Sheriff's Warrants

Publication/Creation

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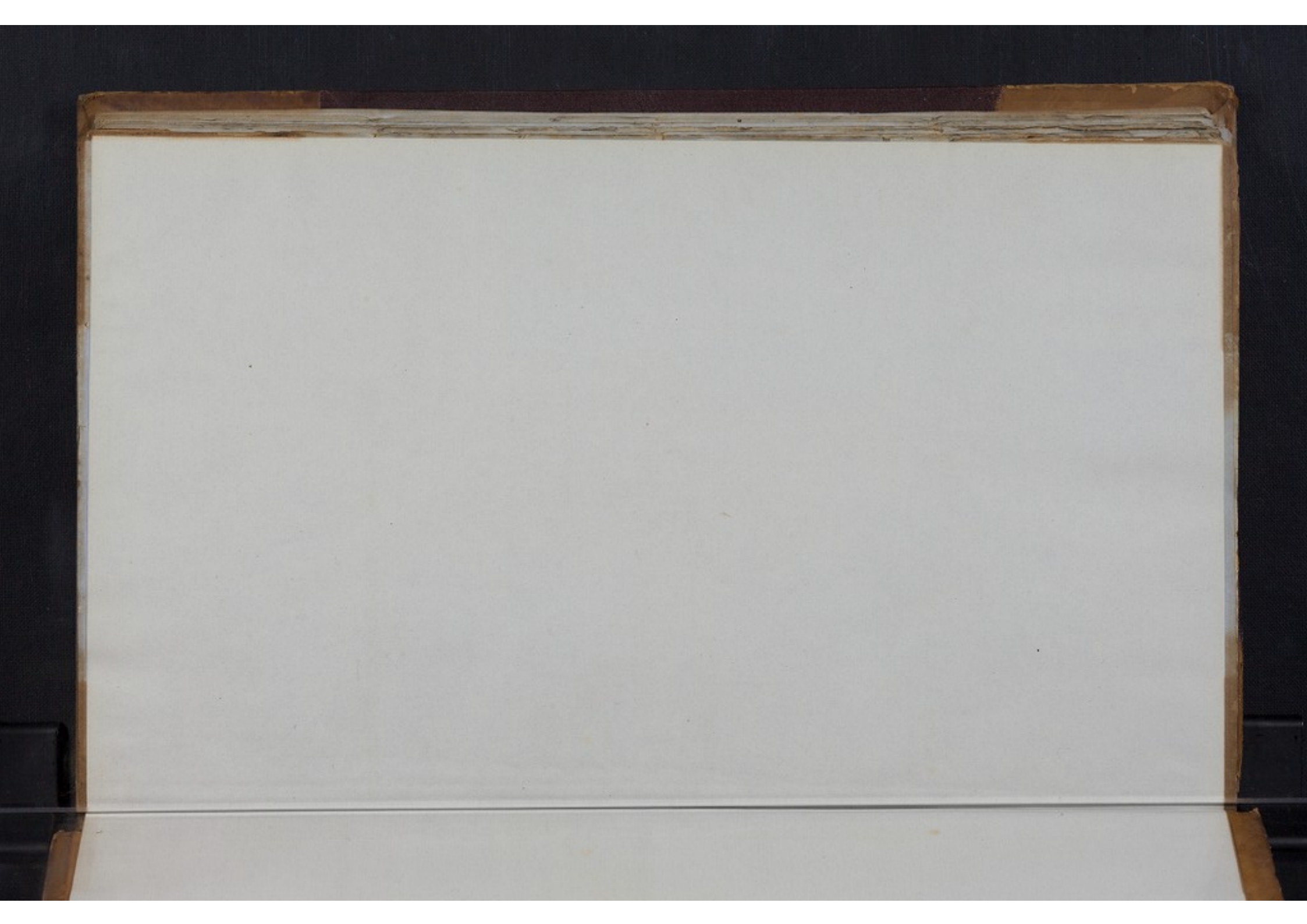

20 & 21 *Vict., Cap.* 71, *Sect.* 34.

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 Elizabeth Martin

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes McMinn 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 McMinn her to the Crichton Royal Institution and to sanction ~~his~~ admission into the said Asylum.

(SIGNED) Elizabeth Martin

(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 January one thousand eight hundred and fifty-eight

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 McMinn
2. Sex and Age,	Female 60
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	House servant
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Mill House Kirkcudbright
7. Place where Found and Examined,	Mill House Dumfries
8. Length of time Insane,	~~About eight months~~ 30 years
9. Whether first Attack,	Not first attack
10. Age (if known) on first Attack,	About 30
11. When and where previously under Examination and Treatment,	In Dumfries Asylum
12. Duration of existing Attack,	About 8 months
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	Yes in Mount ?? No
15. Whether Suicidal,	Threatens
16. Whether Dangerous to others,	Kirkcudbright
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 McMinn sister Mill House Kirkcudbright 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,* Elizabeth Martin

DATED this eleventh day of January one thousand eight hundred and fifty-eight.

* To be Signed by the Party applying.

Lunacy Boards, —Dec.—57.—1240.

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.*

I, the undersigned, James Gilchrist M.D. being a (1) Doctor of Medicine of the University of Edinburgh and being in actual practice as a (2) Medical Superintendent 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) Agnes McMinn and that the said Agnes McMinn 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6)
1. Incoherence
2. Mental excitement

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Threatened destruction to persons and property.

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crichton Institution

DATED this Seventh day of January One thousand eight hundred and fifty eighth

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.*

I, the undersigned, Alexander Postlethwaite being a (1) Graduate 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) Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Agnes McMinn and that the said Agnes McMinn 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.:—

(4) *Insert 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.*

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

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
The attendant informed me that she has been striking one of the patients lately.

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

Place of Abode, Dumfries

DATED this Seventh day of January one thousand eight hundred and fifty eight

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 Goldie (2) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Elizabeth Martin Certificates under the hands of James Gilchrist 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) Agnes McMinn from Millhouse Kirkcudbright and that the said Agnes McMinn 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 McMinn 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 Agnes McMinn which accompanied the said Petition.

(SIGNED) W. Goldie

DATED this 12th day of January one thousand eight hundred and fifty eight

2/6

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

or Substitute.

Henry Gordon Jr. Clk

(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 McMinn
11/11/58

1858
Nov 1

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 John Dinwoodie. Inspector of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Phillis Little. 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 Phillis Little to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John Dinwoodie

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

DATED this Twenty fifth (*) day of January one thousand eight hundred and Fifty Eight

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,	Phillis Little
2. Sex and Age,	Female 57 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Poor – Outdoor worker
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	About 34 years since she was first attacked with insanity
9. Whether first Attack,	No – has long lucid intervals
10. Age (if known) on first Attack,	about 23 years
11. When and where previously under Examination and Treatment,	Dumfries & Southern Counties Asylum
12. Duration of existing Attack,	About 12 hours
13. Supposed Cause,	Grief at her Mothers death primarily
14. Whether subject to Epilepsy,	No –
15. Whether Suicidal,	Yes – Attempted to drown herself
16. Whether Dangerous to others,	No –
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
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 Little. Dumfries. brother – none of his family are insane or were ever known to be so –
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 Dinwoodie Insper.

DATED this Twenty fifth day of January one thousand eight hundred and Fifty Eight

* 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.

(6) *State the facts.*

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

I, the undersigned, William Thos Hall being a (1) Grad late of the Faculty of Physicians & Surgeons Glasgow and College of Physicians &c and being in actual practice as a (2) Physician &c hereby certify, on soul and conscience, that I have this day, at (3) 93 St Michaels Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Phillis Little 93 St Michaels a Pauper and that the said Phillis 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.:—

1. Facts indicating Insanity observed by myself: (6) She talks incoh[erently] says her mind is destroyed but cannot give a reason for it, says to the attempt to destroy life by drowning this morning, suffers from a [illegible]

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mary McAdam with whom she lives testifies as to her attempt at suicide and that she has been formerly confined in a lunatic asy[lum]

(SIGNED) Name and Medical Designation, William Thos Hall [illegible]

Place of Abode, Buccleuch Street Dumfries

DATED this 25th day of January One thousand eight hundred and fifty eight 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, James Murray McCulloch being a (1) Physician &c. of the University of Edinburgh and being in actual practice as a (2) Physician &c. hereby certify, on soul and conscience, that I have this day, at (3) 93 St Michaels Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Phillis Little, 93. St Michael Street a Pauper and that the said Phillis 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.:—

1. Facts indicating Insanity observed by myself: (6) She talks incoherently say, that an evil spirit induced her to attempt to drown herself this morning, that she feels her mind "vacant" & her mind is destroyed, but cannot know or with what &c.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Mary McAdam with whom she lodges, testifies to the attempt suicide this morning, to her having been frequently insane & also, to her having been in an Asylum before &c.

