry.
(5) Insert Name and Designation.
(6) Describe him, and if a Pauper, state so.
(7) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(8) Public, District, Parochial, or Private.
(9) Public, District, Parochial, or Private.

Agnes Spiers
21st June
1863

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) *of the* (2)

of *and his Substitutes,*

The Petition of Mathew Adam Senr

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mathew Adam Senr your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mathew Adam Senr to the Royal Lunatic Asylum Institution Dumfries and to sanction his admission into the the said Asylum.

(1) State degree of relationship or other tie by which Petitioner stands to Lunatic.

Mathew Adam Senr

Dated this 21st (4) day of June One thousand eight hundred and Sixty Seven.

(4) The date of the Petition must be within fourteen clear days following the dates of Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Mathew Adam
Sex and Age,	Male — 43 years
Married, Single, or Widowed,	Married
Condition of Life, and previous Occupation (if any),	Respectable Manufacturers Foreman
Religious Persuasion, so far as known,	United Presbyterian
Previous Place of Abode,	11 Neilson Street Paisley
Place where Found and Examined,	Paisley Infirmary
Length of time Insane,	About three weeks
Whether first Attack,	First
Age (if known) on first Attack,	as above
When and where previously under Examination and Treatment,	
Duration of existing Attack,	About three weeks
Supposed Cause,	Ill health
Whether subject to Epilepsy,	No
Whether Suicidal,	yes
Whether Dangerous to others,	yes
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mathew Adam Senr 9 Neilson Street Paisley his Father. yes
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 21st day of June One thousand eight hundred and Sixty Seven

(To be signed by Party applying) Mathew Adam Senr

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Daniel Richmon[illegible]
being a (1) Graduate of the University of [illegible]
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Inf[illegible]
Paisley in the Co[illegible]
Renfrew separately from any other Medical Practi[illegible]
visited and personally examined (4) Mathew Adam
Manufacturing Foreman, 11 Neilson St. an[illegible]
the said Mathew Adam is a (5) perso[illegible]
of unsound mind and a proper person to be de[illegible]
under Care and Treatment, and that I have formed this opinion upon the foll[illegible]
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
He is subject to attacks of Religious [illegible]
He states his intention to be to commi[illegible]
in order to avoid committing Hom[illegible]
towards which he has a strong imp[illegible]

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
He has made three attempts [illegible]
self destruction. His wife & F[illegible]

Name and Medical Designation, } Daniel Richm[illegible]
M. D.

Place of Abode, 32 New Street Pa[illegible]

DATED this 21st day of June One thousand
hundred and Sixty-Seven years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Thomas Graham
being a (1) Doctor of Medicine of Glasgow University
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) the Inform[illegible]
Bridge Street, Paisley in the Coun[illegible]
Renfrew separately from any other Medical Practiti[illegible]
visited and personally examined (4) Matthew Adam, Junior
Manufacturer's Foreman, usually residing at 11 Neilson Street Paisley and
the said Matthew Adam is a (5) person
of unsound mind and a proper person to be det[illegible]
under Care and Treatment, and that I have formed this opinion upon the follo[illegible]
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Melancholy [illegible]
appearance, expresses himself to the effect that [illegible]
unfit to live, having committed some unpardonable [illegible]

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Two several attempts to commit suicide, due on mo[illegible]
the other to-day. Dr McLeod House-Surgeon Paisley [illegible]

Name and Medical Designation, } Thomas Graham M[illegible]

Place of Abode, 34 Gauze Street Paisley

DATED this twenty first day of June One thousand [illegible]
hundred and sixty-seven years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Hugh Cowan Advocate (1) Sheriff Substitute
of the (2) County of Renfrew
having had produced to me, with a Petition at the instance of (3) Matthew Adam
senior of Nelson Street Paisley
Certificates under the hands of Daniel Richmond M.D. Paisley
and Thomas Graham M.D Paisley, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Matthew Adam junior Manufacturer Paisley and that the said
Matthew Adam junior is a (5) person of unsound mind

Hugh
x 11 Nelson Street
Paisley
Cowan

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Matthew Adam junior as a Patient into the (6) Public Asylum of Crichton Royal Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Matthew Adam junior which accompanied the said Petition.

DATED at Paisley this 21st day of June — One thousand eight hundred and Sixty Seven

Hugh Cowan

To the Superintendent of the (7) Public
Asylum of the Royal Crichton
Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1075

Shallow-Adam f.

22/6/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(Sheriff or Steward, Bailie or Stewartry.)

Unto the Honourable the (1) Sheriff of the (2) Shire of Lyte Dumfries and his Substitutes,—

The Petition of Robert Gardiner Junr. Eglinton

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Gardiner Senior your Petitioner's (3) Father is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Robert Gardiner Senior to the Crichton Royal Institution Dumfries and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Robert Gardiner Junr.

DATED this Twenty fifth (4) day of June — One thousand eight hundred and Sixty seven

(4) The date of the Petition must be within fourteen clear days preceding the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Robert Gardiner Senior
Sex and Age,	Male – About Sixty Years
Married, Single, or Widowed,	Married
Condition of Life, and previous Occupation (if any),	A Grain & Seed Merchant –
Religious Persuasion, so far as known,	Church of Scotland
Previous Place of Abode,	12 Montgomerie St. Anderston
Place where Found and Examined,	Eglinton, Irvine
Length of time Insane,	about a week
Whether first Attack,	First attack
1. Age (if known) on first Attack,	—
1. When and where previously under Examination and Treatment,	—
1. Duration of existing Attack,	Has been showing Symptoms for some time
1. Supposed Cause,	Losses in Business
1. Whether subject to Epilepsy,	– Not subject
1. Whether Suicidal,	– Has never shown any tendency – that
1. Whether Dangerous to others,	– Not dangerous –
1. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	— " —
1. Date of becoming Chargeable,	
1. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Robert Gardiner Junr. Landsteward Eglinton Castle near Irvine – No member of family ever Insane –
2. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this Twenty fifth day of June — One thousand eight hundred and Sixty seven

(To be signed by Party applying) Robert Gardiner Jr.

P. 9.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, David D. Service being a (1) Doctor of Medicine & licentiate of the R. and being in actual practice as a (2) General practitioner of Medicine hereby certify, on soul and conscience, that I have this day, at (3) Wiston in the Co separately from any other Medical Practit visited and personally examined (4) Rob. Gardiner Grain and Me residing at 12 Montgomery St Ardrossan an the said Rob. Gardiner is a (5) a person of unsound mind and a proper person to be det under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Partly suggestions as to the unfavourable condition of his affairs, just nervous combined with excessive mental depression go to his future Impaired memory, Delusions as to regard of his dishonest having been caused by remaining for a while in an atmosphere of

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The above facts communicated to me by Mr Robt Gardiner Jr. his son, and that he was about to do and must suspect himself communicated to me by his Daughter.

Name and Medical Designation, David D. Service M.D. L.R.

Place of Abode, Kilwinning

DATED this twenty fifth day of June One thousand hundred and sixty seven

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Hugh Andrew being a (1) Licentiate of The Faculty of Physicians Glasgow and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Wiston in the Coun separately from any other Medical Practit visited and personally examined (4) Robert Gardiner Grain & Me residing at 12 Montgomery St Ardrossan and the said Robert Gardiner is a (5) person of Unsound Mind and a proper person to be det under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Great nervous irritability and constant depression and co nations respecting his past present & futu

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The same facts as stated above com to me by his son & Daughter

Name and Medical Designation, H. Andrew L.F.P.S.G.

Place of Abode, Kilwinning

DATED this 25th day of June One thousand hundred and sixty seven

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Hugh Andrew
being (1) a L.F.P.S. Glasgow
hereby certify, on soul and conscience, that I have this day, at (2) Eglinton Castle
in the County of Ayr, seen and personally examined
Robert Gardiner of Ardrossan, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

H. Andrew L.F.P.S.G.

Dated this twenty fifth day of June One thousand eight hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon, Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Robert Gardner Junior Eglinton Castle, Irvine
Certificates under the hands of David D. Service
and Hugh Andrew, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Robert Gardiner Grain & Seed merchant, 12 Montgomerie St. Ardrossan and that the said
Robert Gardiner is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Robert Gardiner as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Gardiner which accompanied the said Petition.

Dated this Twenty Sixth day of June One thousand eight hundred and Sixty Seven

James Gordon

To the Superintendent of the (7) Public
Asylum of Crichton Institution
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1076

Robert Gardiner

25/6/67

1076.

Robert Gardiner, senior

June 25/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,*—

The Petition of William Ross, Pendleton, Manchester humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Cecil Ross, M.A. Cantab. WR

(3) State degree of relationship or other circumstances in which Petitioner stands to Lunatic.

your Petitioner's (3) son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Cecil Ross to the WR Crichton Royal Institution and to sanction his admission into the the said Asylum.

William Ross

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 26th (4) day of June One thousand eight hundred and Sixty seven.

STATEMENT.

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

Christian Name and Surname of Patient at length,	William Cecil Ross WR.
Sex and Age,	Male 30 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Attorney
Religious Persuasion, so far as known,	Church of England
Previous Place of Abode,	Drumsmuir Portmoulend
Place where Found and Examined,	Parliament Close C.R. Institution
Length of time Insane,	Parliament Close C.R. Institution
Whether first Attack,	Yes
Age (if known) on first Attack,	29
When and where previously under Examination and Treatment,	No C.R. Institution Dumfries
Duration of existing Attack,	a few days
Supposed Cause,	Constitutional Debility
Whether subject to Epilepsy,	No
Whether Suicidal,	Yes
Whether Dangerous to others,	No
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not liable
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Wm Ross Esq Father Drumsmuir Portmoulend
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this 26th day of June One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) William Ross

P. F.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, George I. Bearder
being a (1) Graduate of the University of St Andrews
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) The Crichton Institution in the Co[illegible] Dumfries separately from any other Medical Pract[illegible] visited and personally examined (4) William Cecil Ross of Grassmere, Westmoreland, Gentleman, a[illegible] the said William Cecil Ross is a (5) Luna[illegible] and a proper person to be d[illegible] under Care and Treatment, and that I have formed this opinion upon the fol[illegible] grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) To very ne[illegible] agitated & preoccupied in manner [illegible] to many delusions: imagines he was [illegible] by a mob last night, & that he is in da[illegible] being killed.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, George I. Bearder [illegible]

Place of Abode, Powick, W. Worcester

DATED this 27th day of June One thousand [illegible] hundred and sixty-seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution in the Cou[illegible] Dumfries separately from any other Medical Practi[illegible] visited and personally examined (4) William Cecil Ross, [illegible] of Grasmere, Westmoreland, [illegible] the said William Cecil Ross is a (5) Lunat[illegible] and a proper person to be det[illegible] under Care and Treatment, and that I have formed this opinion upon the foll[illegible] grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) [illegible] extrem[illegible] nervous and his mind continually occupi[illegible] the delusion, that he is visited by night [illegible] mob whose voices he hears threatening to to[illegible] to kill him

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His attendant informs me that [illegible] are restless and disturbed on account [illegible] above delusive belief

Name and Medical Designation, John Dickson [illegible]

Place of Abode, Castle Street Dumfries

DATED this 27th day of June One thousand [illegible] hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James Gilchrist M.D.
being (1) Graduate of the University of Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Crichton Institution
in the County of Dumfries, seen and personally examined
William Cecil Ross, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

James Gilchrist M.D.

DATED this Twenty sixth day of June One thousand eight hundred and Sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Lauderdale Maitland Boyd (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) William Ross
Pendleton Manchester
Certificates under the hands of George J Henderson
and John Dickson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Cecil Ross Son of Petitioner and that the said
William Cecil Ross is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Cecil Ross as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize also Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Cecil Ross which accompanied the said Petition.

DATED this First day of July One thousand eight hundred and Sixty

L Maitland

To the Superintendent of the (7) Public Asylum of Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1077

William Cecil Ross

26/6/67

1077.

William Cecil Ross. WR

June 26/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,*—

The Petition of Joseph Welsh Inspector of Poor, Irongray

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Miller Labourer & Drumsleet your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Miller to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(1) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Joseph Welsh

Dated this Twenty Seventh (4) day of June One thousand eight hundred and Sixty Seven Years

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Miller
2. Sex and Age,	Male. 45 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Assertion on the Railway & Labourer
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Drumsleet, Irongray.
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	Occasionly for Some years
9. Whether first Attack,	Second Attack
10. Age (if known) on first Attack,	40 years
11. When and where previously under Examination and Treatment,	Brazils. abroad.
12. Duration of existing Attack,	Unknown
13. Supposed Cause,	Do
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Threatens his wife at times
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Irongray
18. Date of becoming Chargeable,	27th June 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Complaint is Jealousy toward his wife

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twenty Seventh day of June One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) Joseph Welsh Inspector Irongray

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

I, the undersigned, Patrick Murray, being a (1) Graduate of the University of E... and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Drumsl... in the Cou... separately from any other Medical Practiti... visited and personally examined (4) James Miller, Pau... and the said James Miller is a (5) Person... and a proper person to be det... under Care and Treatment, and that I have formed this opinion upon the follo... grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Restless, ... Fixated by ... to address ... put to him, talks at ... my ...

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr. MacKenzie, his neighbour, states that he wandered about the ... nights, that a week ago he had the furniture on the floor, to put ... often refused to take his food. Mr. Houlston at Carnoch, state... he asked Mr. Payne Fanning, the Lord ... this with the intention of giving ... them more (which he declined to ... evidently from illness)

Name and Medical Designation, P. Murray M...

Place of Abode, Buccleuch St. Dum...

DATED this 25 day of June One thousand e... hundred and 67

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

I, the undersigned, William Lovitt Kerr, being a (1) Doctor of Medicine & Licent. Roy. Coll. Surgeons Edin. and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Drumsla... in the County Dumfries Kirkcudbright separately from any other Medical Practition... visited and personally examined (4) James Miller, a pau... and th... the said James Miller is a (5) Person ... and a proper person to be detain... under Care and Treatment, and that I have formed this opinion upon the follow... grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He seems to h... a Monomania of Jealousy. He is morbidly ... and irritable. And is full of delus...

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His neighbours ... His wife states that he is restless & sleepless at ... Corroborate this ... walking about the house in an excited and alarmed ... statement of the ... sometimes threatening personal injury ... wife's, and are afraid of him ... night or day. —

Name and Medical Designation, William L. Kerr M...

Place of Abode, Buccleuch St, Dumfries

DATED this 25th day of June One thousand eigh... hundred and Sixty seven. —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

[, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
n the County of , seen and personally examined
, and that the said
erson is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight
undred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

, (1) Sheriff Substitute
f the (2) County of Dumfries
aving had produced to me, with a Petition at the instance of (3) Joseph Welsh, Inspector of Poor, Troqueer
ertificates under the hands of Patrick Murray
nd William Smith Kerr , being two Medical Persons
nly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and reatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic sylums in Scotland," setting forth that they had separately visited and examined (4) James Miller, Labourer, Drumsleet, Troqueer & Parish and that the said James Miller is a (5) person of unsound mind

nd a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to eceive the said James Miller as a Patient into the) Public Asylum of Southern Counties Dumfries and I authorize hee Transmission to the said Asylum accordingly; and I transmit you herewith se said Medical Certificates, and a Statement regarding the said James Miller which accompanied the said Petition.

DATED this Twenty Sixth day of June One thousand eight
undred and Sixty Seven years.

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

J Maitland

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

James Miller
27th June
1863

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*—

The Petition of James Howie, Farmer, Fergushill, Kelwinning humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Howie — your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore, please your Lordship to authorize the transmission of the said John Howie to the Crichton Royal Institution for Lunatics and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other ground of authority in which Petitioner stands to Lunatic.

James Howie

Dated this Twenty eighth (4) day of June One thousand eight hundred and Sixty seven

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	John Howie
Sex and Age,	Male, Eighteen years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Farmers Son — Engaged on Farm
Religious Persuasion, so far as known,	Original Secession Church
Previous Place of Abode,	North Fergushill, Kelwinning
Place where Found and Examined,	North Fergushill, Kelwinning
Length of time Insane,	A few days
Whether first Attack,	Yes
Age (if known) on first Attack,	Eighteen years
When and where previously under Examination and Treatment,	—
Duration of existing Attack,	A few days
Supposed Cause,	Unknown
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	Yes
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
Date of becoming Chargeable,	—
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	James Howie, Farmer, North Fergushill Kelwinning — A sister for a short time
Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Twenty eighth day of June One thousand eight hundred and Sixty seven

(To be signed by Party applying) James Howie

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, David D. Service
being a (1) M. D. Universitat: Glasguensis & an Lond.
and being in actual practice as a (2) General Practitioner of Ellis
hereby certify, on soul and conscience, that I have this day, at (3) North Fa
Parish of Kilwinning in the Co
Ayr separately from any other Medical Pract
visited and personally examined (4) John Howie
the said John Howie is a (5) person
unsound mind and a proper person to be d
under Care and Treatment, and that I have formed this opinion upon the fol
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Incoherent rambling talk without meaning or connection great violence, excessive restlessness, and a tendency to destroy whatever dress he has on

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The same facts communicated to me by his father Jas Howie Farmer North Fa

Name and Medical Designation, David D. Service
L. R. C. S.

Place of Abode, Bridgend Kilwinning

DATED this 28th day of June One thousand hundred and Sixty Seven

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, George J. Hearder
being a (1) Doctor of Medicine of the University of St Andrews
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Institution in the Cou
Dumfries separately from any other Medical Practi
visited and personally examined (4) John Howie, Far
of Fergushill, Kilwinning. an
the said John Howie is a (5) Lunatic
and a proper person to be de
under Care and Treatment, and that I have formed this opinion upon the foll
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Is in a st of perigilium, unconscious of what is pas before him, & unable to understand or rep to questions.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, George J. Hearder
M. D. L. R. C. S.

Place of Abode, Powick, Wr Worcest

DATED this 29th day of June One thousand hundred and Sixty-seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, David D. Service being (1) ~~and~~ an M. D. and an L. R. C. S. Edinr. hereby certify, on soul and conscience, that I have this day, at (2) North Ferguhill Kilwinning in the County of Ayr, seen and personally examined John Howie, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

David D. Service M. D. L. R. C. S. Edinr.

DATED this 28th day of June One thousand eight hundred and Sixty Seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Lauderdale Maitland Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Howie Farmer, Ferguhill, Kilwinning Certificates under the hands of David D. Service and George I Hearder, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) John Howie, the Petitioner's son and that the said John Howie is a (5) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Howie as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Howie which accompanied the said Petition.

DATED this First day of July One thousand eight hundred and Sixty seven

L Maitland

To the Superintendent of the (7) Public *Asylum of* Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1078

John Morris

29/6/69

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

riff or Steward. e or Stewartry.

Unto the Honourable the (1) Sheriff *of* (2) Wigton and Kirkcudbright *and his Substitutes,*—

The Petition of Donald Campbell residing in Stranraer with concurrence of William Groves Interim Inspector of Poor Stranraer.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Eliza Paul or Campbell

tate degree of ship or other in which Peti- tands to Luna-

your Petitioner's (3) (the said Donald Campbell's) mother

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mrs Eliza Paul or Campbell to the Creighton tion and Southern Counties Asylum and to sanction her admission into the the said Asylum.

e date of the must be with- een clear days the dates of edical Certifi-

Dated this thirteenth (4) day of June One thousand eight hundred and sixty seven.

STATEMENT.

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

1. ristian Name and Surname of Patient at length,	Mrs Eliza Paul or Campbell
2. x and Age,	Female - age unknown
3. arried, Single, or Widowed,	Widow
4. ondition of Life, and previous Occupation (if any),	Widow of a Parish Clergyman
5. eligious Persuasion, so far as known,	Established Church - Presbyterian
6. revious Place of Abode,	Stranraer
7. ace where Found and Examined,	North West Castle - Stranraer
8. ength of time Insane,	present attack two weeks - previous attack
9. hether first Attack,	No — two months - first attack not known.
10. ge (if known) on first Attack,	
11. hen and where previously under Examination and Treatment,	many years ago, at Morningside, subsequently at Dalmanul
12. uration of existing Attack,	two weeks -
13. upposed Cause,	obscure disease of brain.
14. hether subject to Epilepsy,	no
15. hether Suicidal,	yes
16. hether Dangerous to others,	yes
17. arish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. ate of becoming Chargeable,	—
19. hristian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of her Family known to be or to have been Insane,	Donald Campbell her Son aged 16 years presently residing in Stranraer
20. pecial circumstances (if any) preventing the insertion of any of the above particulars,	

certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this thirteenth day of June One thousand eight hundred and sixty seven.

(*To be signed by Party applying*) J. A. Campbell
William Groves Interim Inspector of Poor Stranraer

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, John Orgill
being a (1) Licentiate of the Faculty of Physicians & Surgeons Glasgow
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) North Castle Strauraer Wigtown in the
separately from any other Medical Practitioner visited and personally examined (4) Eliza Paul or Campbell a widow
the said Eliza Paul or Campbell is a (5) an insane person and a proper person to be
under Care and Treatment, and that I have formed this opinion upon the
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Thinks the about her are defrauding her; that her children being murdered; that the house is on fire talks generally in an incoherent manner

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others Mrs Malcolm her nurse and Mrs Cunningham who have been constantly with her for ten past have observed the same

Name and Medical Designation, John Orgill

Place of Abode, Strauraer

DATED this 13th day of June One thousand hundred and sixty seven

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, David Easton
being a (1) Doctor of medicine and Licentiate of the Royal College of Surgeons of Edinburgh
and being in actual practice as a (2) General practitioner
hereby certify, on soul and conscience, that I have this day, at (3) North Castle Strauraer Wigtown in the C
separately from any other Medical Practitioner visited and personally examined (4) Eliza Paul or Campbell
the said Eliza Paul or Campbell is a (5) of unsound mind and a proper person to be
under Care and Treatment, and that I have formed this opinion upon the
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) General appearance indicate insanity, her mental faculties are deranged laborious under a variety of delusions, believing that imposed upon and defrauded by those around her, that she is robbed & her family murdered becomes at times greatly excited, of talks incoherently &c &c &c

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: Her incoherency, delusions, great excitability & deponed to by Mrs Malcolm her nurse & Mrs Cunningham.

Name and Medical Designation, David Easton M.D.

Place of Abode, Strauraer

DATED this 13th day of June One thousand hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Dated this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Peter Maclean of Buchpa (1) Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Donald Campbell
residing in Stranraer, with concurrence of William Brown
Inspector of Poor Stranraer and
Certificates under the hands of John Orgill
and David Easton M. D. , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Mrs Eliza Paul or Campbell and that the said
Mrs Eliza Paul or Campbell is an (5) insane person

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Eliza Paul or Campbell as a Patient into the Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Eliza Paul or Campbell which accompanied the said Petition.

Dated this thirteenth day of June One thousand eight hundred and sixty seven.

P. Maclean Sh. Sub.

To the Superintendent of the (6) Royal Crichton Institution
~~Asylum of~~ and Southern Counties Asylum Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Mrs Eliza Paul nr Campbell.

13/6/67

1019

July 9/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County Cubbon of Dumfries *and his Substitutes,*—

Dresser Isleyman The Petition of Robert Cubbon Senior

humble sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that George Christopher Cubbon

State degree of Relationship or other Quality in which Petitioner stands to Lunatic.

your Petitioner's (3) Son

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said George Christopher Cubbon to the Southern Counties Asylum Dumfries and to sanction his admission into the the said Asylum.

Robt Cubbon

The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 29th (4) day of June One thousand eight hundred and sixty seven

STATEMENT.

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

Christian Name and Surname of Patient at length,	George Christopher Cubbon
Sex and Age,	Male aged 26 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Bakers Shopman
Religious Persuasion, so far as known,	Church of England
Previous Place of Abode,	Douglas Isle of Man
Place where Found and Examined,	Royal Lunatic Hospital Liverpool England
Length of time Insane,	About two years
Whether first Attack,	First Attack
Age (if known) on first Attack,	24 years
When and where previously under Examination and Treatment,	Royal Lunatic Asylum Liverpool England
Duration of existing Attack,	Two years
Supposed Cause,	Anxiety from being unimployed
Whether subject to Epilepsy,	no
Whether Suicidal,	no ?
Whether Dangerous to others,	No ?
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	None
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Robert Cubbon, Father of Patient Robert Cubbon Jun, brother has been insane from Intemperance
Special circumstances (if any) preventing the insertion of any of the above particulars,	none

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 29th day of June One thousand eight hundred and sixty seven

(*To be signed by Party applying*) Robt Cubbon

P. P.

Sent Chas Pratt or Campbell 13/6/67

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Smith
being a (1) Graduate of the University of Edinburgh
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Isabella
Crantles Asylum in the County
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) George Christopher Cubbon
Isle of Man and
the said George Christopher Cubbon is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) From a hasty
Medical examination he seems Good humoured states that
he has no relatives that he has come direct from London
immediately Commenced to talk on other subjects. When
his language is quite incoherent

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr Cargrave states that he has been his attendant
for the last eighteen months. That he has brought him direct from
the Isle of Man. For certain that patient has a Father & several
Brothers. That for the last eighteen months he has not been in a state of
suffering at times from Melancholy. at other times Deranged & Incoherent

Name and Medical Designation, John Smith MB C

Place of Abode, Dumfries

DATED this First day of July One thousand
hundred and 67.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, or a person of unsound mind.

I, the undersigned, John Dickson
being a (1) Graduate of the Edinburgh University
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Crantles
County Asylum in the County
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) George Christopher Cubbon
Isle of Man and
the said George Christopher Cubbon is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is Incoherent — has delusion of persons and
places is confused — and his entire appearance and conduct indicate Insanity

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dumfries

DATED this 2nd day of July One thousand
hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Smith.
being (1) a Graduate of the University of Edinburgh Licentiate
hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Lunatic Asylum
in the County of Dumfries, seen and personally examined George Christopher Cubbon, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Smith M.B. C.M.

Dated this 1st day of July One thousand eight hundred and 67.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esqr (1) Sheriff Substitute
of the (3) County of Dumfries
having had produced to me, with a Petition at the instance of (4) Robert Cubbon Senior
Hair Dresser Isle of Man
Certificates under the hands of John Smith
and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (5) George Christopher Cubbon, Shopman, Petitioners son and that the said George Christopher Cubbon is a (6) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Christopher Cubbon as a Patient into the (7) Public Asylum of Southern Counties Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Christopher Cubbon which accompanied the said Petition.

Dated this Third day of July One thousand eight hundred and Sixty seven years

James Gordon

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

George Christopher Cubbon
1st July
1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

heriff or Steward. hire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *of* *and his Substitutes,*—

The Petition of Isabella Henderson - 24 Crescent Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Crosbie your Petitioner's (3) Sister is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Crosbie to the Southern Counties' Asylum and to sanction her admission into the the said Asylum.

State degree of tionship or other city in which Peti- r stands to Luna-

Isabella Henderson

The date of the tion must be with- ourteen clear days wing the dates of Medical Certifi- s.

Dated this 19 (4) day of July One thousand eight hundred and Sixty seven

STATEMENT.

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

Christian Name and Surname of Patient at length,	Margaret Crosbie
Sex and Age,	Female, between 50 & 60
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	No Occupation. Sexth
Religious Persuasion, so far as known,	United Presbyterian
Previous Place of Abode,	Cirrin Bridge
Place where Found and Examined,	—
Length of time Insane,	about 23 years
Whether first Attack,	no.
Age (if known) on first Attack,	" 30
When and where previously under Examination and Treatment,	Yes.
Duration of existing Attack,	23 years.
Supposed Cause,	Death of Mother & Sisters
Whether subject to Epilepsy,	no.
Whether Suicidal,	no.
Whether Dangerous to others,	no — very quiet to others
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper.
Date of becoming Chargeable,	not a pauper
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of her Family known to be or to have been Insane,	Isabella Henderson. Sister 24 Church Crescent Dumfries. none.
Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 19th day of July One thousand eight hundred and 67

(*To be signed by Party applying*) Isabella Henderson

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, George I. Hearder being a (1) Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Margaret Crosbie, of Crosbie Bridge, no occupation and the said Margaret Crosbie is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Is incoherent in her conversation & subject to many delusions, such that some persons had acted on her head, through a wall, so as to remove all her brains.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, George I. Hearder L.R.C.S.

Place of Abode, Powick Near Worcester

DATED this 19th day of July One thousand eight hundred and sixty-seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson being a (1) Graduate of the Edinburgh University and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Margaret Crosbie of Crosbie and the said Margaret Crosbie is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is incoherent and has delusions of various kinds — identity, & mistaken notions of place.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The Matron informs me that she is Restless and vigilants at night.

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dumfries

DATED this 20th day of July One thousand eight hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Ramsay McCrab being (1) graduate in Medicine of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum in the County of Dumfries, seen and personally examined Margaret Crosbie, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

W. R. McCrab M.D.

DATED this nineteenth day of July. One thousand eight hundred and sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Isabella Henderson 24 Church Crescent Dumfries Certificates under the hands of George T. Hearder and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret Crosbie, Carron Bridge (Petitioners sister) and that the said Margaret Crosbie is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Crosbie as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Crosbie which accompanied the said Petition.

DATED this Twenty second day of July One thousand eight hundred and sixty seven

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries } James Gordon

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/306.

Margaret Crosbie.

Admitted 19/7/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

ff or Steward. or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,*—

The Petition of Robert Scott Inspector of Poor of the Parish of Kerrick

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Hoatson

ate degree of ship or other in which Peti- nds to Luna-

your Petitioner's (3) Pauper

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Robert Hoatson to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

Robt Scott Inspector of Poor Kerrick

s date of the must be with- en clear days the dates of dical Certifi-

Dated this Nineteenth (4) day of July One thousand eight hundred and Sixty Seven

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STATEMENT.