(SIGNED) Name and Medical Designation, James Murray McCulloch M.D. &c

Place of Abode 38 Castle Street, Dumfries

DATED this 25th day of January one thousand eight hundred and fifty eight 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, John Pitcairn Trotter Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dunwoodie
Inspector of Poor Parish of Dumfries
Certificates under the hands of William Marshall
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 (4) Phyllis Little residing in Dumfries a pauper and that the said Phillis 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 Phillis Little as a Patient into the (6) Public Asylum of the 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 Phillis Little which accompanied the said Petition.

(SIGNED) J. Thos. Trotter

DATED this 26th day of January one thousand eight hundred and fifty eight.

To the Superintendent of the (7) Public
Asylum of the Southern Counties Asylum 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.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, or Private.
(8) Public, District, or Private.

Phillis Letter
26/1/58
592
No 2

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,*— Brothers

The Petition of James Manning Brother

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Manning 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 Manning to the Crichton Royal Institution and to sanction his admission into the said Asylum

(SIGNED) James Manning

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

DATED this 22 (3) day of January, one thousand eight hundred and fifty eight

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 Manning.
2. Sex and Age,	Male 53
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	A Teacher
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Rosebank Dongray
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	~~Do~~ about four years
9. Whether first Attack,	Second
10. Age (if known) on first Attack,	28
11. When and where previously under Examination and Treatment,	Crichton Royal Institution
12. Duration of existing Attack,	a week
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. 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,	Gallie James Manning Thurso Rosebank Dongray As other members of family sane.
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 Manning

DATED this twenty seventh day of January one thousand eight hundred and fifty eight.

* To be Signed by the Party applying.

Lunacy Board. Dec.—57.—1200.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, James Gilchrist M.D.

(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) Graduate of the University of Edinburgh

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

and being in actual practice as a (2) Physician

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

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,

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

visited and personally examined (4) Alexander Kaiming from Lauriston Balmoghie and that

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

the said Alexander Kaiming 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 and incoherence

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Inattention to ordinary duties
raising psalms and general excitement

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crichton Institution Dumfries

DATED this twenty seventh day of January One thousand eight hundred and Eighty eight.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, Alexander Gortrude M. Jr. M.

(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) Graduate of the University of Edinb

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

and being in actual practice as a (2) Physician and Surgeo

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

hereby certify, on soul and conscience, that I have this day, at (3) Buccleuch Street, Dumfries Dumfries in the County of separately from any other Medical Practitioner,

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

visited and personally examined (4) Alexander Kaiming from Lauriston Balmoghie and that

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

the said Alexander Kaiming 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 almost constantly singing Psalms and quoting portions of Scripture in an excited and incoherent manner

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
James Kaiming informs me that he has been conducting himself in his manner for several days past

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

Place of Abode, Dumfries

DATED this 27th day of January one thousand eight hundred and Eighty eight

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 Goldie (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) James Haining, Mason, Rosebank, Dougray
Certificates under the hands of James Gilchrist
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) Alexander Haining, from Lauriston Palmaghie and that the said Alexander Haining 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 Haining as a Patient into the (6) Public Asylum of Crichton Royal Institution Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Haining which accompanied the said Petition.

(SIGNED) Wm Goldie

DATED this Twenty seventh day of January one thousand eight hundred and fifty eight.

To the Superintendent of the (7) Public
Asylum of Crichton Royal 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.

Alexander Kinning
27/1/58
593
No 3

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 Elliot Scott, Lanfield unblemished humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Dr. James Drummond Eastwood Wigtownshire 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 Dr. James Drummond —— to the Royal Lunatic Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) John Elliot Scott

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

DATED this ~~twenty tenth~~ 29th (3) day of January one thousand eight hundred and fifty eight

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 Drummond
2. Sex and Age,	Male thirty
3. Married, Single, or Widowed,	single
4. Condition of Life, and previous Occupation (if any),	Doctor of Medicine
	Presbyterian
	Edinburgh title removed to Dumfries
[illegible] found and Examined,	Eastwood Wigt 3 years ago
8. Length of time Insane,	three years
9. Whether first Attack,	no
10. Age (if known) on first Attack,	about 26 or 27
11. When and where previously under Examination and Treatment,	Crichton Institution
12. Duration of existing Attack,	Nine months
13. Supposed Cause,	supposed constitutional
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,	~~Supposed Crieff~~
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 Drummond Crieff a Brother his Uncle. Several members of his fathers 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 Elliot Scott

DATED this 29th day of January one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1098.

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.*

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) Castlewood College Carlaverock in the County of Dumfries, separately from any other Medical Practitioner,

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

visited and personally examined (4) Dr James Drummond a private patient at Castlewood College and that

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

the said Dr James Drummond 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.:—

(6) *State the facts.*

1st Facts indicating Insanity observed by myself: (6)
Mental excitement
Delusions

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
attempt to injure persons and
Want of
Attendance from food

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Castlewood Institution

DATED this twenty seventh day of January One thousand eight hundred and fifty eight

---

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.*

I, the undersigned, James Grieve 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) Dumfries in the Asylum of Dumfries in the County of Dumfries, separately from any other Medical Practitioner,

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

visited and personally examined (4) Dr James Drummond a private patient at Castlewood and that

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

the said Dr James Drummond 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.:— Mental excitement & delusions &

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Elements of mania, Persons & Property &c

(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,* James Grieve M.D.

Place of Abode, Dumfries

DATED this 27th day of January one thousand eight hundred and fifty eight

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 Dr James Drummond is ~~all~~ an insane person hereby further certify that the Case of the said Dr James Drummond is One of Emergency, and I recommend the immediate removal of the said Dr James Drummond to an Asylum accordingly.

Name, James Gilchrist, M.D.

Place of Abode, Crichton Institution Dumfries

DATED this twenty seventh day of January one thousand eight hundred and fifty eight

(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 Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Eliot Scott, Seafield, Auchtergaven Certificates under the hands of James Gilchrist M.D. and James Greer, 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) Dr James Drummond at Easthorpe Cottage and that the said James Drummond is an insane person & of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Dr James Drummond as a Patient into the (5) 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 Dr James Drummond which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this 28th day of January one thousand eight hundred and fifty eight

To the Superintendent of the (7) Public *Asylum of* 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, or Private.
(7) Public, District, or Private.

Dr. Lucius Brunard
27/1/54
190
No 1

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 Alexander Cochran

Grange
Dir Chair

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Cochrane 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 Cochrane to the ~~Crichton~~ Royal ~~Institution~~ and to sanction his admission into the said Asylum.

(SIGNED) Alexander Cochran

(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 January one thousand eight hundred and fifty eight

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 Cochrane
2. Sex and Age,	Male 26
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Writer and Bank agent
5. Religious Persuasion, so far as known,	Estab. Church
6. Previous Place of Abode,	Grange Ayrshire.
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	15 months
9. Whether first Attack,	first
10. Age (if known) on first Attack,	24
11. When and where previously under Examination and Treatment,	Glasgow Asylum / Patient removed
12. Duration of existing Attack,	~~1857~~ 15 months / never recovered
13. Supposed Cause,	Masturbation & Mental anxiety
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. 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 Cochrane Father Grange Ayrshire Brother of his Mother 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,* Alexander Cochran

DATED this 29 day of January one thousand eight hundred and fifty eight

* 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.*

I, the undersigned, James Gilchrist M.D. being a (1) graduate 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) Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Alexander Cochrane of Grange Ayrshire and that the said Alexander Cochrane 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.:—

(4) *Insert 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.*

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

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

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

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crichton Institution Dumfries

DATED this 29th day of January One thousand eight hundred and fifty eight

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.*

I, the undersigned, John Rhiscolm M. D. Edinburgh ~~Physician~~ Graduate of Edin. University being a (1) Physician 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) Alexander Cochrane of Grange Ayrshire and that the said Alexander Cochrane 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6)
are depression - Loss of Memory & confusion -

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

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

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

Place of Abode, Buccleuch Street Dumfries

DATED this 29th day of January one thousand eight hundred and fifty eight

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) Alexander Cochran of Grange, Agriculture Certificates under the hands of James Gilchrist and John Chisholme, 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 Cochran, one of the Petitioners and that the said Alexander Cochran 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 Cochrane as a Patient into the (6) Public Asylum of the Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Cochrane which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this 29th day of January one thousand eight hundred and fifty eight

To the Superintendent of the (7) Public *Asylum of* Crichton Royal 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.

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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 William Wells Senior

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that my Son William Wells 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 Junr. to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) William Wells

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

DATED this Thirtieth (3) day of January one thousand eight hundred and fifty eight.

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 Wells
2. Sex and Age,	Male, 25 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Teacher
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Lochmaben
7. Place where Found and Examined,	Lochmaben
8. Length of time Insane,	Four Weeks
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	25 years
11. When and where previously under Examination and Treatment,	None
12. Duration of existing Attack,	Four Weeks
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Not particularly 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 Wells, Lochmaben Father, No other Member to affect
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 Wells

DATED this 30th day of January one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—37.—1000.

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 Edward Griffith Colpoys [illegible]
being a (1) Member of the Royal College of [illegible]
in Edinburgh
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Castle
Douglas in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) William Wells Jr.
Castle Douglas and that
the said William Wells Jr 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 Conduct—this person has a tendency to throw away & break any thing he gets hold of—

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

From [illegible]

(SIGNED) *Name and Medical Designation,* Edward G. Griffith [illegible]

Place of Abode, Lochmaben

DATED this fourth day of January One thousand eight
hundred and fifty eight

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 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 of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) William Wells Jr Lochmaben
Lochmaben a pauper patient and that
the said William Wells 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)

Abstraction Incoherence Excitement

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

General Violence

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode Crichton Institution Dumfries

DATED this first day of February one thousand eight
hundred and fifty eight

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 William Wells Junior is a (1) person of unsound mind, hereby further certify that the Case of the said William Wells Jr. is One of Emergency, and I recommend the immediate removal of the said William Wells Junior to an Asylum accordingly.

Name, Edward G. Dickson M.D.

Place of Abode, Dalgonar

DATED this thirtieth day of January one thousand eight hundred and fifty eight

(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 Fyffe Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Wells Junior Certificates under the hands of William Edward Griffith & Geo. 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) William Wells junior and that the said William Wells 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 William Wells junior 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 William Wells junior which accompanied the said Petition.

(SIGNED) John P. Fyffe

DATED this 1st day of Febry one thousand eight hundred and fifty eight

To the Superintendent of the (6) 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, or Private.
(7) Public, District or Private.

William Bell
1/2/58

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Nov

(*) Sheriff or Sher
(†) Clerk of Peace

(*) The date of t
Notice must be wi
is fourteen clear da
following the date
the Medical Certi
sion.

1. Christian Nam
bands,

2. Sex and Age,

3. Married, Single

4. Condition of L
(if any),

5. Religious Persu

6. Previous Place

7. Place where Fo

8. Length of time

9. Whether first A

10. Age (if known)

11. When and where
lum and Trea

12. Duration of exi

13. Supposed Cause,

14. Whether subject

15. Whether Suicida

16. Whether Dangero

17. Parish or Union
Pauper] in Cl

18. Christian Name
Abode of near
Patient, and
known), and
Family known
case,

19. Special circumsta
insertion of an

I certify, that,

DATED this

Sidney Bond.—Dec.

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 Carlyle Inspector of Poor Gretna

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Bryson wife of Matthew Bryson 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 Bryson to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(SIGNED) William Carlyle

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

DATED this Seventeenth (3) day of February one thousand eight hundred and Fifty eight 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,	Janet Bryson
2. Sex and Age,	Female, 45 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Railway porter's wife
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Lochmaben parish
7. Place where Found and Examined,	Gretna Junction
8. Length of time Insane,	Less or more for four months
9. Whether first Attack,	Had 2 slight attacks before at 8 years & 17 years ago respectively
10. Age (if known) on first Attack,	Twenty eight
11. When and where previously under Examination and Treatment,	At Kirkbean but never required any restraint till this last attack
12. Duration of existing Attack,	It commenced mildly about 2 months before she was delivered of a child which is now eleven weeks old
13. Supposed Cause,	No cause can be given for her affliction
14. Whether subject to Epilepsy,	Not subject to Epilepsy
15. Whether Suicidal,	Has threatened her own life but not others'
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Gretney
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,	Matthew Bryson, husband
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None on either side insane e.g. belonging to the husband or wife

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

(SIGNED)* *Name,* William Carlyle

DATED this Thirty first day of January one thousand eight hundred and Fifty Eight

* 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, James Carruthers being a (1) Surgeon, & 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) Gretna Junction in the parish of Gretna in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Janet Bryson wife of Matthew Bryson Railway porter, Gretna Junction She being a pauper and that the said Janet Bryson 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) going about the house quite restless sometimes depressed & sometimes elevated in spirits declaring her mind is troubled but cannot assign any reason why and saying her illness is trifling in comparison to her mental distress

2. Other facts (if any) indicating Insanity communicated to me by others: (7) her husband and some of her neighbours state that she has talked of drowning herself hanging herself and in other ways committing suicide for she is mostly in low spirits

(SIGNED) *Name and Medical Designation,* James Carruthers, Surgeon, L.R.

Place of Abode, Kirkpatrick Fleming

DATED this Thirty first day of January One thousand eight hundred and Fifty Eight

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 M.D. being a (1) graduate & Member 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) Janet Bryson Female Gretna and that the said Janet Bryson 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)
Alternate depression and excitement Complains of persecution

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

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode Crichton Royal Institution Dum

DATED this second day of February one thousand eight hundred and fifty eight.

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 Bryson is a (1) person of unsound mind hereby further certify that the Case of the said Janet Bryson is One of Emergency, and I recommend the immediate removal of the said Janet Bryson to an Asylum accordingly.

Name, James Carruthers

Place of Abode, Kirkpatrick Fleming

DATED this thirty first day of January one thousand eight hundred and fifty Eight

(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 Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Cargle Inspector of Poor, Gretna Certificates under the hands of James Carruthers 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) Janet Bryson, at Gretna and that the said Janet Bryson 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 Bryson as a Patient into the (6) Public Asylum of Crichton Royal Institution 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 Bryson which accompanied the said Petition.

(SIGNED) John Pt. Foster

DATED this Second day of February one thousand eight hundred and fifty eight

To the Superintendent of the (7) Public *Asylum of* Crichton Royal 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.

Land Bypass
1/2/54

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105

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 Substitute of the (2) County of Durham *and his Substitutes,*—

The Petition of George Thurlow Todd Inspector Lunacy

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Graham 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 Graham to the Northern Counties Asylum and to sanction ~~his~~ her admission into the said Asylum.

(SIGNED) George T Todd

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

DATED this Thirtieth (*) day of January one thousand eight hundred and Fifty-Eight

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 Graham
2. Sex and Age,	Female — 78 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,	Protestant
6. Previous Place of Abode,	Longhirst
7. Place where Found and Examined,	Longhirst
8. Length of time Insane,	Since 30th December 1857
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	76 years
11. When and where previously under Examination and Treatment,	Longhirst
12. Duration of existing Attack,	From the 30th December 1857
13. Supposed Cause,	Incident to old age
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,	Longhirst
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,	Her daughter Mrs Francis Graham, No 16 Charles Street Gateshead. † Unknown
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,* George T Todd

DATED this Thirtieth day of January one thousand eight hundred and Fifty Eight

* To be Signed by the Party applying.

Lunacy Board. — Dec.—57.—1260.

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 Gayle M. D. 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) the Casual Poor house, Langholm in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Margaret Graham a Pauper of this Parish and that the said Margaret 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) Fits of violence and delusion; frequently quits the house and wanders about in a wild and distracted state of mind.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The (Mentioned facts have also been stated fully time to time by Mrs Ewart who has charge of Graham previous to her being received on the Poor House) as well as by several of the Neighbours.

(SIGNED) *Name and Medical Designation,* W. J. Gayle M.D. Surgeon

Place of Abode, Langholm

DATED this first day of February One thousand eight hundred and forty eight.

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 Surgeon, Licentiate of the Royal College of Surgeons of Edinburgh being a (1) Surgeon and being in actual practice as a (2) hereby certify, on soul and conscience, that I have this day, at (3) the Casual Poor House Langholm of Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Margaret Graham a Pauper of the Parish of Langholm and that the said Margaret Graham is a (5) person of deranged Judgement and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:— personal knowledge, and observation.

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) the imaginary, wanky, delusions, discontent from a changed worldly circumstances, disappointed hopes, a want of success in her begging propensities; decrease of sexual power affected.

(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,* William Maxwell Surgeon Langholm.