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

ristian Name and Surname of Patient at ength,	Robert Hoatson
: and Age,	male 77
rried, Single, or Widowed,	Married
ndition of Life, and previous Occupation (if any),	Gardiner — Soldier formerly
igious Persuasion, so far as known,	Protestant
evious Place of Abode,	Auchencairn
ce where Found and Examined,	Auchencairn
ngth of time Insane,	about two years
nether first Attack,	yes
e (if known) on first Attack,	75
en and where previously under Examination and Treatment,	Never under treatment before
ration of existing Attack,	
pposed Cause,	Grief for loss of a son at sea two years ago
nether subject to Epilepsy,	No
nether Suicidal,	yes
nether Dangerous to others,	No
rish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kerrick
te of becoming Chargeable,	19th July 1867
ristian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Wm Hoatson son - lives at Palmarkie. Some of family have ever been known to be Insane before
ecial circumstances (if any) preventing the insertion of any of the above particulars,	* This patient is quiet & has always been so. His insanity has increased gradually till it culminated in an attempt at suicide on the night of 15th or morning of 16th July 1867

certify, that, to the best of my knowledge, the above particulars are correctly stated.

ATED this 19th day of July One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) Robt Scott Inspector of Poor Kerrick

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Grigor Stene
being a (1) Licentiate of the Royal College of Surgeons Edinburgh
and being in actual practice as a (2) general practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Auch[illegible] Kirkcudbright. in the [illegible]
separately from any other Medical Pr[illegible]
visited and personally examined (4), Robert Hoatson, [illegible]
the said Robert Hoatson — is a (5) person of unsound mind — and a proper person to b[illegible]
under Care and Treatment, and that I have formed this opinion upon the [illegible]
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) That he attempted suicide by cutting his throat, with a razor on the morning of the 16th Curr. that he [illegible] he is watched by three fiends who are ready to take his life.

2. Other facts (if any) indicating Insanity communicated to me by others: William Hoatson Mariner Palnac told me that he attempted to strangle himself by tying a hand kicking round his throat.

Name and Medical Designation, Grigor Stene
L. R. C. S. [illegible]

Place of Abode, Auchencairns

DATED this 19th day of July. One thous[illegible]
hundred and sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, George I. Hearder
being a (1) Licentiate of the Royal College of Surgeons of Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Lun[illegible] Counties Asylum in the [illegible]
Dumfries separately from any other Medical Pr[illegible]
visited and personally examined (4) Roberts Hoatson, Ga[illegible] of Auchencairn, Pauper,
the said Robert Hoatson is a (5) Sur[illegible]
and a proper person to be [illegible]
under Care and Treatment, and that I have formed this opinion upon the [illegible]
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) has halle[illegible] of sight & hearing; imagines persons [illegible] & tell him he is lost for ever, & ass[illegible] at such times he has irresistable im[illegible] attempt self-destruction.

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

Name and Medical Designation, George I. Hear[illegible]
L. R. C. [illegible]

Place of Abode. Pourick, Wr. Wor[illegible]

DATED this 29th day of July One thous[illegible]
hundred and Sixty-seven

No. I.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Gregor Rose Royal College of Surgeons Edinburgh being (1) a Licentiate of the hereby certify, on soul and conscience, that I have this day, at (2) Auchencairn in the County of Kirkcudbright, seen and personally examined Robert Hoatson, Pauper Lunatic, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Gregor Rose L.R.C.S. Ed.

DATED this 19th day of July One thousand eight hundred and sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Scott Inspector of Poor of the parish of Kirkcudbright Certificates under the hands of Gregor Rose and George S. Hearder, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Robert Hoatson Auchencairn (a pauper) and that the said Robert Hoatson is a (5) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Robert Hoatson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Hoatson which accompanied the said Petition.

DATED this twenty second day of July One thousand eight hundred and sixty seven

James Gordon

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/307.

-s Robert Haaton.

Admitted. 20/7/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Robert Moncrieff Rome Inspector of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Adam Little under your Petitioner's (3) Charge as Inspector of Poor is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Adam Little to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

R. M. Rome

State degree of relationship or other reason in which Petitioner stands to Lunatic.

The date of the Petition must be within fourteen clear days preceding the dates of the Medical Certificates.

DATED this Nineteenth (4) day of July One thousand eight hundred and Sixty Seven years

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STATEMENT.

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

Christian Name and Surname of Patient at length,	Adam Little
Sex and Age,	Male, Twenty Seven Years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Teacher
Religious Persuasion, so far as known,	Protestant
Previous Place of Abode,	Langholm
Place where Found and Examined,	Langholm
Length of time Insane,	Eight Months now & 2 Years formerly
Whether first Attack,	No
Age (if known) on first Attack,	Twenty two
When and where previously under Examination and Treatment,	Langholm
Duration of existing Attack,	Eight Month
Supposed Cause,	
Whether subject to Epilepsy,	no
Whether Suicidal,	no
Whether Dangerous to others,	Threaten
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Langholm
Date of becoming Chargeable,	Nineteenth July 1867
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Adam Little, Son of Mrs James Little or Park Widow, Residing in Mary Street New Langholm Yes Some of his Father Relations
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this Nineteenth day of July One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) R. M. Rome

Inspector of Poor P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, William Johnston Cargill
being a (1) Licentiate of the Royal College of Surgeons (Edinburgh)
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Mary Hill
New Langholm
Dumfries
separately from any other Medical Practit
visited and personally examined (4) Adam Little - Mary Hill
New Langholm (Pauper)
the said Adam Little is a (5) person o
unsound mind and a proper person to be de
under Care and Treatment, and that I have formed this opinion upon the foll
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Present incoh
has occasionally irritable; frequent mu
delusions of persecution & his relations
Grimes - restless bodily and has frequent fit
depression and statements of sins he has
of his supposed murderous

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Whatever facts have been communi
to me by his Brother in law Arthur Roc
his Mother —

Name and Medical Designation, } W. J. Cargill L.R.C.S.E.
Surgeon

Place of Abode, Langholm

DATED this 18th day of July One thousand ei
hundred and fifty seven —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, William Maxwell
being a (1) Surgeon Licentiate of the Royal College of Surgeons Edin
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Mary Hill
New Langholm,
Dumfries
separately from any other Medical Practi
visited and personally examined (4) Adam Little, Mary Hill
New Langholm, (Pauper)
the said Adam Little is a (5) person
unsound mind and a proper person to be de
under Care and Treatment, and that I have formed this opinion upon the fol
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Has attempted Su
Friend, leading to fanciful ideas of his fellow cre
in general. Delusion of Great wealth & increasing Conce
person not friendly, dislike to his relations & acquaintances
~~2. Other Facts (if any) indicating Insanity communicated to me by others:~~ (7)
Friends interrupted & occasionally kept

(7) *State the information, and from whom derived.*

Name and Medical Designation, } William Maxwell Surg

Place of Abode, Langholm

DATED this Fifteenth day of July One thousan
hundred and fifty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon (1) Esquire, Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Robert Menzies
Roxburgh Inspector of Poor Langholm
Certificates under the hands of William Thurstone Carlyle
and William Maxwell, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Adam Little Mary Street new Langholm Dumfriesshire and that the said
Adam Little is a (5) person of unsound
mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Adam Little as a Patient into the (6) Public Asylum of Southern Counties Dumfries, and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Adam Little which accompanied the said Petition.

DATED this Seventh day of July One thousand eight hundred and sixty seven

James Gordon

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/308

Adam Little

Admitted 24th July 1867.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*—

The Petition of John Dinwoodie, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Bernard Gallocher, residing in Dumfries your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Bernard Gallocher to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(1) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

John Dinwoodie

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 29th (4) day of July One thousand eight hundred and Sixtyseven

---

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Bernard Gallocher
2. Sex and Age,	Male – 43 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Pauper – Hawker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	– do –
8. Length of time Insane,	about two days
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	43 years
11. When and where previously under Examination and Treatment,	Dumfries
12. Duration of existing Attack,	about two days
13. Supposed Cause,	Epilepsy
14. Whether subject to Epilepsy,	yes
15. Whether Suicidal,	Not Known
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries meantime
18. Date of becoming Chargeable,	26th July 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 29th day of July One thousand eight hundred and Sixtyseven

(*To be signed by Party applying* John Dinwoodie, Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Marshall being a (1) graduate of the faculty of Physicians Surgeons Glasgow and College of St Andrews and being in actual practice as a (2) physician hereby certify, on soul and conscience, that I have this day, at (3) Johnston Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) Bernard Gallacher a [illegible] and the said Bernard Gallacher is a (5) an insane [illegible] and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks incoherently cannot answer questions seems in a [illegible] stupid state and of late has been subject to violent attacks of Epilepsy

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Much the same as above

Name and Medical Designation, W Marshall M.D.

Place of Abode, Dumfries

DATED this 27th day of July One thousand eight hundred and Sixty seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Ramsay McNab being a (1) graduate in Medicine of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County Dumfries. separately from any other Medical Practitioner visited and personally examined (4) Bernard Gallacher - Hawkins Dumfries. Pauper and the said Bernard Gallacher. is a (5) person of unsound mind. and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He has delusions answers questions with difficulty and in a rambling incoherent manner

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) his attendant informs me that he sleeps badly at night.

Name and Medical Designation, W. R. McNab M.D.

Place of Abode. Southern Counties Asylum

DATED this twenty seventh day of July One thousand eight hundred and Sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, being (1) Graduate of the Faculties of Physicians and Surgeons hereby certify, on soul and conscience, that I have this day, at (2) Johnston Close Dumfries in the County of Dumfries, seen and personally examined Bernard Gallocher, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

Glasgow & College of St Andrews

And I further certify that the case of the said person is one of Emergency.

William Marshall M.D. &c

DATED this 26th day of July One thousand eight hundred and Forty Seven years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Dinwoodie Inspector of Poor, Dumfries Certificates under the hands of William Marshall — and William Ramsay M.D. — , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Bernard Gallocher, Johnston's Close, Dumfries a pauper and that the said Bernard Gallocher — is (5) an insane person and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Bernard Gallocher — as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Bernard Gallocher — which accompanied the said Petition.

DATED this Twenty Ninth day of July One thousand eight hundred and Forty seven years

James Gordon

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

/ Bernard Gallacher

26.7.67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of Isabella Gillison or Kennedy - Gatside Dunscore. humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jessie Kennedy or Seaton your Petitioner's (3) Daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jessie Kennedy or Seaton to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

Isabella Kennedy

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this twenty seventh (4) day of July One thousand eight hundred and sixty seven.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jessie Kennedy or Seaton
2. Sex and Age,	Female - 34
3. Married, Single, or Widowed,	
4. Condition of Life, and previous Occupation (if any),	Ploughman's Wife.
5. Religious Persuasion, so far as known,	United Presbyterian
6. Previous Place of Abode,	Mosshead Dunscore.
7. Place where Found and Examined,	
8. Length of time Insane,	three days.
9. Whether first Attack,	First.
10. Age (if known) on first Attack,	34.
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	three days.
13. Supposed Cause,	not known.
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper.
18. Date of becoming Chargeable,	not a pauper.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of her Family known to be or to have been Insane,	Robert Seaton - Mosshead Dunscore Her Husband none.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this twenty seventh day of July One thousand eight hundred and sixty seven.

(*To be signed by Party applying*) Isabella Kennedy.

P. p.

Bernard Gallacher
26.7.67

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Marshall being a (1) Graduate of the Faculty of Physicians Surgeons Glasgow and College of St Andrews and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Co Asylum Dumfries in the County separately from any other Medical Practitioner visited and personally examined (4) Jess Kennedy or Seaton, Plough wife, Dunscore and the said Jess Kennedy or Seaton is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has delusions to being surrounded by devils, cries and sever incessantly is terribly excited &c

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Much the same as above

Name and Medical Designation, W Marshall M.D. &c

Place of Abode, Dumfries

DATED this 29th day of July One thousand eight hundred and sixty seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson being a (1) Graduate of the Edinburgh Univer and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Asylum Dumfries in the County separately from any other Medical Practitioner visited and personally examined (4) Jess Kennedy or Seaton Ploughman's Wife Dunscore and that the said Jess Kennedy or Seaton is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is in a state of Maniacal excitement - perfect incoherent, refuses food, and demands h

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

The Medical Attendant informs me that condition above described has continued her admission

Name and Medical Designation, John Dickson M.D.

Place of Abode, Castle Street Dumfries

DATED this 29th day of July One thousand eight hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Marshall
being (1) Graduate of the Faculty of Physicians and Surgeons Glasgow and College of St Andrews
hereby certify, on soul and conscience, that I have this day, at (2) Dumfries
in the County of Dumfries, seen and personally examined
Wm Seaton, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

W Marshall M.D &c

DATED this 27th day of July One thousand eight hundred and Sixty seven years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope Esquire (3) Sheriff Substitute
of the (3) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Isabella Gillison or Kennedy, Gateside of Isle, Dunscore
Certificates under the hands of William Marshall
and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jess Kennedy or Seaton, Ploughman's wife, Petitioners daughter and that the said Jess Kennedy or Seaton is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jess Kennedy or Seaton as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jess Kennedy or Seaton which accompanied the said Petition.

DATED this Thirteenth day of July One thousand eight hundred and Sixty seven

David Boyle Hope

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

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(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

✓ Jess Kennedy or Seaton

27/7/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (1) Shire of Dumfries *and his Substitutes,—*

The Petition of Malcolm McLachlan Harper, Banker, Douglas humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Harper your Petitioner's (3) brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Harper to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

M. H. L. Harper

(4) The date of the petition must be within fourteen clear days following the dates of Medical Certificates.

Dated this Twenty eighth (4) day of July One thousand eight hundred and sixty seven years.

STATEMENT.

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

Christian Name and Surname of Patient at length,	William Harper
Sex and Age,	male 27.
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Banker's Clerk
Religious Persuasion, so far as known,	Member of R.P. Congregation
Previous Place of Abode,	Always resident in Castle Douglas
Place where Found and Examined,	Examined at his mother's house
Length of time Insane,	4 days
Whether first attack,	first attack
Age (if known) on first Attack,	27.
When and where previously under Examination and Treatment,	—
Duration of existing Attack,	4 days
Supposed Cause,	Long standing debility
Whether subject to Epilepsy,	No
Whether Suicidal,	no symptoms so far
Whether Dangerous to others,	When controlled is very violent & threatening
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Private Patient
Date of becoming Chargeable,	—
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Malcolm McLachlan Harper Castle Douglas, Brother. No other member ever known to be insane
Special circumstances (if any) preventing the insertion of any of the above particulars,	none He absolutely refuses & resists, taking either food or Medicine

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 23th day of July One thousand eight hundred and sixty seven years

(To be signed by Party applying) M. H. L. Harper

Castle Douglas.

P. P.

Jess Kennedy v. Jessie

27/7/67.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Wallace Marshall
being a (1) graduate of faculty of Physicians and
Surgeons Glasgow & Royal College of Surgeons
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern
Asylum Dumfries in the
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) William Harper,
Clerk, Castle Douglas
the said William Harper is a (5) Lunatic
and a proper person to be under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Has delusions
with regard to certain portions of his body
has always claiming Gentlemen and
very excited

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mr Rickson gives much the same
form

Name and Medical Designation, Wallace Marshall M.D.

Place of Abode, Dumfries

Dated this 29th day of July One thousand eight hundred and sixty seven years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson M.D.
being a (1) Graduate of the Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) South
Combe Asylum in the County of
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) William Harper Esq
Clerk Castle Douglas
the said William Harper is a (5) Lunatic
and a proper person to be under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
He is in a State of Incoherent excitement
Extremely restless. Imperfectly incoherent
Refusing food, & requiring Seclusion

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
The Medical Assistant informs that the
condition above described has continued
his admission

Name and Medical Designation, John Dickson M.D.

Place of Abode, Castle Street Dumfries

Dated this 29th day of July One thousand eight hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Walter Lorraine
being (1) M.D. Edin & L.R.C.S. Edin
hereby certify, on soul and conscience, that I have this day, at (2) Castle Douglas
in the County of Kirkcudbright, seen and personally examined
William Harper, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Walter Lorraine

DATED this 28th day of July One thousand eight
hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope Esqre (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Malcolm McLachlan
Harper Banker, Castle Douglas
Certificates under the hands of William Marshall
and John Dickson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
William Harper, Bankers clerk Castle Douglas and that the said
William Harper — is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Harper as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Harper — which accompanied the said Petition.

DATED this Fourteenth day of July One thousand eight
hundred and Sixty seven years

David Boyle Hope

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/311.

William Harper.

28/7/67.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

'LICATION TO THE GENERAL BOARD OF LUNACY TO GRANT RANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

he undersigned
g desirous to transfer Mary Wellman, or Sonner,
resent a Patient in the Royal Edinburgh Asylum, and (1) Pauper Lunatic of the Parish of which I am Inspr.
Poor
mfries Asylum
from the said Asylum to the
hereby request the authority of
Board to such transfer; and I subjoin a Statement of Particulars regarding the said
Mary Wellman, or Sonner, and a Medical Certificate with
ect to her mental and bodily condition.

(1) *If Lunatic is not a Pauper:* detained at my instance, *or* whose nearest known relative I am. *If Lunatic is a Pauper:* a Pauper Lunatic of the Parish of which I am Inspector of Poor.

Peter Gordon
Inspr of Poor

DATED at Kirkcowan this 24th day of July
thousand eight hundred and 67

(2) State degree of Relationship, or other capacity in which Applicant stands to Patient.

STATEMENT.

Christian Name and Surname of Patient at length,	Mary Wellman or Sonner
Sex and Age,	F 19-
Married, Single, or Widowed,	Single
Condition of Life, and Previous Occupation (if any),	Pauper & outdoorworker
Religious Persuasion, so far as known,	
Date of Admission into Asylum,	Dec. 21st 1866
Length of time Insane,	7 months.
Whether first Attack,	Yes
Age (if known) on first Attack,	19-
Duration of existing Attack,	7 months
Supposed Cause,	unknown to me somewhat I am led to understand
Whether subject to Epilepsy,	no
Whether Suicidal,	must have been
Whether Dangerous to others,	
Parish to which the Lunatic (if a Pauper) is Chargeable,	Kirkcowan Wigtownshire
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of Family known to be, or to have been Insane,	1 Janet Ball or Sonner her Mother 2 Cranston, 3 none Insane before

I certify that, to the best of my knowledge, the above particulars are correctly stated.

(*To be signed by the Applicant*) Peter Gordon

DATED this 24th day of July One thousand eight hundred and 67

N.B.—The foregoing particulars are required for the information of the authorities to whose care the Patient is to be transferred.

MEDICAL CERTIFICATE.

(1) State Medical Qualification.
(2) Name Asylum.

I, the undersigned David Skae MD being (1) a Fellow of the Royal College of Surg[illegible] hereby certify that I have this day at (2) the Royal Edinburgh As[illegible] personally examined Mary Wellman or Tonner at [illegible] Patient in said Asylum, and with respect to his Mental State that she [illegible] under Epileptic Mania

; and with respe[illegible] Bodily Health and Condition that they are good

and I further certify that, in my opinion, there is nothing in the Mental or Bodi[illegible] dition of the Patient to contraindicate removal to the Asylum of Dumfri[illegible]

David Skae M[illegible]

DATED this Twenty fifth day of July One thousan[illegible] hundred and sixty seven

---

SANCTION BY THE BOARD OF LUNACY.

(*Under this Sanction a Patient may be Transferred without an Order of the Sh*[illegible])

(1) Insert at whose instance the Lunatic is detained, or the nearest known Relative of the Lunatic, or the Inspector of the Parish by which the expense of the maintenance of the Lunatic is defrayed.

Application having been made to the Board by (1) the Inspector [illegible] Poor Kirkcowan to authorize the transfer of Mary Wellman or Tonner from Edinburgh Royal Asylum to Dumfr[illegible] Royal Asylum, and the Board having considered such applicati[illegible] the accompanying Medical Certificate, do hereby authorize the transfer of th[illegible] Mary Wellman or Tonner as requested.

James Cox Commissio[illegible]

DATED at Edinburgh, this Eighth day of August [illegible] thousand eight hundred and sixty seven

Date of Sheriff's Order 22nd December 1866.

1/312
Mary Wellman or Tonner
Aug 1/1867

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (1) Shire of Dumfries *and his Substitutes.*

The Petition of Hunterguson Auldgirth

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that your Petitioner's (2) Brother

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Ferguson to the Crichton Royal Institution and to sanction his admission into the the said Asylum.

John Ferguson

(3) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 3d (3) day of August One thousand eight hundred and Sixty Seven

STATEMENT.

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

Christian Name and Surname of Patient at length,	Thomas Ferguson
Sex and Age,	Male 34 Years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Labourer
Religious Persuasion, so far as known,	Presbyterian
Previous Place of Abode,	Kippen Stirling
Place where Found and Examined,	Dumfries
Length of time Insane,	2 days
Whether first Attack,	Second
Age (if known) on first Attack,	33 Years
When and where previously under Examination and Treatment,	Stirling County Asylum
Duration of existing Attack,	2 days
Supposed Cause,	Study
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	No
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Ferguson Brother Auldgirth
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 3d day of August One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) John Ferguson

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, Patrick Murray being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Thomas Ferguson the said Thomas Ferguson aged 60 is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is unsettled, restless; cannot talk on any one subject; is constantly whistling, and walks about the room.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Dr Borthwick informs me that he attempted to strike him, and has been constantly noisy and troublesome upon the ward.

Name and Medical Designation, Patrick Murray M.D.

Place of Abode, 49 Buccleuch Street Dumfries

DATED this 2nd day of August One thousand eight hundred and 67.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, John Smith. being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, ~~on soul and conscience~~, that I have this day, at (3) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Thomas Ferguson. the said Thomas Ferguson aged 60 is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is very excited and violent. On being cautioned he ceases whistling & conducts himself in a proper manner & refuses to answer questions put to him.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Dr Graham informs me that during the last few days he has been in an excited state & has on occasions threatened to break & destroy articles of furniture.

Name and Medical Designation, John Smith M.D.

Place of Abode, Dumfries

DATED this 2nd day of August One thousand eight hundred and 67.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Alexander Berthwick A.M.D being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Auldgirth in the County of Dumfries, seen and personally examined Thomas Ferguson, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Alex Berthwick

DATED this 1st day of August One thousand eight hundred and Sixty Seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Ferguson Auldgirth Certificates under the hands of Patrick Murray and John Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Thomas Ferguson (Petitioners Brother) and that the said Thomas Ferguson is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Ferguson as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Ferguson which accompanied the said Petition.

DATED this Sixth day of August One thousand eight hundred and sixty seven

James Gordon

To the Superintendent of the (7) Public *Asylum of* Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

The Sheriff absent on Monday
[illegible]

1081

/ Thomas Ferguson

Aug. 2d 67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes.*

The Petition of William James Linton, of Brantwood, Coniston, Lancashire, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Emily Wade Linton your Petitioner's (3) Daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Emily Wade Linton to the Crichton Royal Institution and to sanction her admission into the the said Asylum.

W J Linton

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Dated this fifth (4) day of August, One thousand eight hundred and Sixty-four

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Emily Wade Linton
2. Sex and Age,	aged 23, on the 18th of May of this Year
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	None
5. Religious Persuasion, so far as known,	Unitarian
6. Previous Place of Abode,	Brantwood, Coniston, Lancashire
7. Place where Found and Examined,	Crichton Royal Institution, Dumfries
8. Length of time Insane,	About five weeks
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	23
11. When and where previously under Examination and Treatment,	At home only
12. Duration of existing Attack,	About five weeks
13. Supposed Cause,	Mental Anxiety
14. Whether subject to Epilepsy,	No Doubtful
15. Whether Suicidal,	No
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William James Linton, Father Brantwood, Coniston, Windermere Mother
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this fifth day of August One thousand eight hundred and Sixty-four

(*To be signed by Party applying*) W J Linton

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, William Smith Kerr,
being a (1) Doctor of Medicine and Lic. Roy. C
Surgeons, Edin.
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Crichton
Royal Institution
Dumfries in the Coun
separately from any other Medical Practiti
visited and personally examined (4) Emily Wade Lucton
Brantwood, Laucrybrig and
the said Emily Wade Lucton is a (5) Lunat
and a proper person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) There is gre
Indecency, She refuses to speak a
to shipkeep, shows other symptoms
depressing.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her attendant states that she is occasionally
and violent, and has to be fed
Name and Medical Designation, William S. Kerr
Place of Abode, Buccleuch St Dumf
Dated this 6th day of August One thousand e
hundred and Sixty Seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Patrick Finlay
being a (1) Graduate of the University of Edin
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Crichton
Institution Dumfries in the County
separately from any other Medical Practitioner
visited and personally examined (4) Emily Wade Lucton
Brantwood Lancrybrig and
the said Emily Wade Lucton is a (5) Lunatic
and a proper person to be detain
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Great Mela
indisposed to speak to any one
Open her eyes.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Dr Gilchrist informs me that
does not sleep, will not take her
and refused to answer any
Name and Medical Designation, P Finlay M
Place of Abode, Buccleuch St Dumf
Dated this 6th day of August One thousand eig
hundred and 67

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, [illegible] M.D. being (1) a Graduate of the University of Edinburgh & Crichton Royal Institution hereby certify, on soul and conscience, that I have this day, at (2) Dumfries in the County of Dumfries, seen and personally examined Emily Wade Linton, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

[illegible] M.D.

Dated this 5th day of August One thousand eight hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William James Linton of Brantwood Coniston Lancashire Certificates under the hands of William Smith Kerr and Patrick Murray, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Emily Wade Linton petitioners daughter and that the said Emily Wade Linton is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Emily Wade Linton as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Emily Wade Linton which accompanied the said Petition.

Dated this seventh day of August One thousand eight hundred and sixty seven years.

James Gordon

To the Superintendent of the (7) Public Asylum of Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Aug. 5/61

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *of* *and his Substitutes,*—

The Petition of Andrew Aitchison Farmer

Langholm

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Aitchison your Petitioner's (3) wife

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Aitchison to the Southern County asylum and to sanction her admission into the the said Asylum.

Andrew Aitchison Irvine Langholm

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 12 (4) day of August One thousand eight hundred and 1867

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Margaret Aitchison
2. Sex and Age,	Female age 49 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Farmer's wife
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	old Irvine
7. Place where Found and Examined,	Ditto
8. Length of time Insane,	Five or six weeks
9. Whether first Attack,	yes
10. Age (if known) on first Attack,	49 years
11. When and where previously under Examination and Treatment,	old Irvine
12. Duration of existing Attack,	Five weeks
13. Supposed Cause,	Rheumatic Fever
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	Has made the attempt
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	A sister about 5 years ago very unsettled in her mind
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 12 day of Augt. One thousand eight hundred and 67

(*To be signed by Party applying*) Andrew Aitchison Irvine

Langholm

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, John Dickson
being a (1) Graduate of the Edinburgh Univ
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) South
Cowtes Asylum Dumfries in the Cou
Dumfries separately from any other Medical Practit
visited and personally examined (4) Margaret Aitchison
Old Irvine Langholm
the said Margaret Aitchison is a (5) Lunat
and a proper person to be det
under Care and Treatment, and that I have formed this opinion upon the follo
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is ma
& restless. impulsive, & full of vague

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
She Medical Assistant informs me that s
sometimes violent and exceedingly dest

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dum

DATED this 15th day of August One thousand
hundred and Sixty seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, James Aitchison
being a (1) a Member of the Royal College of Phys
Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Old Irvi
near Langholm in the Count
Dumfries shire separately from any other Medical Practitio
visited and personally examined (4) Margaret Aitchison
of Old Irvine Langholm and
the said Margaret Aitchison is a (5) I
insane mind
and a proper person to be detai
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Very restless & in perpetual fear - and unable
to recognise those with whom she is daily & hourly
from the house

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
For days the Landlady mentioned her ~~unpleasant~~
attempting ~~to~~ to get at the knives &c

Name and Medical Designation, James Aitchison
Surgeon

Place of Abode, Wallace Newcastle

DATED this 12 day of Augt One thousand ei
hundred and 67

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James A Johnson
being (1) a Member of the Royal College of Physicians Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Irvine Lunatic Asylum
in the County of Dumfries, seen and personally examined
Margaret Aitchison or Johnstone, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

James Aitchison

Dated this 12 day of Augt One thousand eight
hundred and 67

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope Esq Advocate (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Andrew Aitchison
Farmer Irvine Langholm
Certificates under the hands of P. M. Dickson
and James Aitchison, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Margaret Aitchison petitioners wife and that the said
Margaret Aitchison is a (5) Lunatic and a person
of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Aitchison as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize you Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Aitchison which accompanied the said Petition.

Dated this 17th day of August One thousand eight
hundred and sixty seven

David Boyle Hope

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Stewartl, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Margaret Aitchison

12 August 1967.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward, Sheriff or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (1) County of Wigtown *and his Substitutes,—*

The Petition of James Dally Inspector of Poor of the Parish of Stranraer humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Samuel Park, Pauper, Son of John Park residing in St John Street Stranraer your Petitioner's (2) is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Samuel Park to the Southern Counties Asylum Dumfries and to sanction his admission into the the said Asylum.

(2) State degree of Relationship or other Capacity in which Petitioner stands to Lunatic.

James Dally Inspector of Poor

(3) The date of the Petition must be within fifteen clear days following the dates of the Medical Certificates.