Place of Abode,

DATED this first day of February one thousand eight hundred and forty eight.

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) George Johnstone Todd, Inspector of Poor, Langholm Certificates under the hands of William Johnstone, 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) Margaret Graham a Pauper of the parish of Langholm and that the said Margaret 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 Margaret Graham as a Patient into the (6) Public Asylum of the Southern Counties Asylum 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 Margaret Graham which accompanied the said Petition.

(SIGNED) J. Pitcairn Trotter

DATED this Second day of February one thousand eight hundred and fifty eight years

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

---

(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 Graham
12/10/55
25
106

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 Dinwoodie, Inspector of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Sally or Sarah Mc. Ravie 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 Sally or Sarah Mc. Ravie to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John Dinwoodie, Inspector

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

DATED this Second (3) day of February one thousand eight hundred and fifty Eight

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,	Sally or Sarah Mc. Ravie
2. Sex and Age,	Female — above 60 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Poor — Seamstress
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Shakespeare St. Dumfries
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	Not known -
9. Whether first Attack,	No —
10. Age (if known) on first Attack,	No —
11. When and where previously under Examination and Treatment,	Dumfries & Southern Counties Asylum
12. Duration of existing Attack,	about a fortnight
13. Supposed Cause,	Alleged to be from a fright
14. Whether subject to Epilepsy,	No -
15. Whether Suicidal,	No —
16. Whether Dangerous to others,	She is rather violent at times
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
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,	Cornelius Mc. Farren. Dumfries a Soldier single and of sound mind John Ravie. Maxwelltown. a brother None of his family insane, nor those of any other relations so far as known
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 Dinwoodie, Inspector

DATED this Second day of February one thousand eight hundred and Fifty Eight

* 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 Marshall
being a (1) Licentiate of the Faculty of Physicians as the Royal College of Edinburgh
and being in actual practice as a (2) Physician &c
hereby certify, on soul and conscience, that I have this day, at (3) Shakespeare Street Dumfries
in the County of Dumfries
separately from any other Medical Practitioner
visited and personally examined (4) Sally McKenzie Pauper
the said Shakespeare Street Dumfries and that
Sally 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.:—She is very violent in her speech
1. Facts indicating Insanity observed by myself: (6) Imagines the persons
around her are going to injure her & tries to be
revenged

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
She talks incoherently wanders (by times) at times
becomes outrageous and threatens to strike
in attendance on her states little

(SIGNED) *Name and Medical Designation,* William Marshall M.D. &c.

Place of Abode, Shakespeare Street Dumfries

DATED this 15th day of February One thousand eight
hundred and fifty eight

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 Borthwick
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) Shakespeare
Street Dumfries
in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Sally Mc Kenzie Pauper
Shakespeare Street Dumfries
the said Sally Mc Kenzie 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) Refused her
Spirits, Nervous apprehensive & very ill approach
ing for fear of their touching her

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Keeps little knuckles about at night
often mutters to herself violent at times

(SIGNED) *Name and Medical Designation,* Alexander Borthwick M.D.

Place of Abode, Shakespeare Street Dumfries

DATED this 15th day of February one thousand eight
hundred and fifty eight

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 Tollo Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dunwoodie
Inspector of Poor Dumfries
Certificates under the hands of William Marshall
and Alexander Battersby, 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)
Sally McRaney, a pauper in Dumfries and that the said
Sally McRaney 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 Sally McRaney 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 Sally McRaney which accompanied the said Petition.

(SIGNED) John P. Tollo

DATED this Second day of February one thousand eight hundred and fifty eight

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.

Louis McMann
30 3/12/68
592
Nov 1

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 McLellan Inspector of Poor of the parish of Annan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Nancy Herbertson at Rigg Gretna 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 Herbertson to the Southern Counties Asylum at Dumfries, and to sanction his admission into the said Asylum.

(SIGNED) John 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 Eleventh (3) day of February one thousand eight hundred and fifty eight

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 Herbertson
2. Sex and Age,	Female 47 years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Weaving Woman Piece
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Rigg Parish of Gretna
7. Place where Found and Examined,	Being a pauper chargeable to the Parish of Annan examined in Annan by Dr Grant
8. Length of time Insane,	From Birth idiotic and imbecile
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,	
14. Whether subject to Epilepsy,	Not subject to Epilepsy
15. Whether Suicidal,	No
16. Whether Dangerous to others,	At times rather irritable
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Annan
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 Herbertson Schoolmaster Free Church School Burnhead Kirkpatrick Fly her 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,* John McLellan Insp. of Poor

DATED this Eleventh day of February one thousand eight hundred and fifty eight years

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1260.

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, William Grant being a (1) Member of the Royal College of Surgeons Edinr and being in actual practice as a (2) Surgeon 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) Nancy Herbertson, residing at Rigg, Parish of Gretna and that the said Nancy Herbertson 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) Been an imbecile from her Birth

(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,* Wm Ewart Surgeon

Place of Abode, Edward Street Annan

DATED this 11th day of Feby One thousand eight hundred and fifty eight.

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, James Calderwood 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 in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Nancy Herbertson a pauper resident at Rigg Parish of Gretna and that the said Nancy Herbertson 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 mental deficiency

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) An idiot. occasionally irritable and violent - so stated by Thomas McLellan the Inspector thro

(SIGNED) *Name and Medical Designation,* James Calderwood M.D.

Place of Abode, Crichton Institution Dumfries

DATED this Eleventh day of February one thousand eight hundred and fifty eight.

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 Rollo (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John McLellan Inspector of Poor for the parish of Annan Certificates under the hands of William Ewart 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) Nancy Herbertson alt Rigg, Gilsna and that the said Nancy Herbertson 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 Nancy Herbertson 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 Nancy Herbertson which accompanied the said Petition.

(SIGNED) John P. Rollo

DATED this Eleventh day of February one thousand eight hundred and fifty eight 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.

Mary Anderson
11/2/58

528

108

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 Richard Dickson Roddick

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that The Revd James Roddick 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 Revd James Roddick to the Dickson Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Richard Dickson Roddick

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

DATED this Twenty ninth day of January one thousand eight hundred and Fifty Eight

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 Roddick
2. Sex and Age,	Fifty nine
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Minister
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Present Place of Abode,	Gretna Manse
7. Place where Found and Examined,	Do and elsewhere
8. Length of time Insane,	Four months
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	42
11. When and where previously under Examination and Treatment,	1851 Dumfries Dickson R. Institution
12. Duration of existing Attack,	
13. Supposed Cause,	Constitutionally inclined
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Inclines to be so
16. Whether Dangerous to others,	Violent threats
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,	Richard D. Roddick Merchant Wisbeach Cousin residing at Gretna Manse Dont Know of any
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,* R. D. Roddick

DATED this Twenty Ninth day of January one thousand eight hundred and Fifty Nine

* To be Signed by the Party applying.

Surrey Board, Dec.—27.—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, James Greene
being a (1) Graduate of Medicine & Licentiate 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) The Manse of Gretna
in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) The Revd James Roddick
and that the said Revd James Roddick 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) decided delusions as to his Wife and Daughters conspiring against him, acts of violence, threatening bodily injury to different members of his family, &c, &c.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Intemperate habits and previous insanity communicated by Mrs Roddick, & parishioners Gretna.

(SIGNED) Name and Medical Designation, James Greene M.D.
Place of Abode, Dumfries

DATED this 29th day of January One thousand eight hundred and Fifty eight

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 Black Rogie
being a (1) Physician & Surgeon, Edinr
and being in actual practice as a (2) General practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Empress House Thistle Park Annan
in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) The Revd James Roddick
of Gretna.
and that the said Revd James Roddick 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 delusions that his wife and family are conspiring against him, that they are mentally deranged & require treatment. Habits are intemperate & uncontrollable; temper is very irascible, easily becomes violent when a strong disposition which enables to detect weapons manifests itself. he always in a state of wild excitement. Previous insanity.

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Evidence of family, & Medical men who have known him especially Medical attendants. Information from wife and many parishioners of Gretna.

(SIGNED) Name and Medical Designation, Agnes Black Rogie M.D.
Place of Abode, Thistle Park. Annan

DATED this 29th day of January one thousand eight hundred and fifty eight

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 Paterson Proctor Sheriff Substitute
of the (2) County of Dumfries
having had produced to me with a Petition at the instance of (3) Richard Dickson Roddick
Certificates under the hands of James Greene
and Agnew Black Bosgo, 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 (the Reverend James Roddick of Sretna and that the said Reverend James Roddick is a (4) Person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Reverend James Roddick as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Reverend James Roddick which accompanied the said Petition.