Dated this eighth (3) day of August One thousand eight hundred and sixty seven.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Samuel Park
Sex and Age,	Male aged 33 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	—
Religious Persuasion, so far as known,	Protestant
Previous Place of Abode,	London Road Stranraer
Place where Found and Examined,	23 St John Street — Do —
Length of time Insane,	From Birth
Whether first Attack,	—
Age (if known) on first Attack,	—
When and where previously under Examination and Treatment,	up to the present has always been residing with his parents.
Duration of existing Attack,	—
Supposed Cause,	—
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	No
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Stranraer
Date of becoming Chargeable,	—
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	John Park, Patient's father
Special circumstances (if any) preventing the insertion of any of the above particulars,	No answers are given under 9, 10 & 12 as patient has been idiotic from birth.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this eighth day of August One thousand eight hundred and sixty seven.—

(*To be signed by Party applying*) James Dally Inspector of Poor, Stranraer.

Margt Adelaide 12 August 1867

MEDICAL CERTIFICATE, No. I.

(1) Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a Pauper state so.

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

(6) State the facts.

(7) State the information, and from whom derived.

I, the undersigned, John Orgill being a (1) Licentiate of the Faculty of Physicians and Surgeons of Glasgow and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) No 23 St John Street Stranraer in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Samuel Park a pauper the said Samuel Park is a (5) Idiot and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) I have known him from his boyhood as as idiot, and have very often seen him at home, and on the streets, so to know well his mental condition

2. Other facts (if any) indicating Insanity communicated to me by others: His parents declare that he has always been idiot and unable to take care of himself or to indicate his wants by speech.

Name and Medical Designation, John Orgill Abode

Place of Abode, Stranraer

DATED this Eighth day of August One thousand eight hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) Insert the street, and number of the house (if any), or other like particulars.

(4) Insert Designation and Residence, and if a pauper state so.

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

(6) State the facts.

(7) State the information, and from whom derived.

I, the undersigned, Ebenezer Fleming being a (1) Doctor of medicine and a Licentiate of the Royal College of Surgeons of Edinburgh and being in actual practice as a (2) General practitioner hereby certify, on soul and conscience, that I have this day, at (3) 23 St John Street, Stranraer in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Samuel Park, (Pauper) the said Samuel Park is a (5) Idiot and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has been familiarly known to me for many years, walking on the streets — saliva constantly flowing from his mouth. His eyes roll to and fro, partial paralysis of left side. No intelligence whatever, but in a state of confirmed Idiotcy

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His mother & father inform me, that he has never been able to articulate. Has been subject to paroxysms nervous excitement, but the last year or two less severely. Is difficult to keep clean.

Name and Medical Designation, Ebenezer Fleming, M.D.

Place of Abode. 1st Princes St. Stranraer

DATED this Ninth day of August One thousand eight hundred and Sixty Seven years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Peter MacLean Esquire Sheriff-Substitute —
of the (1) County of Wigtown (2)
having had produced to me with a Petition at the instance of (3) James Dalby
Inspector of Poor of the Parish of Stranraer
Certificates under the hands of John Argill Surgeon —
and Ebenezer Fleming M.D. —, being two Medical Persons duly qualified in terms of an Act intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Samuel Park and that the said
Samuel Park is an (5) Idiot

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Samuel Park as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Samuel Park which accompanied the said Petition.

DATED this Sixteenth day of August One thousand eight hundred and sixty seven

P. MacLean Sh. Sub.

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

Petition

By

James Dally Inspector of Poor Stranraer

To

Sheriff of the County of Wigtown

for the removal of

Samuel Parks Lunatic

(Pauper)

1867

Samuel Parks
Aug 17. 1867.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

...Steward. ...towartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of David Douglas Inspector, Irongray humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Welsh your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Welsh to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

...egree of ...or other ...ich Peti- ...to Luna-

David Douglas

...e of the ...be with- ...ear days ...dates of ...Certifi-

Dated this 17th (4) day of August One thousand eight hundred and sixty seven years.

Samuel Park Aug 17. 1867.

STATEMENT.

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

...an Name and Surname of Patient at ...th,	William Welsh
...d Age,	M. About 81 years
...l, Single, or Widowed,	Widower
...ion of Life, and previous Occupation ...ny),	Labourer
...us Persuasion, so far as known,	Member of the Church of Scotland
...us Place of Abode,	Ingleston. Irongray
...where Found and Examined,	Found at Ingleston & examined in Dumfries
...of time Insane,	About six weeks
...er first Attack,	yes
...f known) on first Attack,	81.
...and where previously under Examina- ...and Treatment,	never under treatment before
...on of existing Attack,	about 6 weeks.
...sed Cause,	Loss of his wife
...er subject to Epilepsy,	no
...er Suicidal,	no
...er Dangerous to others,	no
...or Union to which the Lunatic (if a ...per) is Chargeable,	Colmonell. by Girvan
...f becoming Chargeable,	17th August 1867.
...ian Name and Surname, and Place of ...ode of nearest known Relative of the ...ient, and degree of Relationship (if ...wn), and whether any Member of his ...mily known to be or to have been In- ...e,	William Welsh. his son, Ingleston Irongray one of his brothers insane
...l circumstances (if any) preventing the ...ertion of any of the above particulars,	none.

...tify, that, to the best of my knowledge, the above particulars are correctly stated.

...ED this 17th day of August One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) David Douglas Inspector

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Ingrs Hall being a (1) Graduate of the Faculty of and Surgeon Glasgow and College of and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Counties Asylum Dumfries in the separately from any other Medical visited and personally examined (4) William Welsh the said William Welsh is a (5) Lun and a proper person to under Care and Treatment, and that I have formed this opinion upon t grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks ma wrong as he has a young wife Lord Hollinwood's Cousin great savings out of pension with

2. Other facts (if any) indicating Insanity communicated to me by othe Mark the same as abo

Name and Medical Designation, W. Ingrs Hall M.D.

Place of Abode, Dumfries

DATED this 20th day of August One th hundred and Sixty seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Ramsay Mc. Nab being a (1) Graduate in Medicine of the Univ. of Edinburgh. and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries. in the separately from any other Medical visited and personally examined (4) William Welsh. Labouring Inglistan. Drungray. Kamper. the said William Welsh is a (5) Lun and a proper person to under Care and Treatment, and that I have formed this opinion upon t grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Is incoherent and rambling in his conversation. and has delusions about his being m to a young wife and also that he is possessed of considerable wealth.

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

Name and Medical Designation, W. R. Mc. Nab. M.D.

Place of Abode. Southern Counties Asylum Dumfries

DATED this 20th day of August One th hundred and Sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Ramsay Mc Nab being (1) Graduate in Medicine of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum in the County of Dumfries, seen and personally examined William Welsh., and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

W R. McNab. M. D.

DATED this 17th day of August One thousand eight hundred and 67.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) David Douglas Inspector of Poor Kirkgray Certificates under the hands of William Marshall M.D and William Ramsay Mc Nab, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) William Welsh Labourer Kirkpatrick Juxta parish and that the said William Welsh is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Welsh as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Welsh which accompanied the said Petition.

DATED this twenty first day of August One thousand eight hundred and sixty seven

D.S.

David Boyle Hope

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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315.

William Welsh.

17 August 1867.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Stewart. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of Maxwell Wright. Farmer Collochan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Samuel Wright your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Samuel Wright to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

Maxwell Wright.

(3) State degree of relationship or other locality in which Petitioner stands to Lunatic.

Dated this 21st (4) day of August One thousand eight hundred and sixty seven.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Samuel Wright.
Sex and Age,	Male. 58.
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Farmer.
Religious Persuasion, so far as known,	Free Church.
Previous Place of Abode,	Boerick.
Place where Found and Examined,	Southern Counties Asylum.
Length of time Insane,	about ten months.
Whether first Attack,	Second attack.
Age (if known) on first Attack,	57.
When and where previously under Examination and Treatment,	Southern Counties Asylum. From January till July 1867.
Duration of existing Attack,	
Supposed Cause,	not known.
Whether subject to Epilepsy,	not Epileptic
Whether Suicidal,	not suicidal.
Whether Dangerous to others,	not dangerous.
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Private patient.
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Maxwell Wright. Farmer. Collochan. Brother. none.
Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 21st day of August One thousand eight hundred and sixty seven.

(*To be signed by Party applying*) Maxwell Wright

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Marshall being a (1) Graduate of the Faculty of Physicians and Surgeons Glasgow and College of St Andrews and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) Samuel Wright Farmer Bonerock and the said Samuel Wright is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Has all sorts of imaginations as to his powers of invention and making extravagant grants of property to particular friends &c &c

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His friends state that he has decided to go to Edinburgh to get married

Name and Medical Designation, } Marshall M.D.

Place of Abode, Dumfries

DATED this 21st day of August One thousand eight hundred and Sixty seven years

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson being a (1) Graduate of the Edinburgh University and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) Samuel Wright Farmer Bonerock and the said Samuel Wright is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is suffering from General Paralysis of the Insane, and labouring under various delusions; especially with reference to his great wealth and to his rich marriage which he is about to make

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, } John Dickson

Place of Abode, Castle Street Dumfries

DATED this 22nd day of August One thousand eight hundred and Sixty Seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Ramsay Mc. Nab,
being (1) Graduate of Medicine of the University of Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum
in the County of Dumfries, seen and personally examined
Samuel Wright. Farmer. Bonnick, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

W. R. Mc. Nab. M.D.

DATED this 21st day of August One thousand eight hundred and sixty seven years.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope (3) Sheriff Substitute
of the (4) County of Dumfries
having had produced to me, with a Petition at the instance of (5) Maxwell Wright
farmer, Collochan
Certificates under the hands of William Marshall
and John Dickson, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6)
Samuel Wright, farmer Bonnick and that the said
Samuel Wright is a (7) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Samuel Wright as a Patient into the (8) Public Asylum of Southern Counties Dumfries and I authorize its Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Samuel Wright which accompanied the said Petition.

DATED this twenty sixth day of August One thousand eight hundred and sixty seven

David Boyle Hope

To the Superintendent of the (9) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1
316.

Samuel Wreyford.

21 Aug 1867.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A.]

20 & 21 *Vict. Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(*) Sheriff or Steward.
(*) Shire or Stewartry.

Unto the Honourable the (*) Sheriff *of the* (*) Shire of Dumfries and his Substitutes.

The Petition of James Brown Inspector of Poor, Sanquhar, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Kerr, Agricultural Labourer Pauper, is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Kerr to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(Signed) James Brown

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Twenty Seventh day of August One thousand eight hundred and Sixty Seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Kerr.
2. Sex and Age,	Male. 24 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Agricultural Labourer.
5. Religious Persuasion, so far as known,	Free Church of Scotland
6. Previous Place of Abode,	Closeburn Bridgend Sanquhar
7. Place where Found and Examined,	do do
8. Length of time Insane,	Ten days.
9. Whether first attack,	Second.
10. Age (if known) on first Attack,	20 years.
11. When and where previously under Examination and Treatment,	Closeburn Bridgend Sanquhar
12. Duration of existing Attack,	Ten days.
13. Supposed Cause,	None can be assigned
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Has spoken of it at times
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Sanquhar Parish
18. Date of becoming Chargeable,	27th August 1867.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	James Kerr Father
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signed)* *Name,* James Brown

Dated this Twenty Seventh day of August One thousand eight hundred and Sixty-seven.

* To be signed by the Party applying.

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Wm Kay Surgeon Sanguhar being a (1) Licentiate of the ~~Royal~~ Faculty of Physicians and Surgeons of Glasgow and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Elrock Hd End. Parish of Sanguhar in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) James Kerr. Farm Pauper and that the said James Kerr is a (5) person of Unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is restless talks incoherently at times; at [illegible] times he is taciturn. he has left off work and if allowed would [illegible]

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) He is frequently talking to some [illegible] person. The other day he cried for a knife to cut his throat. [illegible] his attorney.—

(SIGNED) *Name and Medical Designation,* Wm Kay Surgeon

Place of Abode, Sanguhar

DATED this 27th day of August One thousand eight hundred and sixty seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Ramsay McNab being a (1) Graduate in Medicine of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) James Kerr. Agricultural Labourer. Sanguhar. pauper and that the said James Kerr is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is silent and morose. refuses to answer questions of importance refuses his food. and rolls about on the floor the gallery.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

(SIGNED) *Name and Medical Designation,* W. R. McNab M.D.

Place of Abode, Southern Counties Asylum. Dumfries

DATED this 28th day of August One thousand eight hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that James Kerr is a (1) person of unsound mind hereby further certify that the Case of the said James Kerr is One of Emergency, and I recommend the immediate removal of the said James Kerr to an Asylum accordingly.

Name, Wm Kay Surgeon

Place of Abode, Sanquhar

DATED this 27th day of August One thousand eight hundred and sixty seven

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Brown Inspector of Poor Sanquhar Certificates under the hands of William Kay and William Ramsay McNab, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Kerr, Agricultural Labourer, Ellick Bridge rd, Sanquhar, a Pauper and that the said James Kerr is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Kerr as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Kerr which accompanied the said Petition.

(SIGNED) James Gordon

DATED this Thirteenth day of August One thousand eight hundred and Sixty seven

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

---

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

James Kiri

27/8/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

ar Steward. r Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*—

The Petition of John Dinwoodie Inspector of the Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Ingles or Hunter residing in Dumfries your Petitioner's (3) Pauper.

to degree of ip or other which Peti- nds to Luna-

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Ingles or Hunter to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

John Dinwoodie

date of the ust be with- n clear days the dates of ical Certifi-

DATED this Thirtieth (4) day of August One thousand eight hundred and Sixtyseven.

STATEMENT.

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

ristian Name and Surname of Patient at length,	Elizabeth Ingles or Hunter
and Age,	female 28 years
rried, Single, or Widowed,	married
ndition of Life, and previous Occupation (if any),	do Housewife
ligious Persuasion, so far as known,	Protestant
rious Place of Abode,	Dumfries
ce where Found and Examined,	— do —
ngth of time Insane,	about twelve months
hether first Attack,	yes
e (if known) on first Attack,	about 27 years
hen and where previously under Examination and Treatment,	Dumfries —
ration of existing Attack,	about a year
pposed Cause,	Not known
hether subject to Epilepsy,	no
hether Suicidal,	yes —
hether Dangerous to others,	no —
arish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries —
ate of becoming Chargeable,	30th August 1867
ristian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	not known
pecial circumstances (if any) preventing the insertion of any of the above particulars,	

certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirtieth day of August One thousand eight hundred and Sixtyseven

(*To be signed by Party applying*) John Dinwoodie Inspector

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Marshall being a (1) Graduate of the faculty of [illegible] and Surgeons Glasgow and College [illegible] and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Hole [illegible] in the [illegible] Dumfries separately from any other Medical [illegible] visited and personally examined (4) Elizabeth Ingles or [illegible] a pauper the said Elizabeth Ingles or Hunter is a (5) Lunatic and a proper person to [illegible] under Care and Treatment, and that I have formed this opinion upon the [illegible] grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Imagines [illegible] soul is in danger and has delusion [illegible] to her having offended the Princess [illegible] for which she expects never to be [illegible]

2. Other facts (if any) indicating Insanity communicated to me by other [illegible]

Her friends state that she [illegible] (of late) been very excited

Name and Medical Designation, Marshall [illegible]

Place of Abode, Dumfries

DATED this August 30th day of One thousand [illegible] hundred and Sixty Seven Years

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson being a (1) Graduate of the Edinburgh University and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Hole [illegible] Dumfries in the [illegible] Dumfries separately from any other Medical [illegible] visited and personally examined (4) Elizabeth Inglis or [illegible] a pauper the said Elizabeth Inglis or Hunter is a (5) Lunatic and a proper person to [illegible] under Care and Treatment, and that I have formed this opinion upon the [illegible] grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is in [illegible] of extreme depression, and labouring [illegible] various delusion, she hangs about the [illegible] where she believes she is being tried for [illegible] offences. Cannot sleep on account of her fancy [illegible]

2. Other Facts (if any) indicating Insanity communicated to me by other [illegible]

Her friends (Mother in Law &c) state [illegible] exceedingly restless, and sometimes very [illegible]

Name and Medical Designation, John Dickson [illegible]

Place of Abode, Castle Street Dumfries

DATED this 30th day of August One thousand [illegible] hundred and Sixty Seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Dinmmie Inspector of Poor Dumfries Certificates under the hands of William Marshall and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Inglis or Hunter residing in Dumfries and that the said Elizabeth Inglis or Hunter is a (5) Lunatic and a proper Person, to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Inglis or Hunter as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Inglis or Hunter which accompanied the said Petition.

DATED this Thirtieth day of August One thousand eight hundred and sixty seven years

James Gordon

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Elizabeth Ingleson Hunter

a. 30/8/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A.]

20 & 21 *Vict. Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(*) Sheriff or Steward.
(†) Shire or Stewartry.

Unto the Honourable the (*) Sheriff *of the* (†) County *of* Dumfries *and his Substitutes,*

The Petition of James Brown Inspector of Poor [illegible] humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Kerr. Cowfeeder Mavisbank Sanquhar is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Kerr to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) James Brown

(‡) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twelfth (‡) day of September One thousand eight hundred and Sixty Seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jane Kerr.
2. Sex and Age,	Female 40 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Cowfeeder
5. Religious Persuasion, so far as known,	U. P. Church of Scotland
6. Previous Place of Abode,	Mavisbank Sanquhar
7. Place where Found and Examined,	Mavisbank Sanquhar
8. Length of time Insane,	4 Months
9. Whether first attack,	Yes.
10. Age (if known) on first Attack,	40 years.
11. When and where previously under Examination and Treatment,	Nowhere.
12. Duration of existing Attack,	4 Months
13. Supposed Cause,	No cause can be assigned
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Private Patient
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Thomas Kerr Brother. Penicuik No
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, James Brown

DATED this Twelfth day of September One thousand eight hundred and Sixty Seven

* To be signed by the Party applying.

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Kay Surgeon Lang
being a (1) Licentiate of the Faculty of Physicians and Surgeons of Glasgow
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Marishan Parish of Langholm Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Jane Kerr. Confined Marishan and that the said Jane Kerr is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) From being a reticent person she has become mental[ly] active and rambles from one subject to another

2. Other facts (if any) indicating Insanity communicated to me by others: (7) From being a careful of her goods and she has become wasteful, sometimes threatens to come [illegible] with the fire with - She ceased to get into a great rage & takes dislikes to certain From her Neighbours Mrs Sloan

(SIGNED) *Name and Medical Designation,* Wm Kay Surgeon

Place of Abode, Langholm

DATED this 12th day of Sept — One thousand eight hundred and 67 —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson
being a (1) Graduate of the Edinburgh University
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum. Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Jane Kerr. Confined, Sa and that the said Jane Kerr is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her mind is strongly confused and she rambles from one subject to another almost incoherent. occupying herself simply with church matters and fancies the opinions of persons of unusual importance.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) She was violent when admitted and had delusions of fear that she was taken before the Duke of Buccleuch for trial &c.

Informant Mr McNab. Medical Assistant

(SIGNED) *Name and Medical Designation,* John Dickson MD

Place of Abode, Castle Street Dumfries

DATED this 14th day of September One thousand eight hundred and Sixty Seven

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Jane Kerr of Mavisbank is a (1) person of unsound mind hereby further certify that the Case of the said Jane Kerr of Mavisbank is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, Wm Kay Surgeon

Place of Abode, Sanquhar

DATED this 6/12th. day of Septr One thousand eight hundred and 67

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esqre (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Brown, Inspector of Poor Sanquhar Certificates under the hands of William Kay and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jane Kerr, Cowfeeder, Mavisbank Sanquhar and that the said Jane Kerr is a (5) person of unsound mind, and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Kerr as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Kerr which accompanied the said Petition.

(SIGNED) James Gordon

DATED this Sixteenth day of September One thousand eight hundred and Sixty Seven

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

Not returned from Sheriffs Office

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v Jane Kerr.

12/9/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

r Steward.
Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries — *and his Substitutes,*—

The Petition of Thomas Corrie Procurator Fiscal of the County of Dumfries and Hugh B Currie Inspector of Poor of the parish of Lochmaben humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Wells Jr, Cooper in Lochmaben your Petitioner's (3) Charge — — — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Wells Junior — to the Southern Counties Asylum, Dumfries and to sanction his admission into the the said Asylum.

degree of p or other which Peti- ls to Luna-

Thos Corrie P.F. Hugh B Currie Insp Pm

date of the st be with- clear days he dates of cal Certifi-

Dated this Seventeenth (4) day of September One thousand eight hundred and Sixty Seven

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STATEMENT.

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

stian Name and Surname of Patient at ength,	William Wells Junior
and Age,	Male - 35
ried, Single, or Widowed,	Single -
dition of Life, and previous Occupation if any),	Sometime a teacher - and latterly a cooper and labourer.
gious Persuasion, so far as known,	Protestant -
vious Place of Abode,	Lochmaben
ce where Found and Examined,	Found in Lochmaben - Examined in Dumfries -
gth of time Insane,	Some years it is believed
ether first Attack,	No.
e (if known) on first Attack,	About 25.
en and where previously under Examination and Treatment,	Southern Counties Asylum, Dumfries
ration of existing Attack,	Several months
pposed Cause,	Not known to Petitioners
ether subject to Epilepsy,	Believed not
ether Suicidal,	Not known
ether Dangerous to others,	Yes
rish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lochmaben
te of becoming Chargeable,	17th September 1867.
ristian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Wells Senior, Cooper, in Lochmaben - Father - No other member of family known to have been Insane.
ecial circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Seventeenth day of September One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) Thos Corrie P.F. Hugh B. Currie Insp Pm

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Smith Ker being a (1) Doctor of Medicine & Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Prison of Dumfries Dumfries separately from any other Medical Practitioner visited and personally examined (4) William Wells Junior Pauper Lochmaben a pauper the said William Wells Junior is a (5) Lunatic and a proper person to be under Care and Treatment, and that I have formed this opinion upon the grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) His appearance dull & heavy - he was incoherent - and seemed he seems to be in a state, or approaching a state of Idiocy

2. Other facts (if any) indicating Insanity communicated to me by others: (7) By P.F. that Wells has frequently assaulted his father & other relatives & persons without provocation & that he wanders from home occasionally

Name and Medical Designation, William Smith Ker

Place of Abode, Buccleuch St Dumfries

Dated this 17th day of September One thousand hundred and sixty seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Scott being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Prison of Dumfries Dumfries separately from any other Medical Practitioner visited and personally examined (4) William Wells Jr. from Lochmaben a pauper the said William Wells Junior is a (5) Lunatic and a proper person to be under Care and Treatment, and that I have formed this opinion upon the grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He refused or to answer questions - His appearance and manner are Idiotic

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) By the Proc Fiscal - That Wells has frequently been guilty of assault on his relatives & others of an unprovoked nature & that he has previously been confined in Asylum

Name and Medical Designation, Wm Scott M.D

Place of Abode. Dumfries

Dated this 17 day of September One thousand hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Thomas Corrie Procurator-fiscal of the County of Dumfries and Hugh B. Currie Inspector of Poor of the parish of Lochmaben
Certificates under the hands of William Smith Kerr
and William Scott , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
William Wells Junior Pauper in Lochmaben Poorhouse and that the said
William Wells Junior is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Wells Junior as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Wells Junior which accompanied the said Petition.

DATED this Seventeenth day of September One thousand eight hundred and Sixty seven years

James Gordon

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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William Wells, Junr.

12/9/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*

(1) Sheriff or Steward.
(2) Shire or Stewartry.

(Lochmaben) The Petition of Hugh B Lewis Inspector of poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David Boyes Tailor Lochmaben is at present in a state of Mental Derangement and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said David Boyes to the Southern Counties Asylm and to sanction his admission into the said Asylum.

(SIGNATURE) Hugh B Lewis. Insp. of Poor

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this twentieth (3) day of September one thousand eight hundred and Sixty seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	David Boyes
2. Sex and Age,	male – about 50.
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Tailor.
5. Religious Persuasion, so far as known,	protestant.
6. Previous Place of Abode,	Lochmaben
7. Place where Found and Examined,	Ditto
8. Length of time Insane,	4 months
9. Whether First Attack,	yes.
10. Age (if known) on First Attack,	50.
11. When and where previously under Examination and Treatment,	nowhere else.
12. Duration of Existing Attack,	
13. Supposed Cause,	family disarrangements
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	his wife says so.
16. Whether Dangerous to others,	Ditto –
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lochmaben
18. Date of becoming Chargeable,	1st August.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Isabella Richardson or Boyes. Lochmaben –
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none –

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNATURE)* *Name,* Hugh B. Lewis, Insp. of Poor

DATED this twentieth day of September one thousand eight hundred and Sixty seven

* To be Signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, John Ferguson
being a (1) Graduate in Medicine of the University of Edinburgh
and being in actual practice as a (2) physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Lochmaben
in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) David Boyes, pauper,
and that
the said David Boyes is a (5) person of
unsound mind and a proper Person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
(1) Absence of memory
(2) habitual melancholy
(3) imagines others plotting evil against him

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
(1) The above — also has threatened his own life — has used violence towards his wife.

(Signed) *Name and Medical Designation,* John Ferguson M.D.
Place of Abode, Lochmaben

Dated this 20th day of Sept. One thousand eight hundred and eighty seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, William Ramsay McNab
being a (1) graduate in Medicine of the University of Edinburgh
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum
Dumfries
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) David Boyes. Tailor Lochmaben
Pauper
and that
the said David Boyes is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) His intelligence is much impaired. answers questions of importance with hesitation. and fancies that some one has been trying to injure him.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

(Signed) *Name and Medical Designation,* W. R. McNab M.D.
Place of Abode Southern Counties Asylum

Dated this 21st day of September one thousand eight hundred and eighty seven.

CERTIFICATE OF EMERGENCY.

(This certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that David Boyes is a (1) person of unsound mind, hereby further certify that the Case of the said David Boyes is one of Emergency, and I recommend the immediate removal of the said David Boyes. to an Asylum accordingly.

Name, John Ferguson M.D.

Place of Abode, Lochmaben

DATED this 20th day of Sept. One thousand eight hundred and Sixty Seven.

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Brydon (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Hugh B. Carrie Inspector of Poor Lochmaben Certificates under the hands of John Ferguson and William Ramsay M'Nab, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) David Boyes, Tailor, Lochmaben. (a Pauper) and that the said David Boyes is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said David Boyes as a Patient into the (6) Public Asylum of Southern Counties Dumfries, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said David Boyes which accompanied the said Petition.

(SIGNATURE) James Brydon

DATED this Twenty first day of September one thousand eight hundred and Sixty Seven

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.

321.

David Boyes.

20./9/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *or* ~~and~~ *his Substitute*,—

The Petition of Wm Hamilton Inspector of Poor Holywood humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Maxwell Pauper, your Petitioner's (3) Client is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Maxwell, Pauper, to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

Wm Hamilton Insp.r Holywood.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Dated this 25th (4) day of September One thousand eight hundred and Sixty Seven years.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Maxwell,
2. Sex and Age,	Female. age 60 years.
3. Married, Single, or Widowed,	Single,
4. Condition of Life, and previous Occupation (if any),	Domestic-Servant
5. Religious Persuasion, so far as known,	Protestant, Free-Church,
6. Previous Place of Abode,	Holywood-Village,
7. Place where Found and Examined,	Southern Counties Asylum
8. Length of time Insane,	~~Five days~~ three months & a year -
9. Whether first Attack,	When second attack
10. Age (if known) on first Attack,	49 years.
11. When and where previously under Examination and Treatment,	Southern Counties Asylum,
12. Duration of existing Attack,	Five days
13. Supposed Cause,	Delusions various kinds &c.
14. Whether subject to Epilepsy,	yes
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Holywood
18. Date of becoming Chargeable,	20th September 1867.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Mrs Craig Newington Village Holywood -
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none,

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 25th day of September One thousand eight hundred and Sixty-seven years -

(To be signed by Party applying) Wm Hamilton Insp.r of Poor Holywood P.P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Ramsay McNab being a (1) Graduate in Medicine of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the County separately from any other Medical Practitio visited and personally examined (4) Agnes Maxwell (pauper) and t the said Agnes Maxwell is a (5) Lunatic and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She has del of various kinds, rambling incoherent mar and fancies she should be killed for a imaginary offence she thinks she has com

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, W. R. McNab M.D.

Place of Abode, Southern Counties Asylum

DATED this 20th day of September One thousand ei hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Smith being a (1) Graduate in Medicine of Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum, Dumfries in the County separately from any other Medical Practitio visited and personally examined (4) Agnes Maxwell (Pauper) and t the said Agnes Maxwell is a (5) Lunatic and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She talks a incoherently rambles from one subject to another, sta that the Medical Attendant is in danger of being m de

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Dr McNab states that a frequently she becom much excited, while at other times she is melanch He also states that she has attempted suicide.

Name and Medical Designation, John Smith M.D.

Place of Abode, 33 Burlench St. Dumfries

DATED this 24th day of September One thousand ei hundred and 67.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Ramsay McNab being (1) Graduate in Medicine of Edinburgh University hereby certify, on soul and conscience, that I have this day, at (2) Southern Counties Asylum in the County of Dumfries, seen and personally examined Agnes Maxwell. (Pauper), and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

W. R. McNab. M.D.

DATED this 20th day of September One thousand eight hundred and Sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Lauderdale Maitland Esqre (3) Sheriff Substitute of the (4) County of Dumfries having had produced to me, with a Petition at the instance of (5) William Hamilton Inspector of Poor Holywood Certificates under the hands of William Ramsay McNab and John Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Agnes Maxwell, Holywood Village, a Pauper and that the said Agnes Maxwell is a (7) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Maxwell as a Patient into the (8) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Maxwell which accompanied the said Petition.

DATED this Twenty fifth day of September One thousand eight hundred and Sixty seven years.

L Maitland

To the Superintendent of the (9) Public Asylum of Southern Counties Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned Alexander Morrison Inspector of Poor of Morton being desirous to transfer James Shankland at present a Patient in Garnaval Asylum, and (1) a Pauper Lunatic of the parish of which I am Inspector from the said Asylum to the Cumbria Asylum at Dumfries, hereby request the authority of the Board to such transfer; and I subjoin a Statement of Particulars regarding the said James Shankland and a Medical Certificate with respect to his mental and bodily condition.

(1) *If Lunatic is not a Pauper:* detained at my instance, or whose nearest known relative I am. *If Lunatic is a Pauper:* a Pauper Lunatic of the Parish of which I am Inspector of Poor.

Alex. Morrison
Inspector of Poor for Morton

DATED at Garnaval this 11th day of September One thousand eight hundred and Sixty Seven years

(2) State degree of Relationship, or other capacity in which Applicant stands to Patient.

STATEMENT.

1. Christian Name and Surname of Patient at length,	James Shankland
2. Sex and Age,	Male Forty one years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	Warehouseman
5. Religious Persuasion, so far as known,	Protestant
6. Date of Admission into Asylum,	24th July 1867
7. Length of time Insane,	about 8½ weeks
8. Whether first Attack,	Yes
9. Age (if known) on first Attack,	Forty one
10. Duration of existing Attack,	8½ weeks
11. Supposed Cause,	said to be family
12. Whether subject to Epilepsy,	no
13. Whether Suicidal,	no
14. Whether Dangerous to others,	a little inclined so
15. Parish to which the Lunatic (if a Pauper) is Chargeable,	Morton
16. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of Family known to be, or to have been Insane,	Full brother Robert Shankland Liverpool – Half sister Agnes Shankland Milliner ditto Morton

I certify that, to the best of my knowledge, the above particulars are correctly stated.

(*To be signed by the Applicant*) Alexr. Morrison Inspector

DATED this 11th day of September One thousand eight hundred and Sixty Seven years

N.B.—The foregoing particulars are required for the information of the authorities to whose care the Patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned Alexander Mackintosh being (1) Licentiate of the Faculty of Physicians of Glasgow hereby certify that I have this day at (2) the Royal Asylum personally examined James Shankland at present a Patient in said Asylum, and with respect to his Mental State that he is delusive about money affairs — he is occasionally very confused in his ideas and incoherent in his conversation and seldom dishonest or uncleanly in — ; and with respect to his Bodily Health and Condition that they are better than they were, and at present tolerably good. —

(1) State Medical Qualifications.
(2) Name of Asylum.

and I further certify that, in my opinion, there is nothing in the Mental or Bodily Condition of the Patient to contraindicate removal to the Asylum of Dumfries —

Alexander Mackintosh M.D.

Dated this Nineteenth day of Sept. One thousand eight hundred and sixty-seven

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SANCTION BY THE BOARD OF LUNACY.

(*Under this Sanction a Patient may be Transferred without an Order of the Sheriff.*)

(1) Insert at whose instance the Lunatic is detained, or the nearest known Relative of the Lunatic, or the Inspector of the Parish by which the expense of the maintenance of the Lunatic is defrayed.

Application having been made to the Board by (1) Inspector of Poor of the Parish of Morton to authorize the transfer of James Shankland from Royal Asylum Gartnavel to Crichton Institution Dumfries, and the Board having considered such application and the accompanying Medical Certificate, do hereby authorize the transfer of the said James Shankland as requested.

W. A. F. Browne Commissioner.

Dated at Edinburgh, this 20th day of September One thousand eight hundred and Sixty seven.

1333
James Shankland
21/9/67

Date of Sheriff Order 25 July 1867

MEDICAL CERTIFICATE.

I, the undersigned William Lauder Lindsay

State Medical Qualifications. being (1) M. D. F. I. R. C. S. Edinburgh

Name Asylum. hereby certify that I have this day at (2) Murray's asylum, Perth

personally examined Thomas Ritchie at present a

Patient in said Asylum, and with respect to his Mental State that he is

affected with Delusional Insanity

; and with respect to his

Bodily Health and Condition that he is excellent.

and I further certify that, in my opinion, there is nothing in the Mental or Bodily Condition of the Patient to contraindicate removal to the Asylum of Edinburgh

Royal Asylum

W. L. Lindsay

Dated this 9th day of Septem. One thousand eight

hundred and Sixty seven

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

Application having been made to the Board by (1) George Ritchie

(1) Insert at whose instance Lunatic is detained, or the next known Relative of the Lunatic, or the Inspector of the Parish by which the expense of the maintenance of the Lunatic is defrayed.

to authorize the transfer of Thomas Ritchie

from Perth Royal Asylum to Dumfries

Royal asylum, and the Board having considered such application and the accompanying Medical Certificate, do hereby authorize the transfer of the said

Thomas Ritchie as requested.

W. A. F. Browne *Commissioner.*

Dated at Edinburgh, this 11. day of September One

thousand eight hundred and Sixty seven

Date of Sheriff's Order 21. March. 1867.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned George Ritchie being desirous to transfer Thomas Ritchie at present a Patient in Murrays Royal Asylum Perth, and (*) detained at my instance Crichton Institution Dumfries from the said Asylum to the hereby request the authority of the Board to such transfer; and I subjoin a Statement of Particulars regarding the said Thomas Ritchie and a Medical Certificate with respect to his mental and bodily condition.

George Ritchie
Father to Patient

DATED at Edinburgh this Seventh day of September One thousand eight hundred and sixty seven years

(*) *If Lunatic is not a Pa* detained at my instan whose nearest known rel ance. *If Lunatic is a Pa* a Pauper Lunatic of the of which I am Inspec Poor.

(*) State degree of Rel ship, or other capacity in Applicant stands to Patie

STATEMENT.

1. Christian Name and Surname of Patient at length,	Thomas Ritchie
2. Sex and Age,	Male: 23
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	Brewer's clerk
5. Religious Persuasion, so far as known,	
6. Date of Admission into Asylum,	March 20, 1867
7. Length of time Insane,	at least 6 months said to be so
8. Whether first Attack,	22
9. Age (if known) on first Attack,	1st No 7
10. Duration of existing Attack,	Dissipation [illegible]
11. Supposed Cause,	No
12. Whether subject to Epilepsy,	No
13. Whether Suicidal,	No
14. Whether Dangerous to others,	None
15. Parish to which the Lunatic (if a Pauper) is Chargeable,	
16. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of Family known to be, or to have been Insane,	George Ritchie, Father, Redford House, Colinton by Edinburgh

I certify that, to the best of my knowledge, the above particulars are correctly stated.

(*To be signed by the Applicant*) George Ritchie

DATED this 7th day of September One thousand eight hundred and sixty seven

N.B.—The foregoing particulars are required for the information of the authorities to whose care the Patient is to be transferred.

10 St

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned John L. Pollock - 11 Means Street, Greenock being desirous to transfer Agnes Pollock at present a Patient in Garnyad Asylum, Glasgow, and (¹) whose nearest known relative I am — from the said Asylum to the Crichton Institution, Dumfries — hereby request the authority of the Board to such transfer; and I subjoin a Statement of Particulars regarding the said Agnes Pollock and a Medical Certificate with respect to her mental and bodily condition.

(¹) *If Lunatic is not a Pauper:* detained at my instance, or whose nearest known relative I am. *If Lunatic is a Pauper:* a Pauper Lunatic of the Parish of which I am Inspector of Poor.

John L. Pollock 11 Means St Greenock

Brother

(²) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED at Glasgow this 2nd day of October One thousand eight hundred and Sixty Seven

STATEMENT.

1. Christian Name and Surname of Patient at length,	Agnes Pollock
2. Sex and Age,	female 22½ years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and Previous Occupation (if any),	Daughter of Clothier
5. Religious Persuasion, so far as known,	Protestant
6. Date of Admission into Asylum,	27th June 1867
7. Length of time Insane,	about five Months
8. Whether first Attack,	Second
9. Age (if known) on first Attack,	21 years
10. Duration of existing Attack,	about five months
11. Supposed Cause,	Unknown
12. Whether subject to Epilepsy,	Not
13. Whether Suicidal,	Not
14. Whether Dangerous to others,	Yes
15. Parish to which the Lunatic (if a Pauper) is Chargeable,	—
16. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of Family known to be, or to have been Insane,	Mrs Jane Pollock - Mother - resides at 11 Means Street - Greenock None

I certify that, to the best of my knowledge, the above particulars are correctly stated.

(*To be signed by the Applicant*) John L. Pollock

DATED this 2nd day of October One thousand eight hundred and Sixty Seven

N.B.—The foregoing particulars are required for the information of the authorities to whose care the Patient is to be transferred.

MEDICAL CERTIFICATE.

I, the undersigned James Hill being (1) a Graduate in Medicine of Edinburgh Univ hereby certify that I have this day at (2) Garnegad Asylum, Glas personally examined Agnes Pollock at present Patient in said Asylum, and with respect to his Mental State that she is excite and incoherent - occasionally noisy and apt to strike - and inclined to destroy

; and with respect to his Bodily Health and Condition that she is very thin - with general derangement of the system - but takes her food well

and I further certify that, in my opinion, there is nothing in the Mental or Bodily Condition of the Patient to contraindicate removal to the Asylum of Dumfries

James Hill M.D.

DATED this second day of October One thousand eight hundred and sixty seven

(1) State Medical Qualification.
(2) Name Asylum.

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

Application having been made to the Board by (1) John L. Pollock. to authorize the transfer of Agnes Pollock from Garnegad private Asylum to Dumfries Royal Asylum, and the Board having considered such application and the accompanying Medical Certificate, do hereby authorize the transfer of the said Agnes Pollock. as requested.

W. A. F. Browne Commissioner.

DATED at Edinburgh, this 3d day of October One thousand eight hundred and sixty seven

(1) Insert at whose instance the Lunatic is detained, or the nearest known Relative of the Lunatic, or the Inspector of the Parish by which the expense of the maintenance of the Lunatic is defrayed.

Date of Sheriff's Order 27. June 1867

Agnes Pollock
1085
October 5/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

or Steward, or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries and his Substitutes,—

The Petition of Thomas Corrie P.F. Dumfries & Alexander Tibbetts, Rate Collector there

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Tibbetts a Clerk

e degree of ip or other which Peti- ds to Luna-

your Petitioner's ~~Husband~~ Son Alexander Tibbetts' son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said William Tibbetts to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

Thos Corrie P.F. Alex.r Tibbetts

date of the ust be with- a clear days the dates of ical Certifi-

Dated this Fifth (4) day of October One thousand eight hundred and Sixty Seven.

STATEMENT.

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

istian Name and Surname of Patient at length,	William Tibbetts
and Age,	Male - 30 -
ried, Single, or Widowed,	Widower
dition of Life, and previous Occupation (if any),	Warehouseman
gious Persuasion, so far as known,	Protestant.
rious Place of Abode,	Glasgow
ce where Found and Examined,	Dumfries
gth of time Insane,	about a week
ether first Attack,	Yes
e (if known) on first Attack,	No prior attack
hen and where previously under Examination and Treatment,	
ration of existing Attack,	about a week
pposed Cause,	Imprisonment for debt in Glasgow
ether subject to Epilepsy,	No
ether Suicidal,	No
ether Dangerous to others,	Yes - it is thought So
rish or Union to which the Lunatic (if a Pauper) is Chargeable,	
ate of becoming Chargeable,	
ristian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Alexander Tibbetts - petitioner - Father Was Insane.
pecial circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Fifth day of October One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) Thos Corrie P.F. Alex.r Tibbetts

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Marshall being a (1) Graduate of the Faculty of Physicians and Surgeons Glasgow and College of Physicians and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Court Buildings Dumfries in the Dumfries separately from any other Medical Practitioner visited and personally examined (4) William Tibbetts, a Clerk the said William Tibbetts is a (5) person of unsound mind and a proper person to be under Care and Treatment, and that I have formed this opinion upon the grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Speaks incoherently has delusions with regard to property and as to an extravagant marriage - and his whole manner indicates Insanity -

2. Other facts (if any) indicating Insanity communicated to me by others (7) His father says that he was liberated from Wigtown prison two days ago on a certificate of his Insanity and the P.F. that he yesterday indemnity assaulted

Name and Medical Designation, J Marshall M.D.

Place of Abode, Dumfries

DATED this Fifth day of October One thousand eight hundred and sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Smith being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Court Buildings Dumfries in the Dumfries separately from any other Medical Practitioner visited and personally examined (4) William Tibbetts, a Clerk the said William Tibbetts is a (5) person of unsound mind and a proper person to be under Care and Treatment, and that I have formed this opinion upon the grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Incoherence in speech & manner - and great delusions as to the present and prospective possession of property -

2. Other Facts (if any) indicating Insanity communicated to me by others (7) His father states that he attempted violence & threatened his life - and that he was recently liberated from prison on a certificate of

Name and Medical Designation, John Smith M.D.

Place of Abode. Buccleuch St. Dumfries

DATED this Fifth day of October One thousand eight hundred and sixty seven years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Thomas Corrie J.P. Dumfries and Alexander Tibbets Rate Collector there
Certificates under the hands of William Marshall
and John Smith , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
William Tibbets a Clerk, son of the said Alex^r Tibbets and that the said
William Tibbets is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Tibbets as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Tibbetts which accompanied the said Petition.

DATED this Fifth day of October One thousand eight hundred and sixty seven

James Gordon

To the Superintendent of the (7) Public
Asylum of Southern Counties
at Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.
(6) Public, District, Parochial, *or* Private.
(7) Public, District, Parochial, *or* Private.

1/324

William Tibbetts

5/10/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of Alexander Grierson, madam Thornhill humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Grierson your Petitioner's (3) Son — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alexander Grierson to the Southern Counties Asylum and to sanction his admission into the the said Asylum.— (the word Thornhill deleted)

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

× Alexander Grierson

(4) The date of the Petition must be within a fortnight days following the dates of the Medical Certificates.

× Eleventh ~~Thornhill~~ (4) day of October One thousand eight hundred and Sixty seven years —

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Alexander Grierson
2. Sex and Age,	Male seventeen years
3. Married, Single, or Widowed,	single
4. Condition of Life, and previous Occupation (if any),	Schoolboy —
5. Religious Persuasion, so far as known,	Protestant —
6. Previous Place of Abode,	Thornhill
7. Place where Found and Examined,	Thornhill
8. Length of time Insane,	~~1 year~~
9. Whether first Attack,	First
10. Age (if known) on first Attack,	15½ years —
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	1½ year
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	no —
15. Whether Suicidal,	no —
16. Whether Dangerous to others,	a little, inclined to strike
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	11th October 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Alexander Grierson mason in Thornhill — father — — None — but a paternal uncle — must on the head
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Eleventh day of October One thousand eight hundred and Sixty seven years

(*To be signed by Party applying*) Alexander Grierson

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Thomas Boyle Grierson being a (1) Licentiate of the Royal College of Surgeons of Edinburgh. and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Thornhill in the County Dumfries. separately from any other Medical Practitio visited and personally examined (4) Alexander Grierson residing in Thornhill and t the said Alexander Grierson is a (5) person of unsound mind. and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the follow grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) oblivious of passing events, very imperfect understanding of what has taken place, has lost reckoning of the year, the month, and the day.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brother states that he becomes at times violent, will strike without any cause, when asked why he has done he replies "for nothing". T B Grierson Lic

Name and Medical Designation, T B Grierson Lic

Place of Abode, Thornhill

DATED this tenth day of October One thousand ei hundred and Sixty Seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Andrew Crichton Chalmers being a (1) Doctor of Medicine of University of Edinburgh and a Licentiate of the Royal College of Surgeons, Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Thornhill in the County Dumfries separately from any other Medical Practitio visited and personally examined (4) Alexander Grierson, residing in Thornhill and t the said Alexander Grierson is a (5) person of unsound mind and a proper person to be detai under Care and Treatment, and that I have formed this opinion upon the followi grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He is very forgetful & absent & appears the almost unconscious of passing events - His general appearance & conduct indicate unsoundness of mind -

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His father & brother & brother state that he is at times violent without cause, & that he will not be controlled

Name and Medical Designation, Andw C. Chalmers

Place of Abode, Thornhill

DATED this tenth day of October One thousand eig hundred and Sixty Seven -

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope Esquire (1) Sheriff Substitute
of the (2) Shire of Dumfries
having had produced to me, with a Petition at the instance of (3) Alexander Grierson, Mason in Thornhill
Certificates under the hands of Thomas Boyle Grierson
and Andrew Crichton Chalmers , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alexander Grierson, residing in Thornhill (Petitioner's son) and that the said Alexander Grierson — is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Grierson — as a Patient into the (6) Public Asylum of Southern Counties ~~Asylum~~ Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Grierson which accompanied the said Petition.

DATED this Twelfth day of October One thousand eight hundred and Sixty seven. one word delete.

David Boyle Hope

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1
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Alexander Grierson

11/10/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

or Steward. r Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes*—

The Petition of Joseph Welsh Inspector of Poor Dogueer humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Miller Labourer your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Miller to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

e degree of ip or other which Peti- ers to Lunac-

Joseph Welsh Inspector of Poor

DATED this Seventeenth (4) day of October One thousand eight hundred and Sixty Seven years

date of the ust be with- n clear days the dates of ical Certifi-

STATEMENT.

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

stian Name and Surname of Patient at length,	James Miller
e and Age,	Male 45 Years
rried, Single, or Widowed,	Married
ndition of Life, and previous Occupation (if any),	Railway & Farm Labourer
ligious Persuasion, so far as known,	Protestant
evious Place of Abode,	Drumsleet Cottage
ace where Found and Examined,	Do
ngth of time Insane,	Two Months more or less
hether first Attack,	Second or third Attack
ge (if known) on first Attack,	40 Years
hen and where previously under Examination and Treatment,	Southern Counties Asylum Dumfries
uration of existing Attack,	Several weeks
upposed Cause,	Unknown
hether subject to Epilepsy,	No
hether Suicidal,	No
hether Dangerous to others,	Was threatned This neighbours to do for them
arish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Dogueer
ate of becoming Chargeable,	16th October 1867
hristian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Elizabeth Henderson Miller his wife
pecial circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Seventeenth day of October One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) Joseph Welsh Inspector of Poor Dogueer

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Kirman, being a (1) Graduate of the University of E... and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Drum... in the Parish of Kirkcudbright separately from any other Medical Pra... visited and personally examined (4) James Miller, a pau... the said James Miller is a (5) Person of unsound mind and a proper person to be under Care and Treatment, and that I have formed this opinion upon the grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) He very ... rabbits, fruit &c, imagines that ... unfaithful to him, & that peo... throw stones &c. for them to annoy him ... which are untrue.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr MacRuvie his neighbour state... he had threatened to do for him, that peo... wander about during the night, & that ... he imagines he has been shot at by some ... Policemen who dodged a ball ... near his house.

Name and Medical Designation, P. Kirman

Place of Abode Buccleuch St Dumf...

DATED this 15 day of February One thous... hundred and 67

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.* Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Smith Kerr being a (1) Doctor of Medicine and Licentiate of the Royal College of Surgeons, Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Drumeg... in the County of Kirkcudbright separately from any other Medical Pra... visited and personally examined (4) James Miller, a pau... the said James Miller is a (5) Person of unsound mind and a proper person to be under Care and Treatment, and that I have formed this opinion upon the grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) His appearance gloomy and morbid. He has decided monomania of p... He has distinct delusions about his neighbours throwing ... at & otherwise annoying him. His manner is outrageou... & greatly excited. His conversation is for the most part incoh...

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His neighbours declare that they are afraid of him, ... to his strange conduct. His walking about during the ... his threatening language &c.

Name and Medical Designation, William S. Kerr

Place of Abode Buccleuch St Dumf...

DATED this 15th day of October One thous... hundred and Sixty Seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Joseph Welsh Inspector of Poor Traquair
Certificates under the hands of Patrick Murray
and William Smith Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Miller, Labourer Dramsleet Cottage Traquair and that the said James Miller is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Miller as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Miller which accompanied the said Petition.

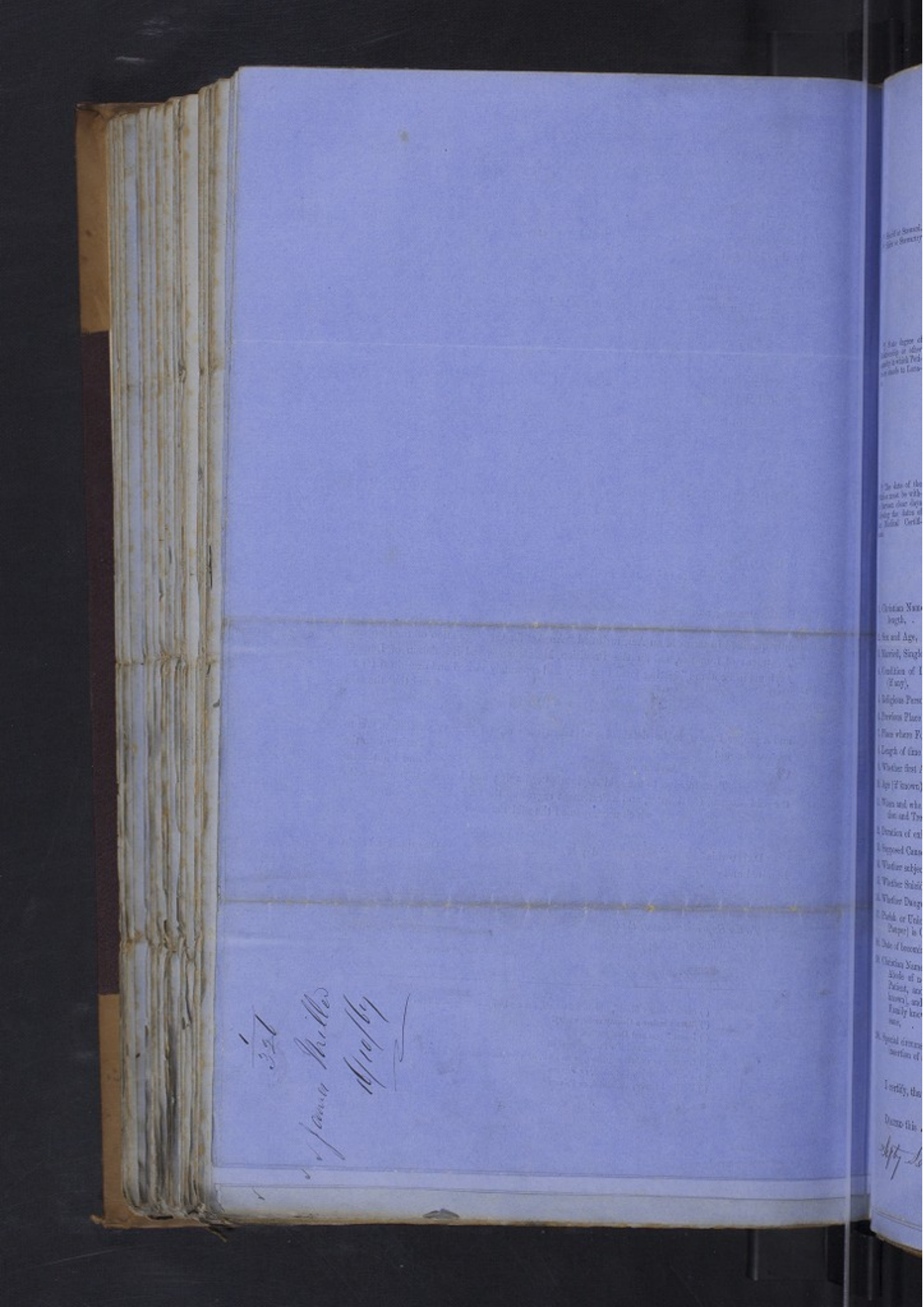
R.S.

DATED this Sixteenth day of October One thousand eight hundred and sixty seven years.

David Boyle Hope

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.



N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,*—

The Petition of John Johnstone Throughbank Dunscore humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Johnstone Grocer, Birkenhead your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Johnstone to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Johnston

Dated this Nineteenth (4) day of October One thousand eight hundred and Sixty seven.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Johnstone
2. Sex and Age,	Male Twenty two
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Grocer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Birkenhead
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	Four Days
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	Twenty two
11. When and where previously under Examination and Treatment,	No
12. Duration of existing Attack,	Four Days
13. Supposed Cause,	Religion
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	19th Oct 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	William Johnston Long Bank Dunscore his Father No
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	N

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Ninteenth day of October One thousand eight hundred and Sixty Seaven (*To be signed by Party applying*) John Johnston

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Dickson being a (1) graduate of the Edinburgh University and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) James, ~~Birkenhead~~ Johnstone Grocer Birkenhead and that the said James Johnstone is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) He is in a state of Mania. Violent & incoherent

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, John Dickson

Place of Abode, Castle Street Dumfries

DATED this 21st day of October One thousand eight hundred and Sixty Seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Smith Kerr being a (1) Doctor of medicine and Lic: Roy: Coll: Surgeons Edin. and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) James Johnstone, Grocer Birkenhead and that the said James Johnstone is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) This is a case of decided Mania. — He is violent & incoherent.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, William S Kerr M.D.

Place of Abode, Buccleuch St. Dumfries

DATED this 21st day of October One thousand eight hundred and Sixty Seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James Gilchrist M.D. being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal in the County of Dumfries, seen and personally examined James Johnston, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

J. Gilchrist M.D.

DATED this Nineteenth day of October One thousand eight hundred and Sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope Esquire Advocate Sheriff (1) Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Johnstone Throughbank Dunscore Certificates under the hands of John Dickson and William Smith Kerr, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) James Johnstone, Grocer Birkenhead and that the said James Johnstone is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Johnstone as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Johnstone which accompanied the said Petition.

DATED this twenty first day of October One thousand eight hundred and sixty seven

David Boyle Hope

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/327

James Johnstone

19/10/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes.*

The Petition of Isaac Slack Newby with Bridge Side humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Isaac Slack, Farmer Newby your Petitioner's (3) Son is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Isaac Slack to the Crichton Royal Institution and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Isaac Slack

Dated this Nineteenth (4) day of October One thousand eight hundred and Sixty seven.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Isaac Slack
2. Sex and Age,	Male
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Husbandman
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Newby
7. Place where Found and Examined,	Do
8. Length of time Insane,	10 days
9. Whether first Attack,	First
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	10 days
13. Supposed Cause,	
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this Nineteenth day of October One thousand eight hundred and Sixty seven.

(*To be signed by Party applying*) Isaac Slack

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Smith Kerr
being a (1) "Doctor of Medicine and Lic. Roy. Coll. Edinr.
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) Isaac Slack, Farmer Newby and the said Isaac Slack is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

He is very depressed... Is sleepless & restless night... Says he broke a window at home & cut after some Russians. His friends here took

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

The attendant who brought him here, says that was violent & required constant supervision

Name and Medical Designation, } William S Kerr

Place of Abode, Buccleuch St. Dumfries

DATED this 21st day of October One thousand eight hundred and Sixty Seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Dickson MD
being a (1) Graduate of the Edinburgh University
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution Dumfries in the County Dumfries separately from any other Medical Practitioner visited and personally examined (4) Isaac Slack, Farmer and the said Isaac Slack is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6). He is depressed and labouring under delusions of various kinds — e.g. that he hears voices telling him that the Russians are pursuing him, and under the house belief he states that he leaped out of a window & [illegible]

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

The Medical Assistant informs me that the [illegible] been his condition since admission

Name and Medical Designation, } John Dickson MD

Place of Abode, Dumfries

DATED this 21st day of October One thousand eight hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James Gilchrist M.D. being (1) a graduate of the University of Edinburgh, hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal Asylum in the County of Dumfries, seen and personally examined Isaac Slack, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

James Gilchrist M.D.

DATED this Nineteenth day of October One thousand eight hundred and Sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope Esquire Advocate (3) Sheriff Substitute of the (4) County of Dumfries having had produced to me, with a Petition at the instance of (5) Isaac Slack, Newby Warrick Bridge, Gretlick Certificates under the hands of William Smith Kerr and John Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Isaac Slack former Newby Pettigrew son) and that the said Isaac Slack is a (7) Person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Isaac Slack as a Patient into the (8) Public Asylum of Crichton Royal Institution Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Isaac Slack which accompanied the said Petition.

DATED this twenty first day of October One thousand eight hundred and sixty seven

David Boyle Hope

To the Superintendent of the (9) Public *Asylum of* Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT **TRANSFER** OF A **PATIENT** FROM ONE ASYLUM TO ANOTHER.

I, the undersigned Joseph Bell being desirous to transfer Helen Wilson or Smith at present a Patient in Melville House Asylum, Inspellegh, and (¹) an Lunatic of the Parish of Kirkmahoe of which Inspector of Poor, from the said Asylum to the Northern Counties Asylum Dumfries hereby request the authority of the Board to such transfer; and I subjoin a Statement of Particulars regarding the said Helen Wilson or Smith and a Medical Certificate with respect to her mental and bodily condition.

(¹) *If Lunatic is not a Pauper:* detained at my instance, or whose nearest known relative I am. *If Lunatic is a Pauper:* a Pauper Lunatic of the Parish of which I am Inspector of Poor.