(SIGNED) John P. Proctor

DATED this First day of February one thousand eight hundred and Seventy eight

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.

Dumfries 30 January 1838. Having considered the foregoing Petition presented in name of Richard Dickson Roddick one of the Allegation that the Reverend James Roddick Minister of [illegible] is in a state of mental derangement, and praying for authority by the Court for his transmission to and admission into the Crichton Royal Institution for Lunatics, Dumfries; In respect the Sheriff Substitute has received a letter, dated 13th January current from the said Reverend James Roddick craving to be heard in opposition to any such warrant, and that due enquiry should be made before granting any such and in respect also that a Caveat has been presented in the Clerks office in name of Sir John Heron Maxwell of Springkell Baronet stating that he has objections also to any such warrant x from being granted & craving to be heard x Remits said Petition and relative Statements and Medical Certificates thereto appended with the said Letter and Caveat to the Pror Fiscal of Court, and appoints him to make such full enquiry into the whole circumstances as will enable the Court to decide whether or not the prayer of the said Petition should be granted

x Before further procedure

Dumfries 1 February 1838. Having resumed consideration of the Petition with precognition taken by the Pror Fiscal and report by him that there is no doubt of the insanity of the Reverend James Roddick and that there is great danger in allowing him to be at large And having ordered the Clerks of Court to prepare the Statutory Warrant for signature of this date; and assigned this date to be made to Sir John Heron Maxwell Baronet or his Agent that the danger of allowing the said James Roddick to be at large rendered the issuing of the said Warrant urgent & precluded the possibility of hearing him under the Caveat

492
No 3

Rev. James Roddick
13/2/38

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 Substitute *of the* (2) County of Dumfries *and his Substitutes,—*

The Petition of Thomas Davidson Overseer, Balgray

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Catherine Davidson 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 Davidson to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Thomas Davidson

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

DATED this 11th (3) day of February one thousand eight hundred and Fifty Eight

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 Johnstone or Davidson
2. Sex and Age,	Female Fifty years of age
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	employed in the duties attaching to the wife of a farmer
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	— Balgray
7. Place where Found and Examined,	
8. Length of time Insane,	— Five months
9. Whether first Attack,	— The third attack
10. Age (if known) on first Attack,	— 47
11. When and where previously under Examination and Treatment,	— Since the first attack
12. Duration of existing Attack,	— Five months
13. Supposed Cause,	— Cessation of Catamenia
14. Whether subject to Epilepsy,	— no
15. Whether Suicidal,	— Has attempted self destruction
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,	James Johnstone farmer Craighouse Parish of Middlebie, Brother to the patient. None of his family or relatives have ever been known to be afflicted
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 Davidson

DATED this 11th day of February one thousand eight hundred and Fifty Eight

* 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.*

I, the undersigned, James Thomson Wilson being a (1) Surgeon Licentiate of R. C. of Surgeon Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Balgray in the County of Dumfries separately from any other Medical Practitioner,

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

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

visited and personally examined (4) Catharine Thomson or Davidson and that the said Catharine Davidson 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 conversation and conduct to strongly characteristic of insanity, mischievous and attempts at self destruction, religious delusions &c

(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,* Jas Wilson Surgeon

Place of Abode, Lockerbie

DATED this 11th day of February One thousand eight hundred and Fifty eight

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.*

I, the undersigned, George Clark Wilson being a (1) Surgeon, Lic of Fac of Phy 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) Balgray in the County of Dumfries separately from any other Medical Practitioner,

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

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

visited and personally examined (4) Catherine Thomson or Davidson, and that the said Catherine Davidson 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 restless conduct is that of an insane person she considers that the devil is sometimes with her and sometimes God she gets very excited and says a great many foolish things

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Her husband told me that she had frequently attempted suicide,

(SIGNED) *Name and Medical Designation,* Geo Wilson Surgeon

Place of Abode, Lockerbie

DATED this 11th day of February one thousand eight hundred and Fifty eight

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 Catherine Davidson is a (1) person of unsound mind hereby further certify that the Case of the said Catherine Davidson is One of Emergency, and I recommend the immediate removal of the said Catherine Davidson to an Asylum accordingly.

Name, Jas. Wilson Surgeon

Place of Abode, Corkerbri

DATED this 11th day of February one thousand eight hundred and Fifty eight

(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 Hollo (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Thomas Davidson Overseer, Bolgray Certificates under the hands of James Thomson Wilson and George Clark 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) Catharine Davidson wife of the said Thomas Davidson and that the said Catharine 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 Catharine Davidson 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 Catharine Davidson which accompanied the said Petition.

(SIGNED) John P. Hollo

DATED this Twelfth day of February one thousand eight hundred and fifty eight years.

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.

Catherine Davidson
15/2/68

599

109

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 Welsh Inspector of Poor Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David Bell a Young 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 David Bell a Young to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Joseph Welsh Inspector of Poor Dumfries

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

DATED this 19th (3) day of February one thousand eight hundred and Eighty Eight year

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 Bell a Young
2. Sex and Age,	Male and 23 years of Age
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	by Trade a Brewer
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	Private Cell Maxwelltown
8. Length of time Insane,	Three or four days
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	23 years
11. When and where previously under Examination and Treatment,	No Where
12. Duration of existing Attack,	Three or four days
13. Supposed Cause,	Being in jail & religious remorse
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	Slight tendency
16. Whether Dangerous to others,	Do
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Inspector in the Ocean time
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,	Susan Mc Connick his wife Know heard of any of his family being insane Has no relations living in this place
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, Joseph Welsh Inspector of Poor

DATED this 19th day of February one thousand eight hundred and 88

* To be Signed by the Party applying.

Lunacy Board.—Dec.—87.—2216.

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 Bishholm
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) Broadstairs Clif
Macmillerton - Grosvenor
Kirkcudbright
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) David Bell a Young - a pauper
residing in Broadstairs Clif
and that
the said David Bell a Young 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)
Agitation & Terror — Delusions —

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
his people informs me that he was
afraid to ~~his~~ allow sharp instruments
to remain in in the house

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

Place of Abode, Broadstairs Heat

DATED this 19th day of February One thousand eight hundred and fifty eight

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 Borthwick
being a (1) graduate 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) Broadstairs Clif
Macmillertown Grosvenor
Kirkcudbright
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) David Bell a Young a pau
the said David Bell a Young 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) Afraid to be
left alone Unusual Familiarity. Depression
of Spirits fancies that he hears strange sounds

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Melancholy, Suspicious eyes to be
watched for Vigilance

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

Place of Abode Broadstairs Heat Kent

DATED this 19th day of February one thousand eight hundred and fifty eight

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 David Bell or Young is a(1) Insane person hereby further certify that the Case of the said David Bell or Young is One of Emergency, and I recommend the immediate removal of the said David Young or Bell to an Asylum accordingly.

Name, John Thirkholm M.D. Edin.

Place of Abode, Buccleuch Street Dumfries

DATED this 20th day of February one thousand eight hundred and fifty eight.

(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 Irvine Clerk (2) Substitute of the (3) County of Dumfries having had produced to me, with a Petition at the instance of (3) Joseph Welsh Inspector of Poor Parish of Dalgarno Stewartry of Kirkcudbright & Certificates under the hands of John Thirkholm M.D. Dumfries and Alexander Borthwick M.D. Dumfries, 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 Bell or Young a Pauper and that the said David Bell or Young is a (5) Insane person and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said David Bell or Young 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 David Bell or Young which accompanied the said Petition.

(SIGNED) John P. Irvine

DATED this Twenty Second day of February one thousand eight hundred and fifty Eight

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.

David Bell or Jones
20/2/58

600

No 10

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 Agnes Hyslop

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Hyslop ~~Stationer~~ 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 Janet Hyslop to the Crichton Institution and to sanction her admission into the said Asylum.

(SIGNED) Agnes Hyslop (her mark) X

(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 February one thousand eight hundred and fifty eight.

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 Hyslop
2. Sex and Age,	Female 33
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	~~Farm~~ Farm servant
5. Religious Persuasion, so far as known,	Estab.d Church
6. Previous Place of Abode,	Penpont
7. Place where Found and Examined,	Penpont
8. Length of time Insane,	Two years
9. Whether first Attack,	~~Is~~ First attack
10. Age (if known) on first Attack,	31
11. When and where previously under Examination and Treatment,	Southern Counties Asylum Dumfries
12. Duration of existing Attack,	Two years
13. Supposed Cause,	Disappointed affections
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. 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 Hyslop Mother Penpont Brother died insane Southern Counties Asylum
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	The patient only left the Crichton Institution two weeks ago

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

(SIGNED)* *Name,* Agnes Hyslop

DATED this twenty fourth day of February one thousand eight hundred and fifty eight.

* To be Signed by the Party applying.

London: Printed,—Dec.—57.—1260.

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.*

I, the undersigned, James Gilchrist 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 Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Janet Hyslop Bryden, resident at Shepherd and that the said Janet Hyslop 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6)
Incoherence delusions and excitement

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Wanders to commit suicide wishes others to kill her &c

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, ~~Dumfries~~ Dumfries

DATED this 24th day of Feb.y One thousand eight hundred and fifty eight

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.*

I, the undersigned, Andrew C. Chalmers being a (1) M.B. Ed: M.R.C.P.S. and being in actual practice as a (2) Physician & c. 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) Janet Hyslop a private patient and that the said Janet Hyslop 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6). She is constantly in a state of excitement, complains that she will never get this world left. Take delusions, She commits various practical otherwise.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Her friends tell me that she has been in the same state for a fortnight, when since the last time menstruation

(SIGNED) *Name and Medical Designation,* And.r C. Chalmers M.B

Place of Abode, Thornhill

DATED this 24th day of February one thousand eight hundred and fifty eight

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 Hyslop is a (1) person of unsound mind hereby further certify that the Case of the said Janet Hyslop is One of Emergency, and I recommend the immediate removal of the said Janet Hyslop to an Asylum accordingly.

Name, James Gilchrist

Place of Abode, Dumfries

DATED this twenty fourth day of February one thousand eight hundred and fifty eight

(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 Goldie (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Agnes Hyslop residing in Penpont Certificates under the hands of, James Gilchrist and Andrew C. 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) Janet Hyslop residing in Penpont and that the said Janet Hyslop is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Hyslop 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 Janet Hyslop which accompanied the said Petition.

(SIGNED) Wm Goldie

DATED this Twenty fifth day of February one thousand eight hundred and fifty eight years

To the Superintendent of the (7) Public *Asylum of* Crichton Royal 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.

Samuel Goodwin
24/2/58

601
No 11

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 Isabella Carrie ~~widow~~ Dumfries

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Carrie Mary Dicks 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 Carrie to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Isabella Carrie

(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 February one thousand eight hundred and fifty eight

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 Carrie
2. Sex and Age,	Female 32
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Farmers daughter no occupation
5. Religious Persuasion, so far as known,	Estab. Church
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	Some years
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	About 20
11. When and where previously under Examination and Treatment,	In Southern Counties Asylum for third months in 1854
12. Duration of existing Attack,	Some 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,	
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 Bell or Carrie Mother 28 St. Michael Street Insanity on Mothers side
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,* Isabella Carrie

DATED this twenty fifth day of February one thousand eight hundred and fifty eight

* 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* and being in actual practice as a (2) Physician

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

I, the undersigned, William Lock being a (1) Member of the Royal College of Physicians hereby certify, on soul and conscience, that I have this day, at (3) 22 Nithsdale Dumfries in the County of Dumfries separately from any other Medical Practitioner,

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

visited and personally examined (4) Helen Corrie

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

and that the said Helen Corrie 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 statement generally, certain delusions with regard to myself & Dr

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The Governor inmate in the Southern Counties asylum for three months

(SIGNED) *Name and Medical Designation,* William Lock MD

Place of Abode, Dumfries

DATED this 25th day of February One thousand eight hundred and 58

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.

I, the undersigned, James Gilchrist MD being a (1) Graduate of the University of Edinburgh

(2) Physician or Surgeon, *or* and being in actual practice as a (2) Physician

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

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,

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

visited and personally examined (4) Helen Corrie Farmers daughter 22 N. Nithsdale Street Dumfries

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

and that the said Helen Corrie 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 deficiency

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Weak-minded from youth

5/-

(SIGNED) *Name and Medical Designation,* James Gilchrist MD

Place of Abode, Crichton Institution Dumfries

DATED this twenty fifth day of February one thousand eight hundred and fifty eight.

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 Helen Corrie is a (2) Lunatic hereby further certify that the Case of the said Helen Corrie is One of Emergency, and I recommend the immediate removal of the said Helen Corrie to an Asylum accordingly.

Name, William Scott M.D. Edin

Place of Abode, Dumfries

Dated this 25th day of February one thousand eight hundred and 58 —

(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 Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Isabella Corrie residing in Dumfries. Certificates under the hands of William Scott M.D. Dumfries and James Gilchrist M.D. Crichton Institution, 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 Corrie in Dumfries and that the said Helen Corrie is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Helen Corrie 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 Helen Corrie which accompanied the said Petition.

(Signed) John P. Trotter

Dated this 26th day of February one thousand eight hundred and fifty Eight

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

5/=

(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.

Helen Corrie
25/2/58

602

No 12

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 Peter Groathwaite

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Joseph Wilson my cousin 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 Wilson to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Peter Groathwaite

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

DATED this twenty eighth (3) day of February one thousand eight hundred and fifty eight

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 Wilson
2. Sex and Age,	Male 43
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Draper
5. Religious Persuasion, so far as known,	Episcopal Church
6. Previous Place of Abode,	Keswick
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	Three weeks
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,	Three weeks
13. Supposed Cause,	Drinking stimulants & Sunstroke
14. Whether subject to Epilepsy,	None.
15. Whether Suicidal,	Yes occasionally
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Joseph Wilson Keswick Mother of Patient. Father Committed suicide
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,* Peter Groathwaite

DATED this twenty eighth day of February one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1260.

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.*

I, the undersigned, John Twedie being a (1) Member of the Royal College Surgeons London and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Dumfries the Temperance Hotel — in the County of Dumfries separately from any other Medical Practitioner

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

visited and personally examined (4) Joseph Wilson Draper Chemist Dumfries and that

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

the said Joseph Wilson 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) Extravagant actions Tendency to commit suicide great excitement of temper, &c

(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,* John Twedie Surg

Place of Abode, Dumfries

DATED this 25th day of February One thousand eight hundred and forty eight.

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.*

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) Dumfries in the County of Dumfries separately from any other Medical Practitioner,

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

visited and personally examined (4) Joseph Wilson and that

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

the said Joseph 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) great irritability and excitement incoherence and delusions

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Squanders his money - threatens his relations &c - Communicated by his friends

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D

Place of Abode, Dumfries

DATED this twenty fifth day of February one thousand eight hundred and forty eight

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 Joseph Wilson is a (1) insane person hereby further certify that the Case of the said Joseph Wilson is One of Emergency, and I recommend the immediate removal of the said Joseph Wilson to an Asylum accordingly.

Name, John Tweddle

Place of Abode, Keswick

DATED this 25th day of February one thousand eight hundred and fifty eight.

(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) Peter Braithwait Certificates under the hands of John Tweddle 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) Joseph Wilson, Draper, Keswick, Cumberland and that the said Joseph 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 Joseph Wilson as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise his 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.

(SIGNED) John P. Trotter

DATED this Twenty sixth day of February one thousand eight hundred and fifty eight years.

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.

793

Joseph Wilson

26/2/58

793

804

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 Welsh Inspector of Poor Inquiry

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

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 Farrall to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Joseph Welsh

(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 February one thousand eight hundred and Fifty Eight 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,	Mary Farrall
2. Sex and Age,	60 Years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Labourers Wife
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	College Street Maxwelltown
7. Place where Found and Examined,	Ds
8. Length of time Insane,	Eight days
9. Whether first Attack,	First Attack
10. Age (if known) on first Attack,	60 Years
11. When and where previously under Examination and Treatment,	No
12. Duration of existing Attack,	Eight days
13. Supposed Cause,	
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	
16. Whether Dangerous to others,	Dangerous
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Inquiry
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,	Patrick Farrall her Husband a Nephew has been in the Southern Counties Asylum
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,* Joseph Welsh

DATED this twenty sixth day of February one thousand eight hundred and Fifty Eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1240.

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 Chisholm being a (1) ~~Phys~~ 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) College Street (Maxwelltown - (Troqueer) Kirkcudbright) in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Farnell and that the said Mary Farnell 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 - ~~facts~~ fright - disposed complying with obstinate resistance to medical & Moral treatment

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) neighbours state that she attempted to leap out at window & that she has one woman's hand

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

Place of Abode, Buccleuch Street - Dumfries

DATED this 26th day of February One thousand eight hundred and fifty eight

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 Robertson 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) College Street Maxwelltown Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Farnell and that the said Mary Farnell 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 various delusions, Incoherent

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband informed me that she made an attempt to leap out of a high window to a back lane at times, and has my self frequently

(SIGNED) *Name and Medical Designation,* Alexr Robertson M.D.