Joseph Bell
Inspector of Poor Kirkmahoe

DATED at Kirkmahoe this Fifteenth day of October One thousand eight hundred and 67.

(²) State degree of Relationship, or other capacity in which Applicant stands to Patient.

STATEMENT.

1. Christian Name and Surname of Patient at length,	Helen Wilson or Smith
2. Sex and Age,	Female 26 years of age
3. Married, Single, or Widowed,	Married & deserted
4. Condition of Life, and Previous Occupation (if any),	Millworker
5. Religious Persuasion, so far as known,	Protestant
6. Date of Admission into Asylum,	27 July 1866
7. Length of time Insane,	"
8. Whether first Attack,	No
9. Age (if known) on first Attack,	Twenty one
10. Duration of existing Attack,	Since 27 July 1866
11. Supposed Cause,	Not known
12. Whether subject to Epilepsy,	No
13. Whether Suicidal,	No
14. Whether Dangerous to others,	yes
15. Parish to which the Lunatic (if a Pauper) is Chargeable,	Kirkmahoe
16. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of Family known to be, or to have been Insane,	David Wilson 44 Fore Street Kilmarnock, her Father

I certify that, to the best of my knowledge, the above particulars are correctly stated.

(*To be signed by the Applicant*) Joseph Bell Inspector of Poor Kirkmahoe

DATED this Fifteenth day of October One thousand eight hundred and Sixty Seven years.

N.B.—The foregoing particulars are required for the information of the authorities to whose care the Patient is to be transferred.

MEDICAL CERTIFICATE.

(1) State Medical Qualification.
(2) Name Asylum.

I, the undersigned Alexander Macdonald Sanderson being (1) a Fellow of the Royal College of Surgeons hereby certify that I have this day at (2) Melville House Private Asylum personally examined Helen Wilson or Smith at present a Patient in said Asylum, and with respect to her Mental State that she labors under Chronic Mania with impulsive excite

; and with respect to her Bodily Health and Condition that they are very good

and I further certify that, in my opinion, there is nothing in the Mental or Bodily Condition of the Patient to contraindicate removal to the Asylum of the Southern Counties Asylum, Dumfries —

A. Macdonald Sanderson
F.R.C.S.

DATED this Nineteenth day of October One thousand eight hundred and Sixty seven years —

SANCTION BY THE BOARD OF LUNACY.

(*Under this Sanction a Patient may be Transferred without an Order of the Sheriff.*)

(1) Insert at whose instance the Lunatic is detained, or the nearest known Relative of the Lunatic, or the Inspector of the Parish by which the expense of the maintenance of the Lunatic is defrayed.

Application having been made to the Board by (1) The Inspector of Poor Kirkmahoe to authorize the transfer of Helen Wilson or Smith from Melville House private Asylum to Southern Counties Asylum Dumfries, and the Board having considered such application and the accompanying Medical Certificate, do hereby authorize the transfer of the said Helen Wilson or Smith as requested.

W. A. F. Browne Commissioner.

DATED at Edinburgh, this 22 day of October One thousand eight hundred and Sixty seven

Date of Sheriff's Order — 27th July 1866

1/375
Helen Wilson or Smith
26/10/67

[FORM B²]

25 and 26 Vict. Cap. 54, Sect. 16.

APPLICATION TO THE GENERAL BOARD OF LUNACY TO GRANT TRANSFER OF A PATIENT FROM ONE ASYLUM TO ANOTHER.

I, the undersigned John Dinwoodie
being desirous to transfer David Carruthers
at present a Patient in Garlands Asylum, and (¹)
a Pauper Lunatic of the Parish of which I am
Inspector from the said Asylum to the
Southern Counties Asylum Dumfries hereby request the authority of
the Board to such transfer; and I subjoin a Statement of Particulars regarding the said
David Carruthers and a Medical Certificate with
respect to his mental and bodily condition.

(¹) *If Lunatic is not a Pauper* detained at my instance, or whose nearest known relative I am. *If Lunatic is a Pauper:* a Pauper Lunatic of the Parish of which I am Inspector of Poor.

John Dinwoodie
Inspector of Poor Dumfries

(²) State degree of Relationship, or other capacity in which Applicant stands to Patient.

DATED at Dumfries this 24th day of October
One thousand eight hundred and 67.

STATEMENT.

1. Christian Name and Surname of Patient at length,	David Carruthers
2. Sex and Age,	Male aged 41 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and Previous Occupation (if any),	Miner
5. Religious Persuasion, so far as known,	Protestant
6. Date of Admission into Asylum,	7 September 1867
7. Length of time Insane,	One month & upwards
8. Whether first Attack,	Yes so far as Known
9. Age (if known) on first Attack,	41 years
10. Duration of existing Attack,	One month & upwards
11. Supposed Cause,	Unknown
12. Whether subject to Epilepsy,	No
13. Whether Suicidal,	No
14. Whether Dangerous to others,	No
15. Parish to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
16. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of relationship (if known), and whether any Member of Family known to be, or to have been Insane,	Mrs Davie Carruthers residing at Restmuir wife of Patient. None so far as known

I certify that, to the best of my knowledge, the above particulars are correctly stated.

(*To be signed by the Applicant*) John Dinwoodie. Inspector

DATED this 24th day of October One thousand eight hundred and 67.

N.B.—The foregoing particulars are required for the information of the authorities to whose care the Patient is to be transferred.

MEDICAL CERTIFICATE.

(1) State Medical Qualification.
(2) Name Asylum.

I, the undersigned Alexander MacKintosh, being (1) Licentiate of the Faculty of Physicians hereby certify that I have this day at (2) the Glasgow Royal Asylum Gatherbury personally examined David Carruthers at present Patient in said Asylum, and with respect to his Mental State that he is delusive, melancholy, and suicidal.

Bodily Health and Condition that they are both tolerable; and with respect to his

and I further certify that, in my opinion, there is nothing in the Mental or Bodily Condition of the Patient to contraindicate removal to the Asylum of

MacKintosh

DATED this twenty-third day of October One thousand eight hundred and sixty-seven.

SANCTION BY THE BOARD OF LUNACY.

(Under this Sanction a Patient may be Transferred without an Order of the Sheriff.)

(1) Insert at whose instance the Lunatic is detained, or the nearest known Relative of the Lunatic, or the Inspector of the Parish by which the expense of the maintenance of the Lunatic is defrayed.

Application having been made to the Board by (1) The Inspector of Poor Dumfries to authorize the transfer of David Carruthers from Glasgow Royal Asylum to Dumfries Royal Asylum, and the Board having considered such application and the accompanying Medical Certificate, do hereby authorize the transfer of the said David Carruthers as requested.

W. A. F. Browne Commissioner.

DATED at Edinburgh, this 28th day of October One thousand eight hundred and Sixty Seven

Date of Sheriffs Order — 10th September 1867.

329
David Carruthers
31/11/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) Shire of Dumfries *and his Substitutes.*—

The Petition of John Docherty Gillfoot Terrace

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Hare, Field Labourer Gatehead New Abbey your Petitioner's (3) Aunt is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Hare to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

John Docherty

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 31st (4) day of October One thousand eight hundred and Sixty seven.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes Hare
2. Sex and Age,	Female
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Field Labourer
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	Gatehead, New Abbey.
7. Place where Found and Examined,	
8. Length of time Insane,	one day
9. Whether first Attack,	yes
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Not previously under treatment
12. Duration of existing Attack,	one day
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Docherty nephew Gillfoot Terrace none.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	no

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this 31st day of October One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) John Docherty

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Brennan being a (1) Graduate of the University of Edin
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Palmerst
Queen
Richmond Asylum in the County
separately from any other Medical Practitioner visited and personally examined (4) Agnes Hare a Labo
Woman Lunatic and that
the said Agnes Hare is a (5) person
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the followin
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She was depre
High spirited & violent & threatens to strike the Re
about & the Keepers, and is consi
lost, and unsound M

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Alexander tells me that s
does not sleep at night, & imag
that people are destroying her

Name and Medical Designation, P Brennan

Place of Abode, Buccleuch St Dum

Dated this 6th day of June One thousand eigh
hundred and 1867

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Smith Graduate of the University of Edin
being a (1)
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Southern
Counties Asylum
Dumfries in the County of
separately from any other Medical Practitioner visited and personally examined (4) Agnes Hare a Labou
Woman, Keswabbey and that
the said Agnes Hare is a (5) Lunatic
and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Seems very m
depressed in Spirits the cause of which he
cannot explain. Thinks at times that some
is at and to injure her.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) I
Sent Keepers her attendant state that
she cries out sometimes that some person is c
to tear her in pieces. & that at times she attempts
tear her dress.

Name and Medical Designation, John Smith MB

Place of Abode, 33 Buccleuch Street D

Dated this 12th day of November One thousand eight
hundred and 67

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned Patrick Murray being (1) a Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Palmerston, Troquer in the County of Kirkcudbright seen and personally examined Agnes Hare Labouring Newabbey and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

P Murray M D

DATED this First day of Week One thousand eight hundred and 67

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

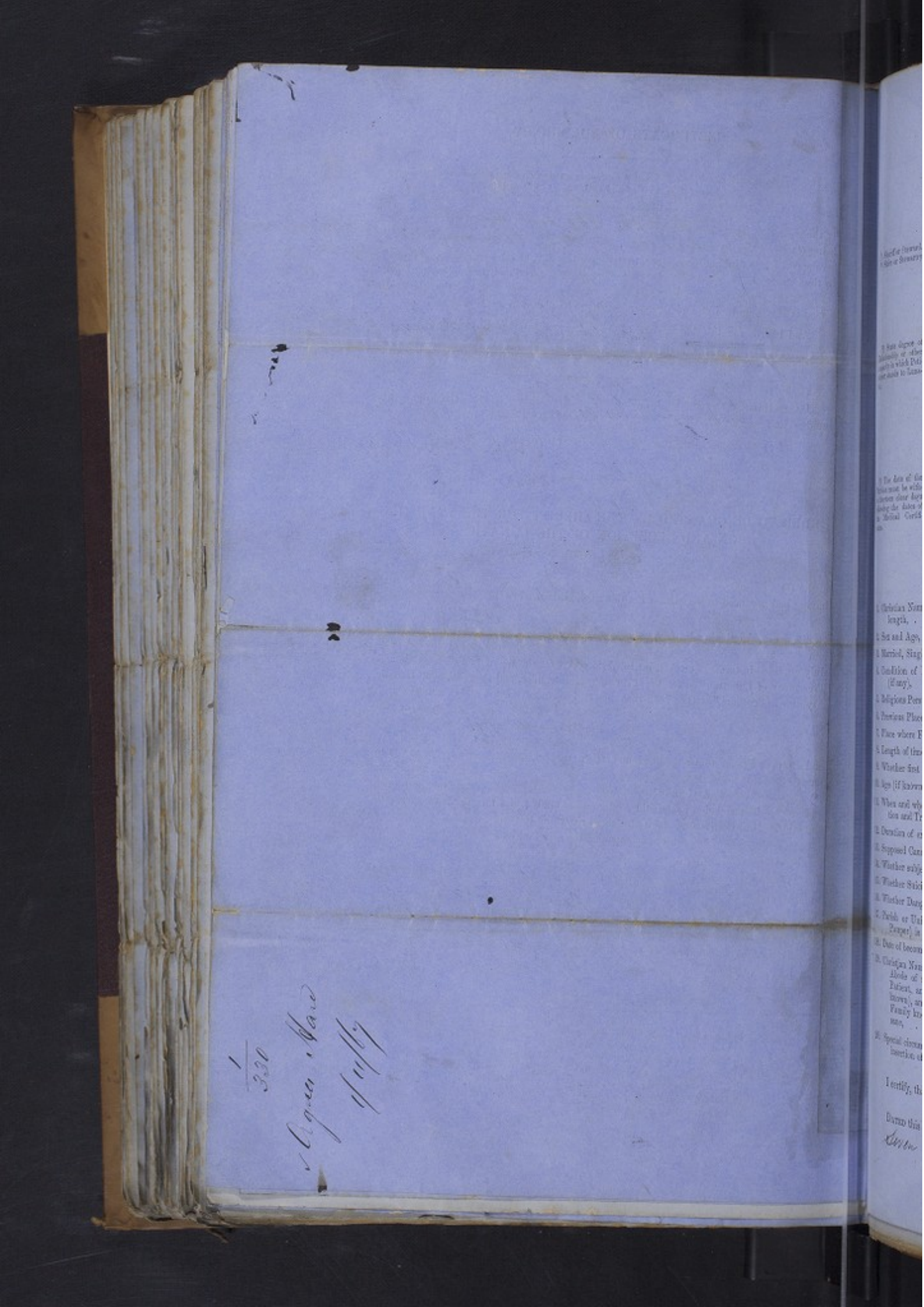
I, David Boyle Hope Advocate (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Docherty Gillfoot, Troquer Certificates under the hands of Patrick Murray and John Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Hare a labouring Woman Newabbey and that the said Agnes Hare is a (5) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Hare as a Patient into the (6) public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Hare which accompanied the said Petition.

DATED this fourth day of November One thousand eight hundred and sixty seven

David Boyle Hope

To the Superintendent of the (7) public *Asylum of* Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.



N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Wigton & Kirkcudbright Kirkcudbright *and his Substitutes,*—for the Stewartry of

The Petition of Samuel Walker, Inspector of Poor, for Crossmichael Parish

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Ann Cane a Pauper ~~your Petitioner's~~ (3) residing in Your Petitioners Parish is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Mary Ann Cane to the Southern Counties asylum, Dumfries and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Sam. Walker, Inspector of Poor

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this first (4) day of November One thousand eight hundred and Sixty Seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Mary Ann Cane
2. Sex and Age,	Female - 23 yrs.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Out door labourer & Vagarant
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	Kelton
7. Place where Found and Examined,	Emanity, Crossmichael
8. Length of time Insane,	About five months
9. Whether first attack,	first
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Since May last not known
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Machara, Londonderry, Ireland
18. Date of becoming Chargeable,	This date
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Francis Cane, Father Emanity, Parish of Crossmichael, Kirkcudbright Shire
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this first day of November One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) Sam. Walker
Inspr. of Poor

P.P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, James Laidlaw,
being a (1) Licentiate of the Royal College of Surgeons of Edinburgh
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Ernanity, Parish of Crossmichael, Kirkcudbright in the County
separately from any other Medical Practitioner visited and personally examined (4) Mary Ann Cane (Pauper), Ernanity, Parish of Crossmichael and
the said Mary Ann Cane, Ernanity is a (5) person of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Retired person highly excitable & violent & threatening at the present time that person she is going to the Asylum, expressing this way at the present through the roof of the house & is anxious to escape & does escape occasionally, wanders through the fields & talking to herself & neighbours; shows attempts to take away life.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Thomas McBeath, who lives next door informs me that Mary Cane at times raving, leaves her house & annoys the neighbours.

Name and Medical Designation, James Laidlaw, L.R.C.S.Ed.

Place of Abode, Castle Douglas

DATED this first day of November One thousand eight hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Walter Lorraine
being a (1) M.D. Edin. L.R.C.S. Edin.
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Ernanity, Crossmichael Parish, Kirkcudbright in the County
separately from any other Medical Practitioner visited and personally examined (4) Mary Ann Cane, Ernanity and
the said Mary Ann Cane is a (5) insane person and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
She is very agitated & sleepless & fancies
Jesus voices which terrify her - Her memory
often defective or she is so absorbed in her own
& melancholy as to be oblivious to incidents occ
around her

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Her father says she is restless &
desirous of change & has several times
made her escape from their charge &
about Kirkcott naked & alarming the people

Name and Medical Designation, Walter Lorraine M.D.

Place of Abode, Castle Douglas

DATED this first day of November One thousand eight hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar, (1) Esquire, Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Samuel Walker

Certificates under the hands of James Loudan and Walter Lorraine, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mary Ann Caine and that the said Mary Ann Caine is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Ann Caine as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Ann Caine which accompanied the said Petition.

DATED this Second day of November One thousand eight hundred and Sixty Seven.

W. H. Dunbar J. S.

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/331

Mary Anne Cane

2/11/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

or Steward. or Secretary.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*

The Petition of John Dinwoodie Inspector of the Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Johnstone or Brown residing at Dumfries your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Margaret Johnstone or Brown to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

John Dinwoodie

te degree of ity or other n which Peti- ns to Luna-

Dated this First (4) day of November One thousand eight hundred and Sixtyseven

s date of the ust be with- en clear days the dates of dical Certifi-

STATEMENT.

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

ristian Name and Surname of Patient at length,	Margaret Johnstone or Brown
x and Age,	female - 121 years
arried, Single, or Widowed,	single
ndition of Life, and previous Occupation (if any),	do - Millworker
eligious Persuasion, so far as known,	Roman Catholic
revious Place of Abode,	Perth
lace where Found and Examined,	do
ength of time Insane,	not exactly known
Whether first Attack,	yes - So far as Known
ge (if known) on first Attack,	about 20 years -
When and where previously under Examination and Treatment,	Perth Prison
uration of existing Attack,	not exactly known
Supposed Cause,	not Known
Whether subject to Epilepsy,	no
Whether Suicidal,	no
Whether Dangerous to others,	no
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries Meantime
Date of becoming Chargeable,	1 Nov. 1867.
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of her Family known to be or to have been Insane,	not known
Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this First day of November One thousand eight hundred and Sixtyseven

(*To be signed by Party applying*) John Dinwoodie. Inspector

P. P.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. I.

I, the undersigned, William Ingoldby
being a (1) Graduate of the Faculty of Physic
and Surgeons of Glasgow and Fellow of the
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Poor
Dumfries
Dumfries
visited and personally examined (4) Margt Johnston a pauper
Barjarg Parish of Keir
the said Margt Johnston
is a (5) Lunatic
and a proper person to be d
under Care and Treatment, and that I have formed this opinion upon the fol
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talky incoh
Has delusion as to type of her ow
Imagined State that she was a pau
the Governor and Matron of Both pauper

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Much the same as ab

Name and Medical Designation, Wm Ingoldby M.D.

Place of Abode, Dumfries

DATED this 1st day of November One thousand
hundred and Sixty Seven Years

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(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, William Scott
being a (1) Graduate of the University of Edinbu
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Poor
Dumfries
Dumfries
in the Cou
separately from any other Medical Practi
visited and personally examined (4) Margaret Johnstone or J
a Pauper
the said Margt Johnstone
an
is a (5) person
of unsound mind
and a proper person to be de
under Care and Treatment, and that I have formed this opinion upon the foll
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has delus
and her manner and Countenance betok
her insincerity.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

The Surgeon of the Prison Reports
day she has been in the Prison Asylu
since February 1867

Name and Medical Designation, William Scott M D

Place of Abode, Dumfries

DATED this 1st day of November One thousand
hundred and Sixty Seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Marshall and College of Physicians
being (1) graduate of the faculty of Physicians and Surgeons Glasgow
hereby certify, on soul and conscience, that I have this day, at (2) Prison Dumfries
in the County of Dumfries, seen and personally examined
Margt Johnston, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

W Marshall M.D. &c

DATED this 1st day of November One thousand eight hundred and Sixty seven years

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope Advocate, (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dinwoodie
Inspector of Poor of the Parish of Dumfries
Certificates under the hands of William Marshall
and William Scott, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Margaret Johnstone or Brown, in Dumfries Prison, a Pauper and that the said Margaret Johnstone or Brown is a (5) Idiot and a person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Johnstone or Brown as a Patient into the (6) Public Asylum of Southern Counties, Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Johnstone or Brown which accompanied the said Petition.

DATED this Fourth day of November One thousand eight hundred and Sixty seven.

David Boyle Hope

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/332

Mary Johnstone Bean

4/11/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Steward ~~of the (2)~~ Stewartry Sheriff of Wigton & Kirkcudbright *and his Substitutes,*—

The Petition of William James McHaffie of Forhouseweir, Wigtown, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Hannah Nae or McNae residing at Tuffock, in the Parish of Crossmichael and Stewartry foresaid your Petitioner's (3) Consen German is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Hannah Nae or McNae to the Southern Counties Lunatic Asylum at Dumfries and to sanction her admission into the the said Asylum. Four words deleted.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

W. J. McHaffie

Dated this Twentyseath (4) day of October One thousand eight hundred and sixty seven

(4) The date of the Petition must be within fifteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Hannah Nae or McNae
2. Sex and Age,	Female – Aged 63
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Her Father was a Mason to trade –
5. Religious Persuasion, so far as known,	Not any
6. Previous Place of Abode,	Has lived at Tuffock all her life
7. Place where Found and Examined,	
8. Length of time Insane,	Has been insane – quite imbecile – all her life
9. Whether first Attack,	
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Not under previous treatment
12. Duration of existing Attack,	All her life as before stated
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Crossmichael in the saw Stewartry
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of her Family known to be or to have been Insane,	James Nae or McNae. Labourer in Castle Douglas a Brother – None insane but her Sister Elizabeth, for whom a similar application is also now made
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this twentyseath day of October One thousand eight hundred and sixty seven –

(*To be signed by Party applying*) W. J. McHaffie

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Anderson being a (1) Licentiate of the Royal College of Surgeons in Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Tuffock in the Parish of Crossmichael in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Hannah Nae at Tuffock and that the said Hannah Nae is a (5) Congenital imbecile little removed from idiotcy and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity (imbecility) observed by myself: (6) She cannot count to twelve without making mistakes, beyond twelve she cannot go - she has very little knowledge of the relative value of coins - she does not know how many sixpences are in the shilling - shillings in a pound, how many weeks in a month or months

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Janet Byres who has been her Attendant for nearly seven years informs me that she cannot cook her own food, that she cannot dress herself without assistance or perform any similar duty for herself, and that in fact she requires constant watching & superintendence -

Name and Medical Designation, Patrick Anderson

Place of Abode, Castle Douglas

DATED this Eighteenth day of October One thousand eight hundred and Sixty seven

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Walter Lorraine being a (1) Licentiate of the Roy. Co. of Surgeons Edin & M.D. Edin and being in actual practice as a (2) General practitioner hereby certify, on soul and conscience, that I have this day, at (3) Tuffock in the parish of Crossmichael in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Hannah Nae, Tuffock and that the said Hannah Nae is a (5) imbecile congenital - and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her intelligence is so low as to be unable to count numbers correctly to any extent. Her appreciation of money is confined to the relative size and appearance of coins - Her disposition is that of being highly gratified by the most trivial gifts and resentment for the most trivial affronts

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The servant says that though she seems to understand an order to do anything she is unable to perform correctly - She requires assistance in dressing and and is of no use in household management unless under immediately superintended

Name and Medical Designation, Walter Lorraine

Place of Abode, Castle Douglas

DATED this Eighteenth day of October One thousand eight hundred and Sixty Seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar (1) Esquire Steward Substitute of the (2) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3) William Lennox Mc Haffie
Certificates under the hands of Patrick Anderson and Walter Lorraine, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Hannah Nae or Mc Nae and that the said Hannah Nae or Mc Nae is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Hannah Nae or Mc Nae as a Patient into the Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Hannah Nae or Mc Nae which accompanied the said Petition.

DATED this Twenty Ninth day of October One thousand eight hundred and Sixty Seven years

W. H. Dunbar

To the Superintendent of the (7) Southern Counties Asylum of Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Manual Md Nad or Nad
8/11/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Steward ~~of the (2)~~ Stewartry Sheriff of Wigton & Kirkcudbright *and his Substitutes,*—

The Petition of William James McHaffie of Torhousemuir, Wigtown humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Nae or McNae, residing at Fuffock, in the Parish of Crossmichael and Stewartry forsaid your Petitioner's (3) Cousin German is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Nae or McNae to the Southern Counties Lunatic Asylum at Dumfries and to sanction her admission into the the said Asylum. Four words deleted.

W. J. McHaffie

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Dated this 26th (4) day of October One thousand eight hundred and sixty seven

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Elizabeth Nae or McNae
2. Sex and Age,	Female – Aged 65
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Her Father was a Mason to trade
5. Religious Persuasion, so far as known,	Not any
6. Previous Place of Abode,	Has lived at Fuffock all her life
7. Place where Found and Examined,	
8. Length of time Insane,	Has been insane – perfectly imbecile – all her life
9. Whether first Attack,	
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Not under previous treatment
12. Duration of existing Attack,	All her life as before stated
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Crossmichael on the said Stewartry
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Nae or McNae, Labourer in Castle Douglas a Brother. None insane but her Sister Hannah, for whom a similar application is also now made
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	—

I certify, that, to the best of my knowledge, the above particulars are correctly stated

Dated this twenty sixth day of October One thousand eight hundred and sixty seven

(*To be signed by Party applying*) W. J. McHaffie

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Anderson being a (1) Licentiate of the Royal College of Surgeons in Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Tuffock in the Parish of Crossmichael in the County Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Elizabeth Nae at Tuffock and the said Elizabeth Nae is a (5) idiot - congenital and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She can articulate distinctly a few words, and can recollect the faces and pronounce the names of those constantly about her, or who are kind to her, but in all respects she has less intelligence than many of the lower animals - She has no knowledge of numbers, of money, of time, of religion &c.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Janet Byres who has been her attendant for nearly seven years informs me that she is quite incapable of dressing or undressing herself, and that she would pass the contents of the Bladder & Bowels in the bed if not watched night and day.

Name and Medical Designation, Patrick Anderson

Place of Abode, Castle Douglas

DATED this Eighteenth day of October One thousand eight hundred and Sixty seven

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Walter Lorraine being a (1) Licentiate of the Royal Co. of Surgeons & M.D. Edin: and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Tuffock in the Parish of Crossmichael in the County Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Elizabeth Nae at Tuffock and the said Elizabeth Nae is a (5) idiot - congenital and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her language habits and appearance are those of idiocy. Her use of language is very circumscribed, being confined to a few words rivoted to her mind from constant familiarity - Her knowledge of the common affairs of life is [illegible]

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The servant says she is totally unable to [illegible] the most trivial personal duty and but for constant superintendence she would be in constant filth & wretchedness

Name and Medical Designation, Walter Lorraine

Place of Abode, Castle Douglas

DATED this Eighteenth day of October One thousand eight hundred and Sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

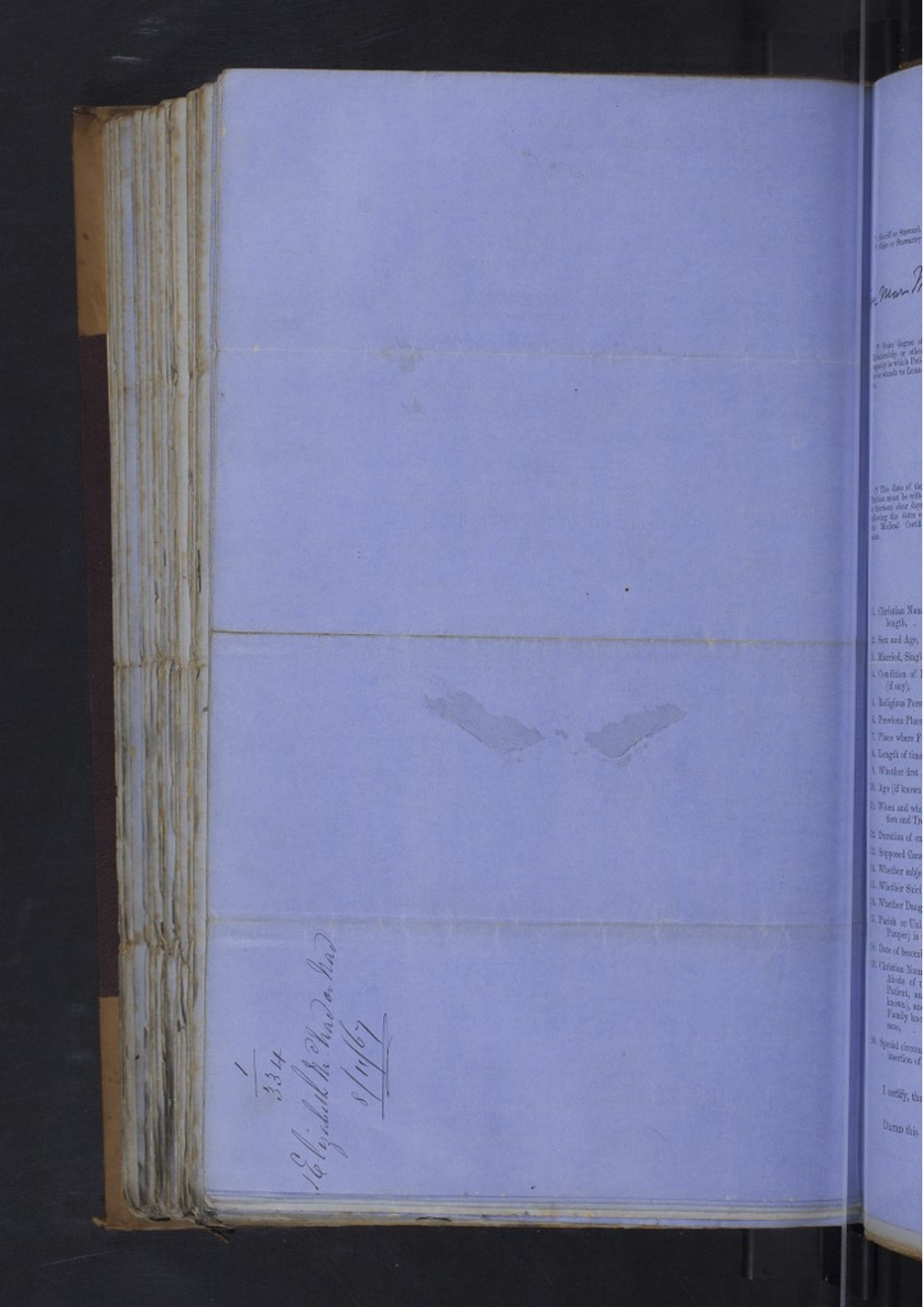
I, William Hyacinth Rumbar (1) Esquire, Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) William James McCaffie Certificates under the hands of Patrick Anderson and Walter Lorraine, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Rae or McRae and that the said Elizabeth Rae or McRae is an (5) idiot - congenital and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Rae or McRae as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Rae or McRae which accompanied the said Petition.