Place of Abode, Buccleuch Street Dumfries

DATED this 26th day of February one thousand eight hundred and fifty eight

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 Farrall is a ~~[illegible]~~ Person of Unsound Mind hereby further certify that the Case of the said Mary Farrall is One of Emergency, and I recommend the immediate removal of the said Mary Farrall to an Asylum accordingly.

Name, John Olisholm M.D

Place of Abode, Buccleuch Street Dumfries

DATED this 26 day of February one thousand eight hundred and fifty eight

(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, Wm Ostenny Trotter 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 Dgoway Certificates under the hands of John Olisholm 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 Farrall a pauper and that the said Mary Farrall 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 Farrall 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 Mary Farrall which accompanied the said Petition.

(SIGNED) Wm O Trotter

DATED this Twenty seventh day of February one thousand eight hundred and fifty eight 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.

Mary Garrale
24/2/58
603
No 13

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 Charteris Inspector of Poor Wamphray

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David Watson 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 Watson to the Southern Counties Asylum at Dumfries and to sanction his admission into the said Asylum.

(SIGNED) John Charteris Inspector

(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 February one thousand eight hundred and fifty eight

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 Watson
2. Sex and Age,	Male - 36 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	General Labourer
5. Religious Persuasion, so far as known,	Adherent of the Established Church
6. Previous Place of Abode,	Mostly in Wamphray for last 6 years moving from Place to Place.
7. Place where Found and Examined,	— In Dumfries when he fell into a fit of Melancholy
8. Length of time Insane,	about 13 January last he was first observed and has gradually got worse - Returned to Wamphray 18 Feby
9. Whether first Attack,	— Second attack
10. Age (if known) on first Attack,	about 18 years of age in the Crichton Asylum
11. When and where previously under Examination and Treatment,	about 18 years ago in the Crichton Asylum at Dumfries
12. Duration of existing Attack,	— about 5 weeks since he was observed to be
13. Supposed Cause,	off his usual Cause not known unless it proceeds from Shame
14. Whether subject to Epilepsy,	Cause of Religion
15. Whether Suicidal,	No that he often thinks of committing Suicide acknowledges
16. Whether Dangerous to others,	No -
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Wamphray
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,	Robert Watson Farm Servant at Wamphra- burn Wamphray - a Brother of David Watson A Sister of his is a Fatuous Pauper here Congenital Imbecility of Mind.
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 Charteris Inspector

DATED this 24th day of February one thousand eight hundred and fifty eight

* 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, James Munro being a (1) Physician & Surgeon of Edin.
and being in actual practice as a (2) Physician & Surgeon in Moffat hereby certify, on soul and conscience, that I have this day, at (3) Newton Wamphray in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) David Watson Labourer Pauper and that the said David Watson 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)
He supposes that he cannot live - sometimes tries to starve himself - thinks he is ruined both in the world & the next

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The same as above - also that he very often contemplates committing suicide to free himself from his misery by James Porter

(SIGNED) *Name and Medical Designation,* James Munro Ph D & Ln

Place of Abode, Moffat

DATED this 24th day of Febr. One thousand eight hundred and fifty eight

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 Sanders Surgeon of Edin.
being a (1)
and being in actual practice as a (2) Surgeon in Wamphray hereby certify, on soul and conscience, that I have this day, at (3) Newton Wamphray in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) David Watson Labourer Pauper and that the said David Watson 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) Thinking his body in such state that he cannot live therefore God is very near to him - and in those views tries to starve himself his religious opinions are that he is lost

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
That he scarcely knows to sleep and very seldom during the day continually shifting from place to place - communicated by Mrs Wright Newton

(SIGNED) *Name and Medical Designation,* William Sanders Surgeon

Place of Abode Wamphray

DATED this 24th day of February one thousand eight hundred and fifty Eight

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 Sheriff Substitute
of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Charteris Inspector of Poor, Wamphray Certificates under the hands of James Munro, M.D. Moffat and William Sanders, Surgeon, Wamphray, 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 David Watson Labourer, Wamphray, a pauper and that the said David Watson is an insane person

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said David Watson 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 Watson which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this 25th day of February one thousand eight hundred and fifty eight years

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.

David Nelson
31/2/58
604
No 14

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,—*

Annandale Arms Moffat The Petition of Mrs. Graenstoun

humbly showeth that it appears from the subjoined Statement and accompanying Medical Certificates, that Humphrey Graenstoun 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 Graenstoun to the Crichton Institution and to sanction his admission into the said Asylum.

(SIGNED) Mrs. Graenstoun

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

DATED this Second (3) day of March one thousand eight hundred and fifty eight

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 Graenstoun
2. Sex and Age,	Male. 23
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,	
7. Place where Found and Examined,	Moffat
8. Length of time Insane,	About a fortnight
9. Whether first Attack,	No
10. Age (if known) on first Attack,	22
11. When and where previously under Examination and Treatment,	Crichton Institution
12. Duration of existing Attack,	about a fortnight
13. Supposed Cause,	[illegible] of 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,	
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 Graenstoun Moffat Brother 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,* Mrs. Graenstoun

DATED this 2nd day of March one thousand eight hundred and fifty eight

* 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, James Munro being a (1) Physician & Surgeon of Edin.

and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Cumandale Arms Inn Moffat in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Humphrey Cranstoun 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.:—

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

He constantly refuses to take his food is afraid that he is constantly doing something wrong is unsteady & undecided. often thinks you long time before he can be induced to do anything that he is asked

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

The same as above by his brother

(SIGNED) *Name and Medical Designation,* James Munro MD & C.M.

Place of Abode, Moffat

DATED this 2nd day of March One thousand eight hundred and fifty eight

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 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) ~~Dumfries~~ Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Humphrey Cranstoun Farmer & residing at Cumandale Arms 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.:—

1. Facts indicating Insanity observed by myself: (6) Excitement - Incoherence of Speech - Delusions of Suicide

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Refusal to take food or to work.

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D. Dumfries

Place of Abode, Crichton Royal Institution

DATED this ~~fourteenth~~ second day of March one thousand eight hundred and fifty-eight.

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 Sharp Grotter Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Mrs S. Craustoun
Yarmon Armandale Army Med Staff
Certificates under the hands of James Thirlwall M.D.
and James Gilchrist 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 Lunacies, and for the Provision, Maintenance, and Regulation of Lunatic Asylums in Scotland," setting forth that they had separately visited and examined (4)
Humphrey Craustoun from Moffat — and that the said
Humphrey Craustoun 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 Craustoun — as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Humphrey Craustoun which accompanied the said Petition.

(SIGNED) John S. Grotter

DATED this Third day of March one thousand eight hundred and fifty eight

To the Superintendent of the (7) Public
Asylum of Crichton Royal 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.

494

Winchester Clarendon

2/6/58

494

Sept

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 Rob. McGregor, Inspector of Poor of St Mungo humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Smith a pauper from the Parish of St. Mungo 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 and to sanction his admission into the said Asylum.

(SIGNED) Rob. McGregor, Inspector

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

DATED this Sixth (3) day of March one thousand eight hundred and fifty eight.

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 45
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Pauper – Agricultural Labourer
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	
7. Place where Found and Examined,	At his own house, at Burnfoot, St Mungo
8. Length of time Insane,	A few 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,	A few days
13. Supposed Cause,	Disease of Brain
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,	St Mungo parish
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,	His wife lives at Burnfoot St Mungo – None 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, Rob. McGregor, Inspector of Poor.

DATED this Sixth day of March one thousand eight hundred and fifty eight.

* 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, W. Bell Henry Lieutenant, being a (1) College of Surgeons Edin. & Abse Hospital Undergoing practice and being in actual practice as a (2) a Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Burnfoot Parish of St Mungo Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) John Smith a Pauper and that the said 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.:— Paroxysms of Violence & Incoherence of

(6) *State the facts.*

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

(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. Bell Henry Surgeon

Place of Abode, Annandale

DATED this 7th day of March one thousand eight hundred and fifty eight

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 Clark Wilson, being a (1) Licentiate of the Fac. Phys 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) Burnfoot Parish of St Mungo Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) John Smith, Pauper residing at Burnfoot, St Mungo and that the said 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) False ideas regarding himself and his situation

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Told by his son in law that he is sometimes very outrageous.