DATED this twenty-fifth day of October — One thousand eight hundred and Sixty Seven

W H Rumbar

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.



N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of the (2) County of Dumfries and his Substitutes,—

The Petition of Mrs Henry Crawley near Meadow humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alfred Crawley your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Alfred Crawley to the Crichton Royal Institution and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

H Crawley

DATED this Eleventh (4) day of November One thousand eight hundred and Forty seven.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Alfred Crawley
2. Sex and Age,	Male. 42
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Independant
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Stowe near Meadow.
7. Place where Found and Examined,	Co. Dumfries
8. Length of time Insane,	Peculiar from Childhood
9. Whether first Attack,	No
10. Age (if known) on first Attack,	Not known
11. When and where previously under Examination and Treatment,	At home
12. Duration of existing Attack,	For a long Period
13. Supposed Cause,	Spinal disease
14. Whether subject to Epilepsy,	Not of late years
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Revd H. Crawley Stowe House near Meadow
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this eleventh day of ~~October~~ November One thousand eight hundred and Forty seven

H Crawley

(To be signed by Party applying)

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Smith Kerr being a (1) Doctor of Medicine and Lic. Roy. Coll: Edinr. and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Alfred Crawley, Stowe and that the said Alfred Crawley is a (5) Person of unsound mind. and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) His appearance morbid. He shows great weakness mentally & physically. No distinct delusions. He is anxious to remain in the Crichton.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brother at Stowe kept him for years until he began to get violent & threatening habits filthy.

Name and Medical Designation, } William S Kerr M.D.

Place of Abode, Buccleuch St Dumfries

DATED this 13th day of November One thousand eight hundred and Sixty Seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Murray being a (2) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Alfred Crawley Stowe and that the said Alfred Crawley is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) His appearance indicates great mental & physical weakness approaching imbecility.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Dr Gilchrist tells me that he has several times attempted to strange his attendant, also his Brother.

Name and Medical Designation, } P Murray M.D.

Place of Abode, Buccleuch St Dumfries

DATED this 13th day of November One thousand eight hundred and 67

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, James Gilchrist MC being (1) a graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Crichton Royal Institution in the County of Dumfries, seen and personally examined Alfred Crawley, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the ~~said~~ person is one of Emergency.

J. Gilchrist MC

DATED this Eleventh day of ~~October~~ November One thousand eight hundred and fifty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon, Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) The Reverend Henry Crawley, Stowe near Weedon Certificates under the hands of William Smith Kerr and Patrick Murray, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Alfred Crawley, Stowe (Petitioners Brother) and that the said Alfred Crawley is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alfred Crawley as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alfred Crawley which accompanied the said Petition.

DATED this Thirteenth day of November One thousand eight hundred and Sixty seven years

James Gordon

To the Superintendent of the (7) Public *Asylum of* Crichton Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,—*

The Petition of John Irving Inspector of poor of the parish of Cummertrees humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ann Elliot wife of Joseph Elliot residing at East Muir in the parish of Cummertrees — your petitioners charge — is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Ann Elliot to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) John Irving

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Thirteenth (3) day of November one thousand eight hundred and sixty seven

1801

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Ann Elliot
2. Sex and Age,	Female: Fifty two years of age
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Wife of Kennel keeper: Daughter of Labouring man
5. Religious Persuasion, so far as known,	Presbyterian: of the Established Church of Scotland
6. Previous Place of Abode,	Springfield parish of Gretney
7. Place where Found and Examined,	East Muir
8. Length of time Insane,	About two months
9. Whether first Attack,	Was a little affected about four years ago
10. Age (if known) on first Attack,	About forty eight years of age
11. When and where previously under Examination and Treatment,	Was never previously under examination or treatment
12. Duration of existing Attack,	About two months
13. Supposed Cause,	Cause not known beyond death of a son about four years ago
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	It is thought not
16. Whether Dangerous to others,	It is thought not
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Cummertrees
18. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Joseph Elliot her Husband residing at East Muir and Margaret Ferguson her sister residing in Springfield No member of her family ever known to be insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	There are none.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* Name, John Irving

DATED this Thirteenth day of November one thousand eight hundred and sixty seven

* To be signed by the Party applying.

Lunacy Board,—Dec.—57.—1290.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Ogle Bell Irving being a (1) Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Moor in the Parish of Cummertrees in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Anne Elliot, Wife of Joseph and that the said Anne Elliot is a (5) Lunatic or Insane Person and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She thinks she is followed & persecuted by [illegible] a maniacal [illegible]

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

(SIGNED) *Name and Medical Designation,* W. O. Bell Irving Surgeon

Place of Abode, Bank Side

DATED this 11th day of Novr. One thousand eight hundred and sixty seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper, state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Young being a (1) Licentiate of the Royal College of Surgeons, Edinburgh and being in actual practice as a (2) General Practitioner in Medicine hereby certify, on soul and conscience, that I have this day, at (3) East Moor in the Parish of Cummertrees in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Ann Elliot wife of Joseph Elliot and that the said Ann Elliot is a (5) person of unsound mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
General Delirium. at times she imagines that she hears voices from behind the fireplace annoying and insulting her

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Sleeps little or none at night. at times she becomes very excited swears and makes a great noise and wanders from the house.
Information from her son & neighbours!

(SIGNED) *Name and Medical Designation,* William Young Surgeon

Place of Abode, Ecclefechan

DATED this twelfth day of November one thousand eight hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, having already granted the Medical Certificate, No. 1., hereto annexed, to the effect that

is a (1) hereby further certify that the Case of the said is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name,

Place of Abode,

DATED this day of one thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope Advocate (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Irving, Inspector of Poor, Cummertrees Certificates under the hands of William Ogle Bell Irving and William Young, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Ann Elliot spouse of Joseph Elliot, Eastmoor Cummertrees a Pauper and that the said Ann Elliot is a (5) Lunatic or Insane person and a Person of Unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ann Elliot as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ann Elliot which accompanied the said Petition.

(SIGNED) David Boyle Hope

DATED this Fifteenth day of November one thousand eight hundred and Sixty Seven years

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

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Ann Elliot

15/11/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Stewart. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Robert Scott Inspector of the Poor of Penick humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Phillips or maxwell your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Phillips or maxwell to the Southern Counties asylum and to sanction her admission into the the said Asylum.

(3) State degree of Lordship or other dignity in which Petitioner stands to Lunatic.

Rob[t] Scott

Dated this Eighteenth (4) day of November One thousand eight hundred and Sixty Seven

(4) The date of the Petition must be within fourteen clear days preceding the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Eliz[th] Phillips or Maxwell
2. Sex and Age,	Female 58 years.
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Presbyterian Church of Scotland
6. Previous Place of Abode,	Moss side Penick Dumfriesshire
7. Place where Found and Examined,	Moss side
8. Length of time Insane,	4 months
9. Whether first Attack,	1st attack
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	never under treatment before
12. Duration of existing Attack,	4 months
13. Supposed Cause,	Loss of Money.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No others.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Penick
18. Date of becoming Chargeable,	18th November 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	John Maxwell Husband, Mossside by auchencairn Kirkcudbrightshire None of her Family have been Insane so far as is known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Eighteenth day of November One thousand eight hundred and Sixty Seven

(To be signed by Party applying) Robt Scott Inspector of the Poor Penick

P.P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, Gregor Mene
being a (1) Licentiate of the Royal College of Surgeons Edinburgh.
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Moss-side
in the Cou
Kirkcudbright.
separately from any other Medical Practit
visited and personally examined (4) Elizabeth Killips or Maxwell a pauper
and
the said Elizabeth Killips or Maxwell
is a (5) Lunatic
and a proper person to be de
under Care and Treatment, and that I have formed this opinion upon the foll
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her appearance is wild eye unsettled and that she is dangerous to other people, will not remain in her house,

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
John Henries tells me that it was with the greatest difficulty she could be kept in her own house this morning and that she is a a constant source of annoyance to her neighbors.

Name and Medical Designation, Gregor Mene
Licentiate of the Royal Colle

Place of Abode, Auchensaigin. Kirkcudbright

DATED this eighteenth day of November One thousand
hundred and sixty seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

I, the undersigned, William Ramsay McNab
being a (1) Graduate in Medicine of Edinburgh University
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum. Dumfries.
in the Count
Dumfries.
separately from any other Medical Practitio
visited and personally examined (4) Elizabeth Killips or Maxwell. Laborer Mossside. pauper.
and
the said Elizabeth Killips or Maxwell. is a (5) Lunatic
and a proper person to be deta
under Care and Treatment, and that I have formed this opinion upon the follow
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Her intelligen is much impaired. she has difficulty in fixin her attention. answers questions of importance wi hesitation. and complains of great depression of spirits —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
The Inspector of Poor. Rerick. says she used to her house. and go to many of her neighbours off to board with them —

Name and Medical Designation, W. R. McNab. M.D.

Place of Abode. Southern Counties. Asylum. Dumfries

DATED this 20th day of November One thousand ei
hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Gregor Skene being (1) a licentiate of the Royal College of Surgeons Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Moss-side in the County of Kirkcudbright, seen and personally examined Elizabeth Kemp or Maxwell, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Gregor Skene, Licentiate Royal College of Surgeons Edinburgh.

DATED this 18th day of November One thousand eight hundred and sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Scott Inspector of Poor Dumfries Certificates under the hands of Gregor Skene and William Ramsay Monal, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Phillips or Maxwell a pauper and that the said Elizabeth Phillips or Maxwell is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Phillips or Maxwell as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Phillips or Maxwell which accompanied the said Petition.

DATED this Twentieth day of November One thousand eight hundred and sixty seven

James Gordon

To the Superintendent of the (7) Public Asylum of Southern Counties at Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/336

Elizabeth Killigrew to Maxwell.

19/11/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) ~~Steward~~ ~~of the~~ (1) ~~Stewartry~~ *of* Kirkcudbright *and his Substitutes,—*

The Petition of Wm Henry Inspector of Poor, Parish of Minnigaff humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Crawford. Miner. Blackcraig. your Petitioner's (2) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Crawford to the Southern Counties Asylum, Dumfries and to sanction his admission into the said Asylum. per errorem dolore

(2) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

William Henry

Dated this Fourteenth (3) day of November One thousand eight hundred and Sixty seven

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Crawford
2. Sex and Age,	Male. 49 years.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Miner
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Blackcraig
7. Place where Found and Examined,	Blackcraig
8. Length of time Insane,	Coming on gradually for 10 days
9. Whether first attack,	not first attack
10. Age (if known) on first Attack,	43 at first attack
11. When and where previously under Examination and Treatment,	Southern Counties asylum
12. Duration of existing Attack,	
13. Supposed Cause,	Constitutional
14. Whether subject to Epilepsy,	Not subject to epilepsy
15. Whether Suicidal,	not suicidal
16. Whether Dangerous to others,	Not dangerous
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Minnigaff
18. Date of becoming Chargeable,	14 November 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Andrew Crawford, Blackcraig. Brother. Not known that any other member of the Family has been insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Fourteenth day of November One thousand eight hundred and sixty seven years

(To be signed by Party applying) William Henry

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, James Clark
being a (1) Licentiate of the Faculty of Physicians and Surgeons of Glasgow.
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Black Craig in the parish of Minnigaff in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) John Crawford, Minnigaff, Black Craig, Minnigaff, Pauper and that the said John Crawford is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
He believes that he is being poisoned by relatives and neighbours and provisions. His actions are regulated by that belief.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
He threatens to shoot and to blow up his neighbours and uses violent & abusive language.

Margaret McCaull & Mrs McGhee both neighbours.

Name and Medical Designation, James Clark, Surgeon

Place of Abode, Newton Stewart

DATED this Thirteenth day of November One thousand eight hundred and sixty seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, James G. Dickson
being a (1) Doctor of Medicine, University of Edinburgh
and being in actual practice as a (2) Doctor of Medicine
hereby certify, on soul and conscience, that I have this day, at (3) Black Craig in the parish of Minnigaff in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) John Crawford, Minnigaff, Black Craig, Minnigaff — pauper — and that the said John Crawford is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Various delusions, especially in connection with his food. Imagines his relatives and neighbours are leagued with the provision merchants to poison him. His actions are swayed by that belief. Won't take medicine.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Refuses food under the belief that it is poisoned. Threatens to shoot and blow up the neighbours and uses very obscene and violent language.

Miss McCaull — a neighbour, and Mrs Andrew Crawford — a sister in law.

Name and Medical Designation, James G. Dickson, Surgeon

Place of Abode, Newton Stewart.

DATED this 13th day of November One thousand eight hundred and sixty seven years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar (1) Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) William Henry Inspector of Poor for the Parish of Minnigaff Certificates under the hands of James Clark and James G. Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) — John Crawford a miner & a pauper and that the said John Crawford is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Crawford as a Patient into the Dumfries & Galloway Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Crawford which accompanied the said Petition.

DATED this sixteenth day of November One thousand eight hundred and sixty seven years

W H Dunbar

To the Superintendent of the (7)
Public Asylum of Dumfries Galloway
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1/337

John Crawford.

19/11/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Stewart. (2) Sheriff or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of John Dinwoodie Inspecter of Poor for the Parish of Dumfries

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Reid residing at Gaistown your Petitioner's (3) pauper

(3) State degree of relationship or other circumstances in which Petitioner stands to Lunatic.

is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said James Reid to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

John Dinwoodie

(4) The date of the Petition must be within seven clear days before the dates of the Medical Certificates.

Dated this Twentieth (4) day of November One thousand eight hundred and Sixty seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	James Reid
2. Sex and Age,	Male, about 70 years
3. Married, Single, or Widowed,	Married —
4. Condition of Life, and previous Occupation (if any),	do — Bee Hive Maker &c
5. Religious Persuasion, so far as known,	No Religious profession
6. Previous Place of Abode,	Gaistown
7. Place where Found and Examined,	— do —
8. Length of time Insane,	not certainly known
9. Whether first Attack,	do so far as known
10. Age (if known) on first Attack,	not certainly known
11. When and where previously under Examination and Treatment,	Has not been under Examination & treatment before
12. Duration of existing Attack,	not known
13. Supposed Cause,	no cause assigned
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	20th Novr 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not Known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twentieth day of November One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) John Dinwoodie, Inspector

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Scott
being a (1) Graduate of the University of Edin
and Surgeons Glasgow and College of
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Gaple
Dumfries in the C
visited and personally examined (4) separately from any other Medical Pra
the said James Reid is a (5) Lunati
and a proper person to be
under Care and Treatment, and that I have formed this opinion upon the
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has delus
as to the Duke of Cambridge having
a Copy of the Bible written by him
Queen and Prince

2. Other facts (if any) indicating Insanity communicated to me by others:
Mr Wipe states that he
[illegible]

Name and Medical Designation, Marshall

Place of Abode, Dumfries

DATED this 5th day of November One thousa
hundred and Eighty seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Scott
being a (1) Graduate of the University of Edin
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Gaple
Dumfries in the C
visited and personally examined (4) James Reid
a Pauper
the said James Reid is a (5) Lunat
and a proper person to be
under Care and Treatment, and that I have formed this opinion upon the
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has delus
says he has written a new version of the B
and has taken steps to dethrone the
Queen that the Duke of Cambridge is upst
Lie—

2. Other Facts (if any) indicating Insanity communicated to me by others:
His wife says that he is
extravagant and she is in constant fear
of him

Name and Medical Designation, William Scott
M D

Place of Abode, Dumfries

DATED this 29th day of November One thousa
hundred and Eighty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dinwoodie
Inspector of Poor Dumfries
Certificates under the hands of William Marshall
and William Scott, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
James Reid residing at Easetown (a pauper) and that the said
James Reid is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Reid as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Reid which accompanied the said Petition.

DATED this Twentieth day of November One thousand eight hundred and sixty seven

James Gordon

R.S.

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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James Reid
20/11/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of Duncan Clapperton, Supt of Poor Annan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Edgar or Sinclair your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Helen Edgar or Sinclair to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Duncan Clapperton

Dated this Twenty Second (4) day of November One thousand eight hundred and Sixty Seven.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Helen Edgar or Sinclair.
2. Sex and Age,	Female. 37 years of age.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Seamstress
5. Religious Persuasion, so far as known,	Protestant.
6. Previous Place of Abode,	Carlisle,
7. Place where Found and Examined,	Kirkpatrick Flg. parish,
8. Length of time Insane,	about 2 weeks.
9. Whether first Attack,	not known.
10. Age (if known) on first Attack,	"
11. When and where previously under Examination and Treatment,	"
12. Duration of existing Attack,	about 2 weeks.
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no.
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Annan.
18. Date of becoming Chargeable,	3 September 1866.
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Edgar. Newtown Kirkpatrick—Fleming, Father, none are known to be insane.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twenty Second day of November One thousand eight hundred and Sixty-Seven years,

(*To be signed by Party applying*) Duncan Clapperton Supt.

P. P.

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MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Carmichael
being a (1) Licentiate of the Royal College of
of Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Smithfield
in the Parish of Kirkpatrick Fleming in the County of
Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Helen Edgar or Sinclair
a pauper at Smithfield aforesaid and that
the said Helen Edgar or Sinclair is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Sobs and c
concerning imaginary troubles, Wanders
might on the roads howling and cr
apparently in a distressed state of mind

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her daughter & neighbours are m
annoyed by the restlessness o
her conduct without reasonable c

Name and Medical Designation, James Carmichael, L.R.
Place of Abode, Kirkpatrick Fleming

DATED this twenty second day of November One thousand eight
hundred and Sixty Seven

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Wm Ewart
being a (1) Licentiate of the Royal College of Surgeons
of Edinburgh
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Smithfield
in the Parish of Kirkpatrick Fleming in the County of
Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Helen Edgar or Sinclair
a pauper
the said Helen Edgar or Sinclair and that
is a (5) person of
unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
Her general appearance, and in-
-coherent answers to any questions
proposed to her

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Neighbours much disturbed by her rest
-less nights, and the noise & uproar which
she causes

Name and Medical Designation, Wm Ewart, Surgeon
Place of Abode, Edinburgh Street, Annan

DATED this 22 day of November One thousand eight
hundred and Sixty Seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon, Esquire (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Duncan Clapperton
Inspector of Poor of Dunscore
Certificates under the hands of James Carruthers
and William Crichton, being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Helen Edgar or Sinclair Smithfield Kirkconnel Dumfries and that the said
Helen Edgar or Sinclair is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Helen Edgar or Sinclair as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Helen Edgar or Sinclair which accompanied the said Petition.

DATED this twenty ~~first~~ day of November One thousand eight hundred and Sixty three. one word delete

James Gordon.

P.S.

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Helen Edgar or Sinclair

28/11/67

The next time such a thing is sent you must say what is to be done with it.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~the~~ (2) Wigtown and Kirkcudbright *and his Substitutes,*—

The Petition of Richard Hewat, Inspector of poor of Kirkcolm

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Samuel Jeffrey a pauper Lunatic

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Samuel Jeffrey to the Southern Counties Asylum and to sanction his admission into the the said Asylum.

Richd Hewat

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Twenty ninth(4) day of November One thousand eight hundred and Sixty Seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Samuel Jeffrey
2. Sex and Age,	Male
3. Married, Single, or Widowed,	Not Known
4. Condition of Life, and previous Occupation (if any),	Not Known
5. Religious Persuasion, so far as known,	Do
6. Previous Place of Abode,	Do
7. Place where Found and Examined,	Kelton Mains parish of Kelton
8. Length of time Insane,	apprehended as a dangerous
9. Whether first Attack,	Lunatic
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Not Known
12. Duration of existing Attack,	Do
13. Supposed Cause,	Do
14. Whether subject to Epilepsy,	Do
15. Whether Suicidal,	Do
16. Whether Dangerous to others,	Supposed to be
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Supposed to be Portpatrick
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not Known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Twenty ninth day of November One thousand eight hundred and sixty seven

(*To be signed by Party applying*) Richd Hewat

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualifications entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, David Blair being a (1) L.R.C.S. Ed.

and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Police Office Kirkcudbright in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Samuel Jeffery a Pauper and that the said Samuel Jeffery is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) incoherency of speech & excited manner & from his appearance generally

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, David Blair Surg

Place of Abode, Kirkcudbright

DATED this 29th day of November One thousand eight hundred and sixty seven

---

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualifications entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Wm Johnstone ~~M.D. Edin.~~, being a (1) Physician and Surgeon,

and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) the Police Office Kirkcudbright in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Samuel Jeffery a Pauper and that the said Samuel Jeffery is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) From his abnormal state of mind when left alone, and from what incoherency of speech and excitement when spoken to.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, Wm Johnstone M.D.

Place of Abode, Kirkcudbright

DATED this 29th day of November One thousand eight hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar (1) Esqr. Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Richard Thwaites Certificates under the hands of David Blair and William Johnston, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Samuel Jeffrey a Pauper, and that the said Samuel Jeffrey is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Samuel Jeffrey as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Samuel Jeffrey which accompanied the said Petition.

DATED this Twenty Sixth day of November One thousand eight hundred and Sixty Seven

W H Dunbar

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries.

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

$\frac{1}{340}$.

Samuel Jeffrey.

29/11/67.

Mr. Harrison
Arms Drum
Trinkman B ½
Ventilation
Clothes

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2)
of *and his Substitutes,—*

The Petition of Colin Christison Inspector of Poor
humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elisabeth Douglas
your Petitioner's (3)
is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elisabeth Douglas to the Southern Counties Asylum and to sanction the admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Colin Christison Inspector

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Twenty Ninth (4) day of November One thousand eight hundred and Sixty Seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Elisabeth Douglas
2. Sex and Age,	Female about 45 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	House or Farm Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Kirkwauch Kirkinner
7. Place where Found and Examined,	Kirkinner Village
8. Length of time Insane,	about Two weeks
9. Whether first attack,	Formerly in the Asylum
10. Age (if known) on first Attack,	about 44 years
11. When and where previously under Examination and Treatment,	26 October 1866 at Kirkwauch & sent to Southern Counties Asylum 29th Oct. 1866
12. Duration of existing Attack,	about Two weeks
13. Supposed Cause,	Combination of Causes
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	Doubtful
16. Whether Dangerous to others,	Danger apprehended
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkinner Parish
18. Date of becoming Chargeable,	about 29th October 1866
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Douglas Monreith Village, a Brother none of her relations known to be Insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 29th day of November One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) Colin Christison Inspector

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an insane person, or an Idiot, or a person of unsound mind.*

I, the undersigned, William Cumming being a (1) Doctor of Medicine and Master in Surgery of Glasgow University and (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Kirkinner in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Elizabeth Douglas, a pauper and the said Elizabeth Douglas is a (5) insane person and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She talks incoherently and incessantly is restless, quite unsettled, keeping begging me to find her another place. She says she has got a kind friend of good position left in the country, she is also subject to delusions as to bodily health

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) From Mr John Sloan, Kirkinner. That he scarcely dare leave the house lest she set it on fire, that her character and destruction are completely from being a clean & orderly person she has become reverse, and that sometimes her state is such that he is in terror for his life.

Name and Medical Designation, William Cumming.

Place of Abode, Wigtown

DATED this twenty ninth day of November One thousand eight hundred and eighty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an insane person, or an Idiot, or a person of unsound mind.*

I, the undersigned, Samuel Snowdon being a (1) Doctor of Medicine of the University of Edinburgh and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Kirkinner in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Elizabeth Douglas, a pauper and the said Elizabeth Douglas is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) From her incoherent & rambling conversation - her obscene and violent language created by imaginary wrongs - her duplicity - and her constant changing about tending to dirt and disorder both as regards her person and house

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mr Sloan her master informs that her temper is quite changed at one time perfectly docile at other times violent & furious - so much so that at times he can scarcely leave the house with his wife and by herself that she has said she will either kill herself or him on the

Name and Medical Designation, Samuel Snowdon M.D.

Place of Abode, Wigtown

DATED this twenty ninth day of November One thousand eight hundred and eighty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, William Cumming
being (1) Doctor of
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Thomas Murray Esquire (1) Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Colin Christison
Inspector of Poor, of the Parish of Kirkinner
Certificates under the hands of William Cumming M.D.
and Samuel Snowdon M.D. , being two Medical Persons
duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Elizabeth Douglas a Pauper and that the said
Elizabeth Douglas is an (5) insane person

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Douglas as a Patient into the (6) Southern Counties Asylum of Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Douglas which accompanied the said Petition.

DATED this thirtieth day of November One thousand eight hundred and sixty seven years.

Thos Murray

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1
341.

Elizabeth Douglas.

30/11/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Thomas Henry Graham

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Graham, chemist Penrith Market your Petitioner's (3) Father is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Graham to the Crichton Royal Institution and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Thomas Henry Graham

DATED this 6th (4) day of December One thousand eight hundred and ~~sixty~~ sixty seven

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Thomas Graham
2. Sex and Age,	Male 52
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Chemist
5. Religious Persuasion, so far as known,	Independent
6. Previous Place of Abode,	Penrith
7. Place where Found and Examined,	Crichton Royal Institution
8. Length of time Insane,	6 Months
9. Whether first Attack,	Second
10. Age (if known) on first Attack,	52
11. When and where previously under Examination and Treatment,	Liverpool 6 Months
12. Duration of existing Attack,	6 months
13. Supposed Cause,	Drink
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Thomas Henry Graham Son
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 6th day of December One thousand eight hundred and sixty seven

(*To be signed by Party applying*) Thomas Henry Graham

P. T.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

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

I, the undersigned, John Smyth being a (1) Graduate of the University of Ed
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Crichton
Royal Institution in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined Thomas Graham
and that
the said Thomas Graham is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Has delusions
regarding his business & family matters. Jealous of
his wife & son from confined to bed & will
not let them come

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His son Thomas H Graham informs me that
Father has completely changed in his conduct towards
during the last few months that he has on several occasions
assaulted him & more than once attempted to fall upon
him with a knife

Name and Medical Designation, John Smyth M

Place of Abode, 32 Buccleuch St Dum

Dated this 9th day of December One thousand eight
hundred and 67

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, or otherwise, as the case may be.

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

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

I, the undersigned, Patrick Inman being a (1) Graduate of the University of Edi
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Crichton
Royal Institution in the County of
Dumfries, separately from any other Medical Practitioner,
visited and personally examined (4) Thomas Graham Cun
the said Cunningham Graham and that
Thomas Graham is a (5) person
of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Imagines
his family are trying to injure
and ruin him. His behaviour violent
and destructive at one time unbearable, and
2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

(7) *State the information, and from whom derived.*

Dr Taylor Fourth Visit, the
Dr breaks the furniture, makes him
The attendant Visit, Furniture pursuit
Ladies of the Institution

Name and Medical Designation, P Inman M

Place of Abode, Buccleuch St Dum

Dated this 9th day of December One thousand eight
hundred and 67

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, [illegible] being (1) a Graduate of the University hereby certify, on soul and conscience, that I have this day, at (2) Crichton Institution in the County of Dumfries, seen and personally examined Thomas Graham, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

[illegible]

DATED this 6th day of Dec. One thousand eight hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Thomas Henry Graham Corn Market Penrith Certificates under the hands of John Smith Surgeon and Patrick Murray, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Thomas Graham, Chemist Penrith and that the said Thomas Graham is a (5) a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Graham as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Graham which accompanied the said Petition. one word delete

RS

DATED this Ninth day of December One thousand eight hundred and sixty seven years

David Boyle Hope

To the Superintendent of the (7) Public *Asylum of* ~~Crichton Royal~~

Crichton Royal Institution Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1058

Thomas Graham.

3/12/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 Vict., Cap. 54, Sect. 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Ellen Graham

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Graham your Petitioner's (3) Husband is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Thomas Graham to the Crichton Royal Institution and to sanction his admission into the the said Asylum.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

Ellen Graham

Dated this (4) day of One thousand eight hundred and

(4) The date of the Petition must be within fourteen clear days preceding the dates of the Medical Certificates.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Thomas Graham
Sex and Age,	male 52
Married, Single, or Widowed,	married
Condition of Life, and previous Occupation (if any),	chemist
Religious Persuasion, so far as known,	independant
Previous Place of Abode,	Penicuik
Place where Found and Examined,	Crichton Royal Institution
Length of time Insane,	6 months
Whether first Attack,	second
Age (if known) on first Attack,	52
When and where previously under Examination and Treatment,	Liverpool
Duration of existing Attack,	6 months.
Supposed Cause,	drink
Whether subject to Epilepsy,	~~yes~~ no
Whether Suicidal,	yes
Whether Dangerous to others,	
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
Date of becoming Chargeable,	
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Thomas Henry Graham, son
Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 3d day of December One thousand eight hundred and sixty seven

(*To be signed by Party applying*) Thomas Henry Graham

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Robert Pearson being a (1) Doctor of Medicine of the University Edinburgh, a Member of the Royal College of Physicians and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Corn Ma Penrith in the Coun Cumberland separately from any other Medical Practiti visited and personally examined (4) Thomas Graham Chem Corn Market Penrith and the said Thomas Graham is a (5) person unsound mind and a proper person to be deta under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Is incoherent in his conversation, & a believes that is relatives have conspired to injure him

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

His wife says that he has threatened to her & his children, & that he is destroying property

Name and Medical Designation, } Robert Pearson M

Place of Abode, Shrickland Gate Penrith

DATED this 1st day of December One thousand ei hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Michael W. Taylor being a (1) Doctor of Medicine University Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Corn Mar Penrith in the County Cumberland separately from any other Medical Practitione visited and personally examined (4) Thomas Graham Chemi Corn Market Penrith and th the said Thomas Graham is a (5) person of unsound mind and a proper person to be detaine under Care and Treatment, and that I have formed this opinion upon the followin grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)

Violent & excited demeanour. abusive langua to his wife, unreasonable suspicions of his relatio

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Striking, breaking furniture. wasting hi means. incompetent to manage his affairs, Informants - his wife. and son in law Thomas Fle

Name and Medical Designation, } Michael W. Taylor M

Place of Abode, Hutton Hall Penrith

DATED this 2d day of December One thousand eight hundred and sixty seven -

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Smith
being (1) Graduate of the University of Edinburgh
hereby certify, on soul and conscience, that I have this day, at (2) Crichton Institution
in the County of Dumfries, seen and personally examined Thomas Graham, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Smith M.B. CM

DATED this 3rd day of December One thousand eight hundred and 67

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, (1)
of the (2)
having had produced to me, with a Petition at the instance of (3)

Certificates under the hands of
and , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) and that the said

is a (5)

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said as a Patient into the (6) Asylum of and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said which accompanied the said Petition.

DATED this day of One thousand eight hundred and

To the Superintendent of the (7)
Asylum of

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Ayr *and his Substitutes,—*

The Petition of Adam Murdoch residing in Sorn

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David Murdoch residing at Hollies Glenlogan Sorn your Petitioner's (3) Brother is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said David Murdoch to the Crichton Royal Institution, Dumfries and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Adam Murdoch

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this South (4) day of December One thousand eight hundred and Sixty seven years

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STATEMENT.

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

Christian Name and Surname of Patient at length,	David Murdoch.
Sex and Age,	Male, about 50 years
Married, Single, or Widowed,	married
Condition of Life, and previous Occupation (if any),	Wood Forester.
Religious Persuasion, so far as known,	Evangelical Union
Previous Place of Abode,	Woodhead of Glenlogan, Sorn
Place where Found and Examined,	Examined in Catrine, Sorn
Length of time Insane,	about a month.
Whether first Attack,	Second attack
Age (if known) on first Attack,	41 years of age.
When and where previously under Examination and Treatment,	Crichton Royal Institution Dumfries.
Duration of existing Attack,	about a month,—(First attack lasted 23 weeks)
Supposed Cause,	Religious delusions.
Whether subject to Epilepsy,	no.
Whether Suicidal,	no.
Whether Dangerous to others,	no,
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
Date of becoming Chargeable,	—
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Adam Murdoch, Sorn Village, Brother.
Special circumstances (if any) preventing the insertion of any of the above particulars,	None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this South day of December One thousand eight hundred and Sixty seven years.

(To be signed by Party applying) Adam Murdoch

P. T.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, John Blackwood being a (1) L.S.P.S. Glasgow and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Cathcart in the County of Ayr separately from any other Medical Practitioner visited and personally examined (4) David Murdoch and the said David Murdoch is a (5) person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) from his personal appearance and conversation and from having formerly certified him as a proper person for being placed in Asylum

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His brothers inform me that he is remarkably reticent and eccentric, labouring under strong religious delusions

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

Name and Medical Designation, John Blackwood L.F.P.S.

Place of Abode, Cathcart

DATED this Fourth day of December One thousand eight hundred and Sixty Seven

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MEDICAL CERTIFICATE, No. II.

I, the undersigned, James Battantine being (1) M.D. Glasgow University Physician and being in actual practice as a (2) hereby certify, on soul and conscience, that I have this day, at (3) Cathcart in the County of Ayr separately from any other Medical Practitioner visited and personally examined (4) David Murdoch and the said David Murdoch is a (5) person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Religious delusions

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

Name and Medical Designation, James Battantine M.D.

Place of Abode, Cathcart

DATED this Fourth day of December One thousand eight hundred and Sixty Seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorises the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Robison Esq (1) Sheriff Substitute
of the (2) County of Ayr
having had produced to me, with a Petition at the instance of (3) Adam Murdoch
Sorn Village
Certificates under the hands of John Blackwood L.F.P.S
and James Ballantine M.D. , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
David Murdoch residing in Sorn and that the said
David Murdoch is a (5) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said David Murdoch as a Patient into the (6) Public Asylum of Crichton Royal Institution, and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said David Murdoch which accompanied the said Petition.

DATED this fifth day of December One thousand eight hundred and eighty seven. —

J. Robison

To the Superintendent of the (7) Crichton Royal Institution
Asylum of Dumfries. —

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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David Murdoch.

6/12/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward, (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfriesshire *and his Substitutes,—*

The Petition of John Bell Inspector of Poor Moffat humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Atcheson is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Atcheson to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNATURE) John Bell Inspector

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this Ninth (3) day of December One thousand eight hundred and Sixty Seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Atcheson
2. Sex and Age,	Male 35 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Shepherd or Labourer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Reeds Entry Moffat
7. Place where Found and Examined,	
8. Length of time Insane,	
9. Whether first attack,	Third attack
10. Age (if known) on first Attack,	31 years of age
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
12. Duration of existing Attack,	Since he came from last from the asylum May 2d 1866
13. Supposed Cause,	Cannot tell
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	not that I know of
16. Whether Dangerous to others,	not aware
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Moffat Parish
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Anne Atcheson Mother Reeds Entry Moffat None of his family have been Insane that I know of—
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	I know of None

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNATURE)* *Name,* John Bell

DATED this Ninth day of December One thousand eight hundred and Sixty seven years

* To be signed by the Party applying.

P.F.

David Murdoch.

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MEDICAL CERTIFICATE, No. I.

I, the undersigned, James Munro
being a (1) Physician & Surgeon
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Police Station. Moffat Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) John Aitchison. Shepherd or Laborer. Reids Entry. Moffat. Pauper and that the said John Aitchison is a (5) Person of Unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
That Dr. McVicar, the Minister of the Parish is conspiring against him: that he only cut down the tree because the Land on which the tree was was his

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Going into Mr. Hope Johnstones wood & cutting down trees - writing letters claiming property that he thinks belongs to him; as part of the same

(SIGNED) Name and Medical Designation, James Munro. M.D.

Place of Abode, Moffat

DATED this Ninth day of Decr One thousand eight hundred and Sixty seven

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

MEDICAL CERTIFICATE, No. II.

I, the undersigned, William Ramsay McNab
being a (1) Graduate in Medicine of Edinburgh University
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum. Dumfries. Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) John Aitchison. Shepherd or Laborer Moffat. Pauper and that the said John Aitchison is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has delusions regarding his being possessed of property in Moffat. and that the Rev. Dr. McVicar of Moffat is trying to injure him.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
The Inspector of Poor. Moffat. informed me that he was in the habit of writing letters to people in Moffat. claiming property.

(SIGNED) Name and Medical Designation, Lt R. McNab. M.D.

Place of Abode, Southern Counties Asylum. Dumfries

DATED this 10th day of December One thousand eight hundred and Sixty seven.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that John Aitchison is a (1) person of Unsound Mind hereby further certify that the Case of the said John Aitchison is One of Emergency, and I recommend the immediate removal of the said John Aitchison to an Asylum accordingly.

Name, James Munro M.D. & Surgeon

Place of Abode, Moffat

DATED this Ninth day of Decr One thousand eight hundred and sixty seven.

(1) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope — (1) Sher^f Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Bell Inspector of Poor Moffat Certificates under the hands of James Munro and William Ramsay McNal — , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) John Aitchison Shepherd or Labourer Moffat a Pauper and that the said John Aitchison — is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Aitchison as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Aitchison which accompanied the said Petition.

(SIGNATURE) David Boyle Hope

DATED this Tenth — day of December One thousand eight hundred and Sixty Seven

To the Superintendent of the (7) Public *Asylum of* Southern Counties Dumfries

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

1
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John Aitchison.

9/12/67.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes*—

The Petition of Neil Mackenzie Kilchrenan Manse, Inveraray

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Mackenzie your Petitioner's (3) daughter is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Jane Mackenzie to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

Neil Mackenzie

Dated this 13th (4) day of December One thousand eight hundred and 67.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Jane Mackenzie
2. Sex and Age,	Female. 32
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	no occupation.
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Kilchrenan Manse
7. Place where Found and Examined,	do do.
8. Length of time Insane,	about 2 years
9. Whether first Attack,	do
10. Age (if known) on first Attack,	about 22 yrs
11. When and where previously under Examination and Treatment,	Easthouse
12. Duration of existing Attack,	about 2 years
13. Supposed Cause,	not known.
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper.
18. Date of becoming Chargeable,	do
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Neil Mackenzie Kilchrenan Manse Father Sister also pauper insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 13th day of ~~December~~ December One thousand eight hundred and 67

(*To be signed by Party applying*) Neil Mackenzie

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robert McLaren being a (1) a Licentiate of the Faculty of Physicians & Surgeons Glasgow and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Kilchrenan in the County Argyll separately from any other Medical Practitioner visited and personally examined (4) Miss Jane McKenzie Clergyman's Daughter and the said Miss Jane McKenzie is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Wild and unsettled incoherent speech.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) From Her Father and Brother. That she thinks and says she is being tormented by unaqu[illegible] beings.

Name and Medical Designation, Robert McLaren

Place of Abode, Kilchrenan

DATED this 30th day of November One thousand eight hundred and 67.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Alexander Thomson being a (1) Doctor of Medicine of the University of Glasgow and Licentiate of the Faculty of Physicians & Surgeons and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Jane McKenzie Clergyman's Daughter and that the said Jane McKenzie is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Refuses to carry on any continuous conversation; but admits that she falls to pieces sometimes: does nothing & cares for nothing: wants only to sit all day.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Informed by brother that she restless at night & walks about thinking something torments & pursues her: also that she thinks she falls to pieces; sits or walks about in a restless manner all day & cares to do nothing.

Name and Medical Designation, Alex Thomson MD; S

Place of Abode, Dumfries

DATED this Thirteenth day of December One thousand eight hundred and sixty-seven years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Alexander Thomson being (1) a Doctor of Medicine and Surgeon hereby certify, on soul and conscience, that I have this day, at (2) the Southern Counties Asylum in the County of Dumfries, seen and personally examined Jane McKenzie, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Alex Thomson

DATED this Thirteenth day of December One thousand eight hundred and sixty-seven years —

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Lauderdale Maitland Esquire (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Niel MacKenzie Kilchrenan Manse Inverary Certificates under the hands of Robert McLaren and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Jane MacKenzie Daughter of Petitioner and that the said Jane MacKenzie is a (5) Lunatic and a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane MacKenzie as a Patient into the (6) public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane MacKenzie which accompanied the said Petition.

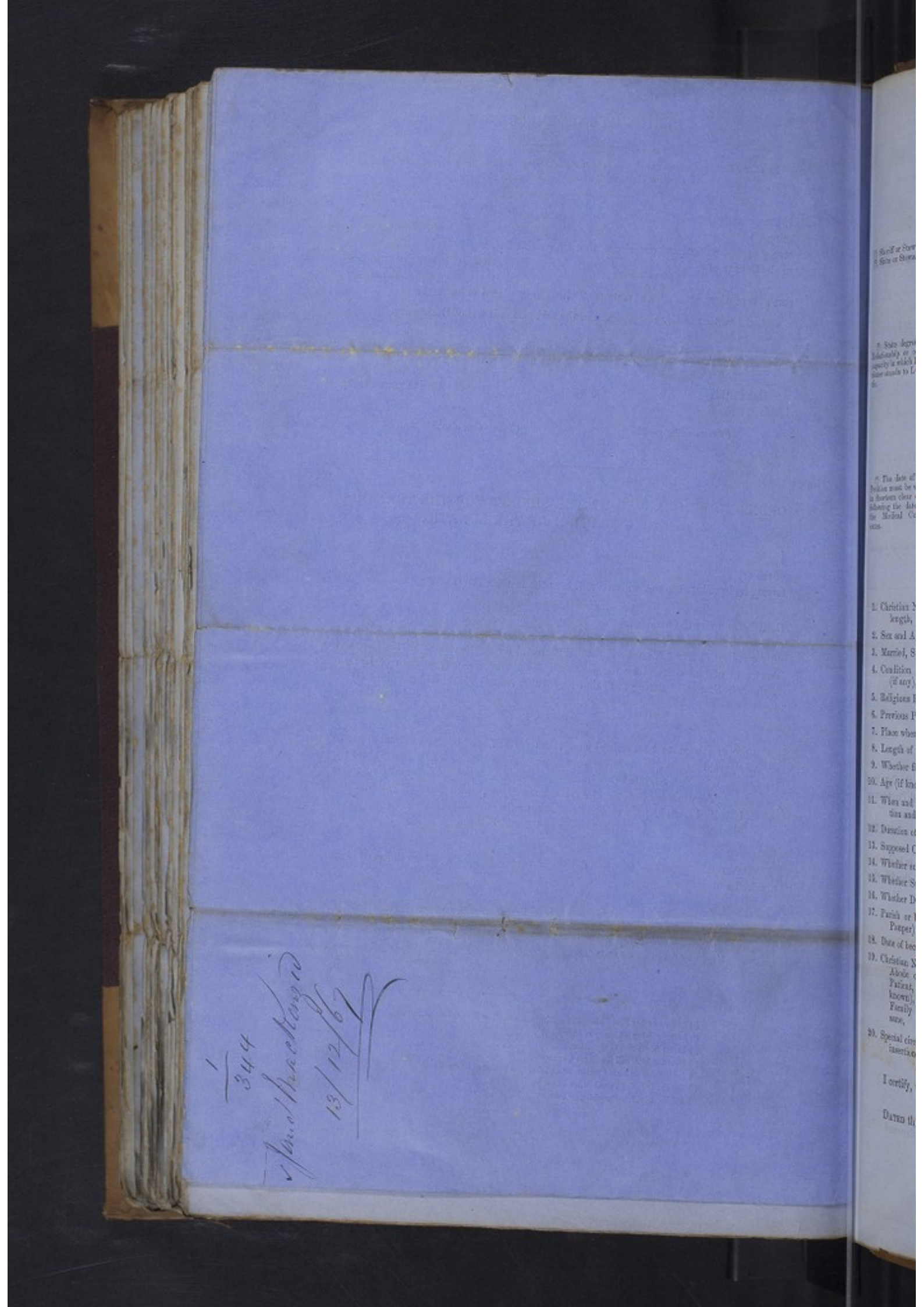
DATED this fourteenth day of December One thousand eight hundred and sixty seven years.

L Maitland

R.S.

To the Superintendent of the (7) public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.



N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff of ~~the~~ (2) Wigtown of Kirkcudbright *and his Substitutes,—*

The Petition of William Henry, Inspector of Poor, Minnigaff humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David Brown, Wood Turner Minnigaff your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said David Brown to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

William Henry Inspector

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Ninth (4) day of December One thousand eight hundred and Sixty Seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	David Brown
2. Sex and Age,	Male; 20 Years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Previously Wood Turner —
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Step End Minnigaff
7. Place where Found and Examined,	Step End Minnigaff
8. Length of time Insane,	Coming on Gradually for some time —
9. Whether first attack,	First Attack
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Has had a Constant attendant for 8 days.
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	Not subject to Epilepsy
15. Whether Suicidal,	Not Suicidal
16. Whether Dangerous to others,	Dangerous to Others
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Minnigaff Parish
18. Date of becoming Chargeable,	7th December 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	James Brown, Step End, Minnigaff Father — No other Member of Family has ever been Insane
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this Ninth day of December One thousand eight hundred and Sixty Seven

(*To be signed by Party applying*) William Henry

P.p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, James Clark.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

being a (1) Licentiate of the Faculty of Physicians a Surgeons Glasgow.

(2) *Physician or Surgeon, or otherwise, as the case may be.*

and being in actual practice as a (2) Surgeon

hereby certify, on soul and conscience, that I have this day, at (3) Step-end Mainsgoff. in the parish of Kirkcudbright in the County of separately from any other Medical Practitioner,

(3) *Insert the street and number of the house (if any), or other like particulars.*

visited and personally examined (4) David Brown, Turner, Step-end, Mainsgoff, in the parish of Kirkcudbright and that

(4) *Insert Designation and Residence, and if a Pauper state so.*

the said David Brown,

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

is a (5) Person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

From his appearance and conversation I am satisfied that he is of unsound mind I have observed that he is of dirty habits.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

His parents — Mrs John Wilson

His language is most obscene and threatening mother; says he will take her life and his sister that he would rather see his mother's brains than attempted to split Mrs Wilson's skull if she did not give him spirits upon his bed clothes & make water on the floor of his bedroom, after having eat some fish-meal. he threw it all into the room thereby,

Name and Medical Designation, James Clark, Surgeon

Place of Abode, Newton Stewart

DATED this Sixth day of December One thousand eight hundred and Sixty seven years.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, James G. Dickson

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

being a (1) Doctor of Medicine - Glasgow University

and being in actual practice as a (2) Doctor of Medicine

(2) *Physician or Surgeon, or otherwise, as the case may be.*

hereby certify, on soul and conscience, that I have this day, at (3) Stepend in the parish of Mainsgoff in the County of separately from any other Medical Practitioner,

(3) *Insert the street, and number of the house (if any), or other like particulars.*

visited and personally examined (4) David Brown, Wood-Turner - pauper - Stepend, in the parish of Mainsgoff and that

(4) *Insert Designation and Residence, and if a pauper state so.*

the said David Brown

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

His appearance and general behaviour are not those of a sane person. He is gloomy; and his habits are dirty. He is the subject of delusion. Refuses to work from the belief that he is labouring under severe bodily infirmities.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

His parents. Mrs John Wilson. has many times used abusive language and has endeavoured to inflict bodily injury when his mother refusing him spirits he threatened to split her skull

Name and Medical Designation, James G. Dickson M.D.

Place of Abode, Newton Stewart

DATED this Sixth day of December One thousand eight hundred and Sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, William Hyacinth Dunbar, (1) Esquire, Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) William Henry Certificates under the hands of James Clark and James G. Dickson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) David Brown, a Pauper, and that the said David Brown is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said David Brown as a Patient into the (6) ~~Southern Counties~~ Asylum of Dumfries and I authorize his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said David Brown which accompanied the said Petition.

DATED this Nineteenth day of December One thousand eight hundred and Sixty Seven years.

W. H. Dunbar

To the Superintendent of the (7) Southern Counties
Asylum of Dumfries.

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.
(6) Public, District, Parochial, *or* Private.
(7) Public, District, Parochial, *or* Private.

1
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Mord Brown
14/12/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire of Dumfries *and his Substitutes,—*

The Petition of Robert Scott Inspector of Poor of the Parish of Rerrick humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Douglas your Petitioner's (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet to the Southern Counties Asylum and to sanction her admission into the the said Asylum.

Rob[t] Scott Inspector of Poor

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

DATED this Thirteenth (4) day of December One thousand eight hundred and Sixty Seven

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Janet Douglas
2. Sex and Age,	Female 33
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Sewer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Rerrick
7. Place where Found and Examined,	Auchencairn
8. Length of time Insane,	Two days
9. Whether first Attack,	No Not known
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	S. Counties Asylum
12. Duration of existing Attack,	Two days
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Rerrick
18. Date of becoming Chargeable,	12th Dec 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Not known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this Thirteenth day of December One thousand eight hundred and Sixty ~~Eight~~ Seven

(To be signed by Party applying) Robt Scott Inspector of Poor

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Gregor Skene being a member of ~~being a~~ (1) the Royal College of Surgeons Edinburgh and being in actual practice as a (2) Surgeon. hereby certify, on soul and conscience, that I have this day, at (3) Auchencairn Pitcaudlighton ~~in the County~~ separately from any other Medical Practitioner, visited and personally examined (4) Janet Douglas. Sewer Auchencairn Pauper and the said Janet Douglas. is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:— ~~She outrageous [illegible] at one~~

1. Facts indicating Insanity observed by myself: (6) That same impressions have appeared to myself.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr. Robert Scott informs me that she appeared to strike him & do bodily harm to him

Name and Medical Designation, Gregor Skene Member of the Royal College Surgeons Edinburgh

Place of Abode, Auchencairn

DATED this 13th day of December One thousand eight hundred and sixty ~~eight~~ seven.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, William Ramsay McNab being a (1) Graduate in Medicine of Edinburgh University and being in actual practice as a (2) physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum. Dumfries Dumfries. in the County separately from any other Medical Practitioner visited and personally examined (4) Janet Douglas. Sewer. Rerr (pauper) and the said Janet Douglas. is a (5) Lunatic. and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is excited and violent: very restless. and quite incoherent.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

Name and Medical Designation, W. R. McNab. M.D.

Place of Abode. Southern Counties Asylum. Du

DATED this 14th day of December One thousand eight hundred and sixty seven.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Gregor Skene being being (1) a Member of the Royal College of Surgeons Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Auchencairn in the County of Kirkcudbright. , seen and personally examined Janet Douglas. , and that the said Janet Douglas person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Gregor Skene

DATED this 13th day of December. One thousand eight hundred and sixty seven.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Stope Advocate (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Scott Inspector of Poor of the Parish of Kirkcudbright Certificates under the hands of Gregor Skene and William Ramsay M.D. both , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Douglas, Senr Auchencairn a pauper and that the said Janet Douglas is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Douglas as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Douglas which accompanied the said Petition.

DATED this Sixteenth day of December One thousand eight hundred and Sixty Seven

David Boyle Stope

To the Superintendent of the (7) Public
Asylum of Southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of Samuel Crockett. Joiner. Lochfoot.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Hislop or Crockett.

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

your Petitioner's (3) Wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes Hislop or Crockett to the Southern Counties Asylum. Dumfries and to sanction her admission into the the said Asylum.

Samuel Crockett

(4) The date of the Order must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 16th. (4) day of December One thousand eight hundred and sixty seven.

STATEMENT.

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

Christian Name and Surname of Patient at length,	Agnes Hislop or Crockett
Sex and Age,	Female. 35.
Married, Single, or Widowed,	Married.
Condition of Life, and previous Occupation (if any),	Joiner's Wife.
Religious Persuasion, so far as known,	Protestant.
Previous Place of Abode,	Lochfoot.
Place where Found and Examined,	Lochfoot & Dumfries.
Length of time Insane,	2 weeks.
Whether first Attack,	not the first.
Age (if known) on first Attack,	27 years.
When and where previously under Examination and Treatment,	In America and in Dumfries.
Duration of existing Attack,	2 weeks.
Supposed Cause,	not known.
Whether subject to Epilepsy,	no.
Whether Suicidal,	not. yes.
Whether Dangerous to others,	yes.
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper
Date of becoming Chargeable,	—
Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of her Family known to be or to have been Insane,	Samuel Crockett. husband. none.
Special circumstances (if any) preventing the insertion of any of the above particulars,	none.

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

DATED this 16th. day of December One thousand eight hundred and sixty seven.

(To be signed by Party applying) Samuel Crockett

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Smith being a (1) Graduate of the University of [illegible] and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Lochfoot Lochrutton Kirkcudbright in the Cou[illegible] separately from any other Medical Practi[illegible] visited and personally examined (4) Agnes Hyslop or Crocket Somers W.C. Lochfoot and the said Agnes Hyslop or Crocket is a (5) person of unsound mind and a proper person to be de[illegible] under Care and Treatment, and that I have formed this opinion upon the foll[illegible] grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Her man[illegible] is wild, becoming at times very much excite[illegible] threatening & sometimes inflicting violence on her husband.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband Samuel Crocket informs me [illegible] she passes sleepless nights, that she has several tim[illegible] threatened to kill him, & that she has several times injured [illegible] He also informs me that she has been [illegible] different times [illegible] fined in the S. C. Asylum Dumfries.

Name and Medical Designation, John Smith M.B.

Place of Abode, 33 Buccleuch St. Dum[illegible]

DATED this 16th day of December One thousand [illegible] hundred and 67.

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Patrick Murray being a (1) Graduate of the University of [illegible] and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Southern Asylum Dumfries in the Count[illegible] Dumfries separately from any other Medical Practitio[illegible] visited and personally examined (4) Agnes Hyslop or Crocket Lochfoot. Pauper and the said Agnes Hyslop or Crocket is a (5) person of unsound mind and a proper person to be detai[illegible] under Care and Treatment, and that I have formed this opinion upon the follow[illegible] grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Is restless and much depressed, nice not answer any questions, goes about wringing her hands, & at times gets exci[illegible]

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The nurse tells me that she refuses her food, also that she [illegible] been several times in the Asylum befor[illegible]

Name and Medical Designation, P. Murray

Place of Abode, Buccleuch St. [illegible]

DATED this 17th day of December One thousand eig[illegible] hundred and 67

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Smith being (1) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (2) Lochfoot - Lochfoot in the County of Dumfries, seen and personally examined Agnes Aislop or Crockett, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Smith M.B. C.M.

DATED this 16th day of December One thousand eight hundred and 67.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Goodfellow (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Samuel Crockett Tower Lochfoot Certificates under the hands of Wm Smith and Patrick Murray, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes Aislop or Crockett, Petitioners wife and that the said Agnes Aislop or Crockett is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Aislop or Crockett as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes Aislop or Crockett which accompanied the said Petition.

DATED this nineteenth day of December One thousand eight hundred and sixty seven

James Goodfellow

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

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Agnes Bislop v Crockett

16/12/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff — *of the* (2) County of Ayr — *and his Substitutes*—

The Petition of Ebenezer Smith Writer Kilmarnock humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Smith Grunbank Kilmarnock your Petitioner's (3) father is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said John Smith to the Crichton Institution Dumfries and to sanction his admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

E Smith

DATED this eleventh (4) day of December — One thousand eight hundred and ~~fifty~~ Sixty seven.

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	John Smith —
2. Sex and Age,	Male. Twenty one years.
3. Married, Single, or Widowed,	
4. Condition of Life, and previous Occupation (if any),	no occupation —
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Grunbank Hill St Kilmarnock
7. Place where Found and Examined,	— Do — Do. —
8. Length of time Insane,	Two years
9. Whether first Attack,	continuous attack
10. Age (if known) on first Attack,	Only nine
11. When and where previously under Examination and Treatment,	None.
12. Duration of existing Attack,	—
13. Supposed Cause,	no cause
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	no.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	—
18. Date of becoming Chargeable,	—
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Guthrie Smith Sheriff Sub. eldest Brother and the Relations both sons of Patient. no member of family insane.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	None.

I certify, that, to the best of my knowledge, the above particulars are correctly stated

DATED this eleventh day of December. One thousand eight hundred and Sixty seven

(*To be signed by Party applying*) E Smith

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

I, the undersigned, James Aitken being a (1) Graduate in Medicine of the University of Glasgow L.R.C.S. 65. and being in actual practice as a (2) Medical Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Green Bank Hill Street — Kilmarnock Ayr in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mr. John Smith, Green Bank and that the said Mr. John Smith is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) that he is Fatuous hardly knowing his wants — not knowing those around him & utterly incapable of taking care of himself

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) his Memorialist & fellow Elder to be his wife & a person who has for two years been his fellow Elder during the night

Name and Medical Designation, James Aitken M.D. L.R.C.S.

Place of Abode, Holland Street Kilmarnock

DATED this tenth day of Dec. One thousand eight hundred and Sixty-seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, or an Idiot, or a person of unsound mind.

I, the undersigned, John Wyland being a (1) Graduate of the University of Glasgow and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Hill Street Kilmarnock Ayr in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mr. John Smith Green Bank the said Mr. John Smith is a (5) person of unsound Mind and that and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) That he is Fatuous — Talks incoherently — He is restless & does not know those around him. —

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) From his wife That he has been Fatuous for two years & incapable of doing anything for himself

Name and Medical Designation, John Wyland M

Place of Abode, Holy Street Kilmarnock

DATED this 11th day of December One thousand eight hundred and sixty seven —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned,
being (1)
hereby certify, on soul and conscience, that I have this day, at (2)
in the County of , seen and personally examined
, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

DATED this day of One thousand eight hundred and

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, Thomas Anderson (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Ebenezer Smith Muir Kilmarnock
Certificates under the hands of James Aitken
and John Borland , being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
John Smith Greenbank Kilmarnock and that the said John Smith is a (5) person of unsound mind – furious
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Smith as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Smith which accompanied the said Petition.

DATED this twelfth day of December One thousand eight hundred and sixty seven

Thomas Anderson

To the Superintendent of the (7) Public
Asylum of Crichton Institution
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1089:
John Smith
Dec. 16/67.

Petition
for
Removal of Mr. J. Smith
to
The Crichton Institution

1867.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

Sheriff or Steward, Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,*—

Carlisle The Petition of William Holywell Wellington humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Holywell your Petitioner's (3) wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Holywell to the Crichton Royal Institution and to sanction her admission into the the said Asylum.

William Holywell

(3) State degree of relationship or other capacity in which Petitioner stands to Lunatic.

(4) The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 17th (4) day of December One thousand eight hundred and sixty seven

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Elizabeth Holywell
2. Sex and Age,	Female aged 31
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Landlady of Hotel
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Carlisle
7. Place where Found and Examined,	
8. Length of time Insane,	Seven months
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Seven months
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of her Family known to be or to have been Insane,	W. William Holywell, English Street Carlisle Husband No
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 17th day of December One thousand eight hundred and sixty seven.

(*To be signed by Party applying*) William Holywell

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Thomson being a (1) Doctor of Medicine of the University of Glasgow, and Licentiate of the Faculty of Physicians and Surgeons of Glasgow and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Mr. Bell's Temperance Hotel – 19 English St. Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Elizabeth Holywell Landlady of Hotel – English Street, Carlisle and that the said Elizabeth Holywell is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Talks in a rambling unconnected manner – thinks some of those around her are about to die suddenly, and that her sister who accompanied her was just then dying in my presence – &c.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Told by her husband and sister – that her manner and habits are entirely changed; that she is incapable of attending to her household duties; and puts into disorder all things in the house she touches; is forgetful – restless and careless about everything that once interested her –

Name and Medical Designation, } Alex. Thomson

Place of Abode, Castle St Dumfries

DATED this Seventeenth day of December One thousand eight hundred and sixty seven years

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g., Member of the Royal College of Physicians in Edinburgh.*

(2) *Physician or Surgeon, or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, James Murray McCulloch being a (1) Physician & Graduate of the University of Edinburgh and being in actual practice as a (2) Physician in Dumfries hereby certify, on soul and conscience, that I have this day, at (3) 19 English Street Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Holywell, Landlady of Hotel, English Street, Carlisle, and that the said Elizabeth Holywell is a (5) Lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) She is silly, rambling almost childish & totally irrelevant in her remarks, that have got no food, that her sister, (who is present), is dreaming then again dying, then dead &c.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Negligent & forgetful, leaves everything half done, imagines absurdly, reiterating questions continuously, thinks the cat is a rabbit, & others equally absurd mistakes

Name and Medical Designation, } James M. McCulloch M.D. &c

Place of Abode, 38 Castle Street, Dumfries.

DATED this 17th day of December One thousand eight hundred and sixty seven years

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Alexander Thomson being (1) A Doctor of Medicine and Surgeon hereby certify, on soul and conscience, that I have this day, at (2) 19 English Street in the County of Dumfries, seen and personally examined Elizabeth Holywell. Landlady of Hotel, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

Alex Thomson MD, Surgeon

DATED this Seventeenth day of December One thousand eight hundred and sixty-seven years.

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James [illegible] (3) Sheriff Substitute of the (4) County of Dumfries having had produced to me, with a Petition at the instance of (5) William Holywell Wellington Inn Carlisle Certificates under the hands of Alexander Thomson and James Murray McCulloch, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (6) Elizabeth Holywell - Petitioners wife and that the said Elizabeth Holywell is a (7) person of unsound mind and a Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Holywell as a Patient into the (8) Public Asylum of Crichton Institution Dumfries and I authorize Her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Holywell which accompanied the said Petition.

DATED this Eighteenth day of December One thousand eight hundred and sixty seven

James [illegible]

To the Superintendent of the (9) Public Asylum of Crichton Royal Institution Dumfries

(3) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(4) State whether a County or Stewartry.
(5) Insert Name and Designation.
(6) Describe him, and if a Pauper, state so.
(7) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(8) Public, District, Parochial, or Private.
(9) Public, District, Parochial, or Private.

I certi

DATED

1090
Elizabeth Holywell
17/12/69

Elizabeth 1090
~~William~~ Holywell
Decemb. 17/69

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) Shire *of* Dumfries *and his Substitutes,*—

The Petition of William Lithgow Insp: of Poor by Torthorwald humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Armstrong or Allan ~~your Petitioner's~~ (3) Pauper is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Janet Armstrong or Allan to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

William Lithgow Insp: of Poor

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 18th (4) day of December One thousand eight hundred and Sixty Seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Janet Armstrong or Allan
2. Sex and Age,	Female. 41 Years
3. Married, Single, or Widowed,	Married but deserted by Husband
4. Condition of Life, and previous Occupation (if any),	Pauper
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Racks. Torthorwald
7. Place where Found and Examined,	Do. Do.
8. Length of time Insane,	
9. Whether first attack,	second attack
10. Age (if known) on first Attack,	36 or 37
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Torthorwald
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	Robert Allan, Son, Racks.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 18th day of Dec. One thousand eight hundred and 67

(*To be signed by Party applying*) William Lithgow
Inspector of Poor P.P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Patrick Murray being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Nacks Torthorwald in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Janet Armstrong or Allan Nacks, Pauper and that the said Janet Armstrong or Allan is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Is very depressed and restless, will not reply to any questions, walks constantly up and down the house.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her son states that she refuses to food, does not sleep, has to be watched, has been in the asylum before

Name and Medical Designation, P. Murray M.D.

Place of Abode, Buccleuch St Dumfries

DATED this 18 day of Dec. One thousand eight hundred and 67

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Smith being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Southern Counties Asylum in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Janet Armstrong or Allan Pauper and that the said Janet Armstrong or Allan is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Is much depressed in spirits. Her speech quite incoherent. refuses to answer questions

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her attendant informs me that she passes a sleepless night. that she refuses food. & that she was previously an inmate of the Asylum

Name and Medical Designation, John Smith M.B.

Place of Abode, Buccleuch St Dumfries

DATED this 19th day of December One thousand eight hundred and 67

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, Patrick Murray being (1) Graduate of the University of Edinburgh hereby certify, on soul and conscience, that I have this day, at (2) Racks Torthorwald in the County of Dumfries, seen and personally examined Janet Armstrong or Allan, and that the said person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

P. Murray Jr M.D

DATED this 17th day of December One thousand eight hundred and 67

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

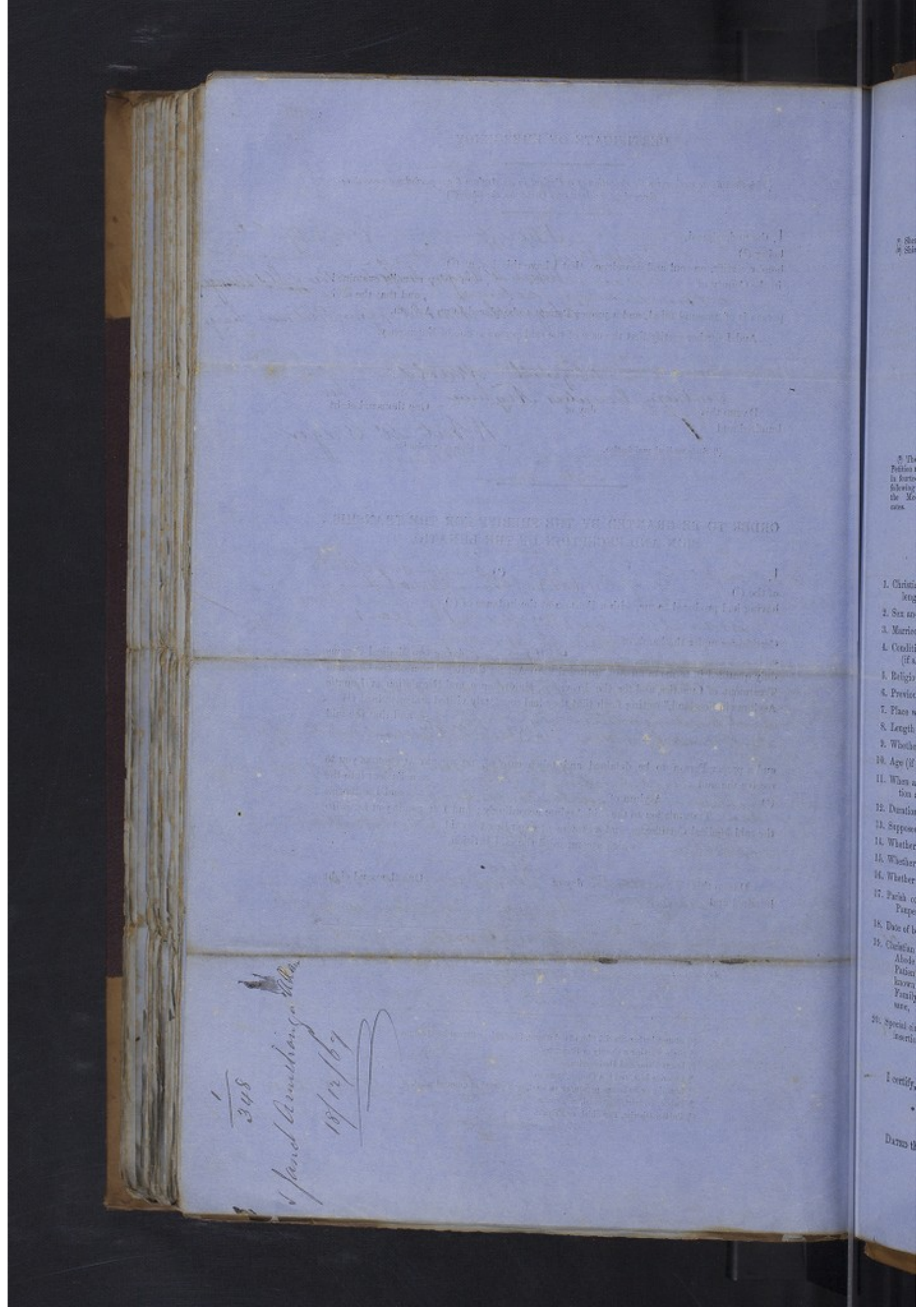
I, James Gordon (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Lithgow Inspector of Poor Torthorwald Certificates under the hands of Patrick Murray and John Smith, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Janet Armstrong or Allan, Racks Torthorwald, a Pauper and that the said Janet Armstrong or Allan is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Armstrong or Allan as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Armstrong or Allan which accompanied the said Petition.

DATED this Nineteenth day of December One thousand eight hundred and sixty seven

James Gordon

To the Superintendent of the (7) Public Asylum of Southern Counties Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.



N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of Robert Mc Gregor, Inspector of Poor of St Mungo humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Arnold, your Petitioner's charge is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Elizabeth Arnold to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(Signature) Robert Mc Gregor

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Eighteenth (3) day of December One thousand eight hundred and Sixty seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Elizabeth Arnold
2. Sex and Age,	Female – 16 years
3. Married, Single, or Widowed,	Single – None
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Parish of Dornock
7. Place where Found and Examined,	Do – St Mungo
8. Length of time Insane,	From Birth
9. Whether first attack,	Has been in an Asylum before
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	S. C. Asylum about 1½ years ago
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	Yes –
15. Whether Suicidal,	No –
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	St Mungo in first place Halifax in Yorkshire is liable
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	John Arnold – Cochman Father – Residence Ettrick Shaw St Mungo –
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(Signature)* Name, Robert Mc Gregor

Dated this day of December One thousand eight hundred and Sixty seven

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, William Ogle Bell Irving being a (1) Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (2) Surgeon Ettrick-holm hereby certify, on soul and conscience, that I have this day, at (3) in the Parish of St. Mungo in the County of Kumfries separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Arnold residing Ettrick-holm a Pauper and that the said Elizabeth Arnold is a (5) Person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Cannot understand, ~~[illegible]~~ simple question

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) (Parents statement) subject to paroxysms of excitement

(SIGNED) *Name and Medical Designation,* W. O. Bell Irving Surgeon

Place of Abode, Bankside

DATED this 17th day of Decr. One thousand eight hundred and 67

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or an* insane person, *or an* idiot, *or a* person of unsound mind.

I, the undersigned, William Macindoe being a (1) Doctor of Medicine of Glasgow University and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Ettrick-Holm in the Parish of St Mungo in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Arnold, residing Ettrickholm, a Pauper and that the said Elizabeth Arnold is a (5) person of unsound Mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Deficiency of Intellect, restless, subject to fit of wandering, and unable to do anything for herself.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Sleepless, violent fits of anger, and excitement

(SIGNED) *Name and Medical Designation,* William Macindoe M.

Place of Abode, Lockerbie

DATED this eighteenth day of December One thousand eight hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that is a (1) hereby further certify that the Case of the said is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, _____

Place of Abode, _____

DATED this day of One thousand eight hundred and

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Snodgrass (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert McGregor Inspector of Poor of St Mungo Certificates under the hands of William Ogle Bell Irving and William Macindoe, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Elizabeth Arnold residing at Ethickholm a pauper and that the said Elizabeth Arnold is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Arnold as a Patient into the (6) public Asylum of southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Elizabeth Arnold which accompanied the said Petition.

R.S.

(SIGNATURE) James Snodgrass

DATED this Nineteenth day of December One thousand eight hundred and sixty seven years.

To the Superintendent of the (7) public
Asylum of southern Counties
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[Form A]

25 & 26 *Vict., Cap.* 54, *Sect.* 14.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward.
(2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County *of* Dumfries *and his Substitutes,—*

The Petition of J. H. Murray, captain R. N. Crofyld Arthuskie humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Murray your Petitioner's (3) wife is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Isabella Murray to the Crichton Royal Institution and to sanction her admission into the the said Asylum.

(3) State degree of Relationship or other capacity in which Petitioner stands to Lunatic.

J. H. Murray

(4) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this 21st (4) day of December One thousand eight hundred and sixty seven.

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Isabel Murray
2. Sex and Age,	Sixty five
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	—
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Anfield, Argyll
7. Place where Found and Examined,	—
8. Length of time Insane,	Just attacked
9. Whether first Attack,	Not the first
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	At this (Crichton Asylum) 5 years ago
12. Duration of existing Attack,	A few days
13. Supposed Cause,	Sudden chill
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	
16. Whether Dangerous to others,	Not
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of Family known to be or to have been Insane,	John Halliburton Murray Anfield, Ardrishaig Argyll Husband of Isabel Murray whose father was afflicted
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

Dated this 21st day of December One thousand eight hundred and sixty seven.

(*To be signed by Party applying*) J. H. Murray

P. p.

MEDICAL CERTIFICATE. No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, *or* a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, John Sibbald
being a (1) Doctor of Medicine of Edinburgh University
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Ardfield, Ardrishaig, Argyll in the County
separately from any other Medical Practitioner visited and personally examined (4) Mrs Isabella Murray and that
the said Mrs Isabella Murray is a (5) person of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6)
She has been insane before, and is now convinced that she is passing into the same condition again. She screams out without apparent reason, and completely changed in character.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Captain D. H. Murray her husband, states that she is more excited than ever he saw her before.

Name and Medical Designation, John Sibbald M.D.

Place of Abode, Lochgilphead

DATED this 21st day of December One thousand eight hundred and sixty seven

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MEDICAL CERTIFICATE. No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.*, Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street, and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, or an insane person, *or* an idiot, or a person of unsound mind.

(6) *State the facts.*

(7) *State the information, and from whom derived.*

I, the undersigned, Alexander Thomson
being a (1) Doctor of Medicine of the University of Edinburgh and Licentiate of the Faculty of Physicians and Surgeons and being in actual practice as a (2) Physician and Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Crichton Royal Institution, Dumfries in the County of Dumfries
separately from any other Medical Practitioner visited and personally examined (4) Mrs Isabella Murray
Ampelea Argyllshire and that
the said Mrs Isabella Murray is a (5) person of unsound mind and a proper person to be detained
under Care and Treatment, and that I have formed this opinion upon the following
grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Has a depressed occupied and wearied appearance - tells me is restless, and cannot sleep at night, and has a confused feeling in the head - and craves for sleeping draughts to help this away —

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Am told by Dr Gilchrist that Mrs Murray has been in this Institution on two former occasions and that when the attacks come on they are attended with depression of symptoms; and that her present appearance indicates an attack

Name and Medical Designation, Alex Thomson M.D. Surg

Place of Abode, Dumfries

DATED this Twenty third day of December One thousand eight hundred and sixty seven years.

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period not exceeding three days, without any Order by the Sheriff.)

I, the undersigned, John Sibbald
being (1) a Doctor of Medicine,
hereby certify, on soul and conscience, that I have this day, at (2) Anfield Ardrishaig
in the County of Argyll, seen and personally examined
Mrs Isabella Murray, and that the said
person is of unsound mind, and a proper Patient to be placed in an Asylum.

And I further certify that the case of the said person is one of Emergency.

John Sibbald

DATED this 21st day of December One thousand eight hundred and sixty seven

(1) State medical qualification. (2) State place of examination.

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Gordon (1) Sheriff Substitute
of the (2) County of Dumpries
having had produced to me, with a Petition at the instance of (3) John Halliburton Murray, Captain R. N. Anfield Ardrishaig Argyleshire
Certificates under the hands of John Sibbald
and Alexander Thomson, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Isabella Murray, Petitioner's wife — and that the said Mrs Isabella Murray is a (5) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Isabella Murray as a Patient into the (6) Public Asylum of Crichton Institution Dumpries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Isabella Murray which accompanied the said Petition.

RS

DATED this Twenty third day of December One thousand eight hundred and Sixty seven

James Gordon

To the Superintendent of the (7) Public
Asylum of Crichton Institution
Dumpries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, Parochial, or Private.
(7) Public, District, Parochial, or Private.

1091
Isabella Murray
21/12/67

Isabella Murray
Decemb. 21/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict. Cap.* 71 *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(*) Sheriff or Steward. (†) Shire or Stewartry.

Unto the Honorable the (*) Sheriff *of the* (†) Shire of Dumfries *and his Substitutes.*

The Petition of John Stark, Insp. of Johnston

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes M.c Donald is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Agnes M.c Donald to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John Stark

(*) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 26th (*) day of December One thousand eight hundred and sixty seven

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STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Agnes M.c Donald
2. Sex and Age,	Female
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	Free Church of Scotland
6. Previous Place of Abode,	Millhill
7. Place where Found and Examined,	Johnston Bridge
8. Length of time Insane,	since Monday last 21st
9. Whether first attack,	first attack
10. Age (if known) on first Attack,	40 years
11. When and where previously under Examination and Treatment,	first time insane
12. Duration of existing Attack,	since Monday 23rd Dec.r
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Johnston
18. Date of becoming Chargeable,	24 Dec.r 1867
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	Thomas M.c Donald, father and Mrs. Mary Lawrie, Mother, Millhill, Johnston. Neither of them have ever been insane nor any of their family
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNED)* *Name,* John Stark

DATED this 26th day of December One thousand eight hundred and sixty seven

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Sanders being a (1) Licentiate of the Faculty of Physicians and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Johnstone Bridge Parish of Johnstone in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Agnes McDonald Johnstone Bridge (Pauper) and that the said Agnes McDonald is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Fancies her parents wish to poison her. Refuses to take medicine under the belief of her parents desiring to poison her.

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7)

Has attacked her sister and attempts to leave the house at all times of the night.

(Signed) *Name and Medical Designation,* William Sanders

Place of Abode, Wamphray

Dated this 25th day of December One thousand eight hundred and sixty seven

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MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e. g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Matthew Charters being a (1) Doctor of Medicine, University Edinburgh and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Johnston Bridge Parish of Johnstone in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Agnes MacDonald Johnstone Bridge (pauper) and that the said Agnes MacDonald is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)

Believes that her father wishes to poison her. And on this account will not remain with him.

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

On various occasions has told her parents, of them desire to poison her.

(Signed) *Name and Medical Designation,* Matthew Charters M.D.

Place of Abode, 4 Crown Circus Glasgow

Dated this 25th day of December One thousand eight hundred and sixty seven

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate.)

I, the undersigned, ~~having already granted the Medical Certificate, No. 1, hereto annexed, to the effect that Agnes McDonald is (1)~~ hereby ~~further~~ certify that the Case of the said Agnes McDonald is One of Emergency, and I recommend the immediate removal of the said Agnes McDonald to an Asylum accordingly.

Name, W. R. McCrab M.D.

Place of Abode, S.C. Asylum Dumfries

DATED this 26th day of December One thousand eight hundred and sixty seven.

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, James Snodon (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Stark Inspector of Poor of the Parish of Johnstone Certificates under the hands of William Sanders and Matthew Charters, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Agnes McDonald, Johnstone Bridge, a Pauper, and that the said Agnes McDonald is a (5) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes McDonald as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Agnes McDonald which accompanied the said Petition.

RS

(SIGNED) James Snodon

DATED this Twenty eighth day of December One thousand eight hundred and Sixty seven.

To the Superintendent of the (7) Public *Asylum of* Southern Counties Ac Dumfries

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(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.

1/350

Agnes McDonald

26/12/67

N.B.—This Form shall remain in the keeping of the Superintendent of the Asylum, after the Order of the Sheriff is obtained.

[FORM A]

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

PETITION TO THE SHERIFF TO GRANT ORDER FOR THE RECEPTION OF A PATIENT INTO AN ASYLUM.

(1) Sheriff or Steward. (2) Shire or Stewartry.

Unto the Honourable the (1) Sheriff *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of John Davidson Free Church Manse Langholm

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Lydia Miller is at present in a state of Mental Derangement, and a proper person for treatment in an Asylum for the Insane. May it therefore please your Lordship to authorize the transmission of the said Lydia Miller ——— to the Royal Crighton Asylum and to sanction her admission into the said Asylum.

(SIGNATURE) John Davidson

(3) The date of the Petition must be within fourteen clear days following the dates of the Medical Certificates.

DATED this 27 (3) day of December One thousand eight hundred and sixty seven —

STATEMENT.

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

1. Christian Name and Surname of Patient at length,	Lydia Falconer, Fraser or Miller
2. Sex and Age,	Female about 55 Years
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Community
7. Place where Found and Examined,	Langholm
8. Length of time Insane,	one week
9. Whether first attack,	no
10. Age (if known) on first Attack,	about 44 Years
11. When and where previously under Examination and Treatment,	at Dumfries 1863 and Glasgow 1865
12. Duration of existing Attack,	one week
13. Supposed Cause,	
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	not at present
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	
18. Date of becoming Chargeable,	
19. Christian Name and Surname, and Place of Abode of nearest known Relative of the Patient, and degree of Relationship (if known), and whether any Member of his Family known to be or to have been Insane,	The Reverend John Davidson Free Church Manse Langholm Son in Law
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	

I certify, that, to the best of my knowledge, the above particulars are correctly stated.

(SIGNATURE)* *Name,* John Davidson

DATED this 27th day of December One thousand eight hundred and sixty seven

* To be signed by the Party applying.

P. P.

MEDICAL CERTIFICATE, No. I.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a Pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Johnstone Carlyle being a (1) Graduate of the University of Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Free Church Manse Langholm in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Lydia Falconer Fraser or Miller and that the said Lydia Falconer Fraser or Miller is a (5) person of unsound mind and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Great incoherence and occasionally irritability: frequent muttering and watchfulness with various morbid delusions

(7) *State the information, and from whom derived.*

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The above facts have also been communicated to me by her son in law the Rev. John Dariason, Free Church Manse, Langholm

(SIGNED) *Name and Medical Designation,* W. J. Carlyle M. D. & Surgeon

Place of Abode, Langholm

DATED this 27th day of December One thousand eight hundred and sixty seven —

MEDICAL CERTIFICATE, No. II.

(1) *Set forth the qualification entitling the person certifying to grant the certificate; e.g.,* Member of the Royal College of Physicians in Edinburgh.

(2) Physician or Surgeon, *or otherwise, as the case may be.*

(3) *Insert the street and number of the house (if any), or other like particulars.*

(4) *Insert Designation and Residence, and if a pauper state so.*

(5) Lunatic, *or* an insane person, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Hugh Grainger Stewart being a (1) Doctor of Medicine of the University of Edinburgh and Member of the Royal College of Surgeons, Edinburgh and being in actual practice as a (2) physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Lydia Falconer Fraser or Miller Widow lately residing at Langholm and that the said Lydia Falconer Fraser or Miller is a (5) person of unsound mind & a lunatic and a proper person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is incoherent in her conversation cannot remember the event that have taken place, has been nutters and excited

(7) *State the information, and from whom derived.*

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Referred to the Matron Mrs Lamond that she says God told her to blow and was very angry if she did not do so. That she would not keep her bed

(SIGNED) *Name and Medical Designation,* H. G. Stewart M.D.

Place of Abode, Newcastle on Tyne

DATED this Thirtieth day of December One thousand eight hundred and sixty seven years —

CERTIFICATE OF EMERGENCY.

(This Certificate authorizes the detention of a Patient in an Asylum for a period of twenty-four hours without the Order of the Sheriff, and shall be granted only in cases in which the urgency of the symptoms renders hazardous the delay necessary to procure a Second Medical Certificate and the Order of the Sheriff.)

I, the undersigned, having already granted the Medical Certificate, No. I., hereto annexed, to the effect that Lydia Johnston Fraser or Miller is a (1) person of unsound mind hereby further certify that the Case of the said Lydia Johnston Miller is One of Emergency, and I recommend the immediate removal of the said Lydia Johnston Fraser or Miller to an Asylum accordingly.

Name, W. J. Carlyle M.D. Surgeon

Place of Abode, Lovingstone

DATED this 27th day of December One thousand eight hundred and Sixty seven.

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

ORDER TO BE GRANTED BY THE SHERIFF FOR THE TRANSMISSION AND RECEPTION OF THE LUNATIC.

I, David Boyle Hope Advocate (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Davidson Free Church Minister Langholm Certificates under the hands of William Johnstone Carlyle and Hugh Grunges Stewart, being two Medical Persons duly qualified in terms of an Act, intituled "An Act for the Regulation of the Care and Treatment of Lunatics, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4) Mrs Lydia Miller Petitioners mother in law and that the said Mrs Lydia Miller — is a (5) person of unsound mind (and a lunatic) and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mrs Lydia Miller as a Patient into the (6) Public Asylum of Crichton Institution Dumfries and I authorize her Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mrs Lydia Miller which accompanied the said Petition.

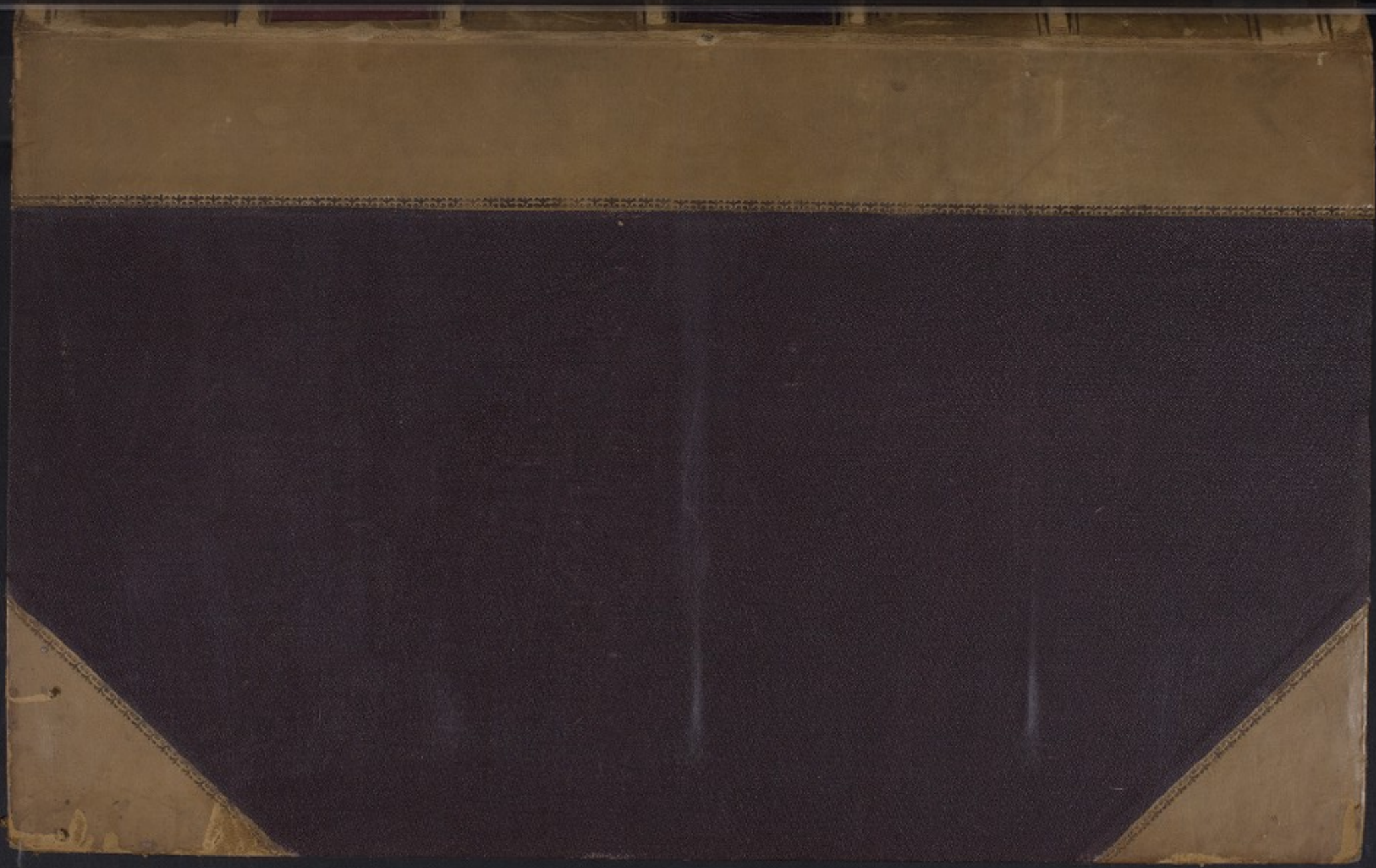
(SIGNATURE) David Boyle Hope

DATED this Thirtieth day of December One thousand eight hundred and Sixty seven.

To the Superintendent of the (7) Public
Asylum of Crichton Institution
Dumfries

(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind."
(6) Public, District, or Private.
(7) Public, District, or Private.

1092.

Lydia Millar

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