(SIGNED) *Name and Medical Designation,* George C Wilson, Surgeon

Place of Abode, Lockerbie

DATED this 7th day of March one thousand eight hundred and fifty eight

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 Pringle Crotter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Mc Gregor Inspector of Poor Parish Mungo Certificates under the hands of W. O. Bell Ivinity and George Clark 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 Smith a pauper and that the said John 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 John Smith as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise this 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.

(SIGNED) John P. Crotter

DATED this Eighth day of March one thousand eight hundred and fifty eight year

To the Superintendent of the (7) Public *Asylum of* Crichton Royal 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.

John Smith
8/3/68
605
No 15

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 Ross Portologan Holmpatrick humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Forbes H. B. Ross Brother of the 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 Forbes H. B. Ross to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) John Ross

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

DATED this fifteenth (*) day of March one thousand eight hundred and fifty eight.

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,	Forbes Hunter Blair Ross
2. Sex and Age,	Male 29
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Clergyman
5. Religious Persuasion, so far as known,	United Presbyterian
6. Previous Place of Abode,	Portologan Holmpatrick
7. Place where Found and Examined,	Dalmpries
8. Length of time Insane,	Two years
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	24
11. When and where previously under Examination and Treatment,	In Gartnavel Asylum three Months in 1854
12. Duration of existing Attack,	Two years
13. Supposed Cause,	Study
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	A attempts to drown himself
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,	James Ross Portologan Holmpatrick (Brother) 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,* John Ross

DATED this fifteenth day of March one thousand eight hundred and fifty eight.

* 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, James Gilchrist 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) Forbes Hunter Blair Rose a clergyman residing at Portlogan and that the said Forbes H. B. 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) excitement and incoherence - has attended his attendants - cries - swears - and uses obscene language

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Unable to perform his ~~duty~~ Official duty - wanders from home - uses improper language - is restless at n is also suicidal

(SIGNED) *Name and Medical Designation,* James Gilchrist M.

Place of Abode, Dumfries

DATED this fifteenth day of March One thousand eight hundred and fifty eight

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 Oberholzer 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) Forbes Hunter Blair Rose - Clergyman - and that the said Forbes Hunter Blair Rose 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) Incoherence - Defect of Memory - Confusion

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) tells me himself that he is nervous & irritable - cannot perform his duties Nurse mean him I am also informed by attendants that he stru

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

Place of Abode, Dumfries

DATED this 15th day of March one thousand eight hundred and fifty eight

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in case 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 Forbes Hunter Blair Ross is a (1) person of unsound mind hereby further certify that the Case of the said Forbes Hunter Blair Ross is One of Emergency, and I recommend the immediate removal of the said Forbes Hunter Blair Ross to an Asylum accordingly.

Name, James Gilchrist M.D.

Place of Abode, Dumfries

DATED this fifteenth day of March one thousand eight hundred and Sixty eight

(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 Peterson Procurator Fiscal Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Ross residing at Portlogan Portpatrick Certificates under the hands of James Gilchrist M.D. and John Chisholm 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) Forbes Hunter Blair Ross, a Clergyman and that the said Forbes Hunter Blair 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 Forbes Hunter Blair Ross as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Forbes Hunter Blair Ross which accompanied the said Petition.

(SIGNED) John Peterson

DATED this Sixteenth day of March one thousand eight hundred and Sixty eight.

To the Superintendent of the (7) Public
Asylum of Crichton Royal Institution 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.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, or Private.
(7) Public, District, or Private.

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, Adam Crichton Chalmers being a (1) Doctor of 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) Upper Nithsdale Combination Poorhouse Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Robert Hunter a pauper of Sanquhar Upper Nithsdale Combination Poorhouse and that the said Robert 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) For the last Six or while he has been an inmate of the Upper Nithsdale Combination he is flighty & gives distressing but rational answers regarding temptation has suspicions of people of his address in money matters. Has my book withdrawn

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

Statements confirmatory the above

(SIGNED) *Name and Medical Designation,* Adam C. Chalmers M.D

Place of Abode, Thornhill

DATED this 26th day of March One thousand eight hundred and Sixty eight.

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 Kay being a (1) Licentiate of the Faculty of Physicians & Surgeons of Glasgow Surgeon and being in actual practice as a (2) hereby certify, on soul and conscience, that I have this day, at (3) Upper Nithsdale combination Poorhouse Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Robert Hunter a pauper of Sanquhar Upper Nithsdale and that the said Robert 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) Have known him for the last fifteen years slightly inclined to Hallucination at night, and was altogether during day disposition, and continues so —

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

Notorious in the District

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

Place of Abode, Sanquhar

DATED this 29th day of March one thousand eight hundred and Sixty eight

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 Pelgrin Rolfe, Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) George Osborne Inspector of Poor, Annandale
Certificates under the hands of Andrew Crichton Chalmers
and William Hay, 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 Hamilton a pauper and that the said
Robert Hamilton 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 Hamilton as a Patient into the
(6) Public Asylum of Southern Counties Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert
Hamilton which accompanied the said Petition.

(SIGNED) John P. Rolfe

DATED this Sixth day of April one thousand eight hundred and fifty eight 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.

Robert Hunter

1/4/58

606

No 16

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 George Osborne Inspector of Poor Langholm

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Moffat 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 Moffat to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) Geo. Osborne, Insp. of Poor

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

DATED this 29th (2) day of March one thousand eight hundred and fifty eight 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,	Janet Moffat
2. Sex and Age,	Female, Aged 40
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Sewing
5. Religious Persuasion, so far as known,	United Presbyterian Church
6. Previous Place of Abode,	Langholm
7. Place where Found and Examined,	Langholm
8. Length of time Insane,	above 5 years
9. Whether first Attack,	do
10. Age (if known) on first Attack,	about 34 years
11. When and where previously under Examination and Treatment,	In the Southern Counties Asylum Dumfries
12. Duration of existing Attack,	Continuous
13. Supposed Cause,	Hereditary
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,	Langholm
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,	Janet Moffat or Dalzeil Newtown Langholm her Mother
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*, Geo. Osborne, Insp.

DATED this 29th day of March one thousand eight hundred and fifty eight years

* To be Signed by the Party applying.

Army 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, Andrew Crichton Chalmers being a (1) Doctor of Medicine of the University of Edinb and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Upper Nith Combination Poorhouse in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Janet McMat, a pauper of Upper Nithsdale Combination Poorhouse and that the said Janet McMat 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) For two years past while she has been an inmate of the Upper Nithsdale Combination Poorhouse she is subject to fits of violent temper for unintelligible muttering & frequently upon my own proper authority & questions she prevaricates

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

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

(SIGNED) *Name and Medical Designation,* Andr. C. Chalmers M.B

Place of Abode, Thornhill

DATED this 26th day of March One thousand eight hundred and fifty eight.

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 Kay 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) Upper Nithsdale Combination poorhouse in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) a pauper of Upper Nithsdale Combination Poorhouse and that the said Janet 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She is ner- vous, subject to fits of violent temper, has suspicions of per- sons continually annoying her at other times she is listless & monos-

(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,* Wm Kay Surg

Place of Abode, Dalgarnock

DATED this 29th day of March one thousand eight hundred and fifty eight

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 Pelagius Gibbs, Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) George Osborne, Inspector of Poor, Sanquhar,
Certificates under the hands of Andrew Crichton Chalmers
and William Kay, 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 Moffat a pauper and that the said Janet 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 Janet Moffat as a Patient into the (6) Public Asylum of Southern Counties, Dumfries and I authorise for Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Janet Moffat which accompanied the said Petition.

(SIGNED) John P. Gibbs

DATED this Sixth day of April one thousand eight hundred and fifty eight 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.

Louis Moffitt
1/4/15-5
Copy
Nov 4

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 Wells Senior residing in Lochmaben humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Wells Senior his 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 Wells Senior to the Southern Counties Asylum Dumfries, and to sanction his admission into the said Asylum.

(SIGNED) William Wells

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

DATED this eighth (3) day of April one thousand eight hundred and fifty eight

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 Wells Junior
2. Sex and Age,	male aged twenty five years
3. Married, Single, or Widowed,	single
4. Condition of Life, and previous Occupation (if any),	Teacher
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Templand Village Lochmaben Dumfries
7. Place where Found and Examined,	since 1st January last
8. Length of time Insane,	
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Seven weeks in Southern Counties Asylum
12. Duration of existing Attack,	since 1st January last, with some intervals
13. Supposed Cause,	not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	not so far as known
16. Whether Dangerous to others,	occasionally
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lochmaben
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 Wells Senior the petitioner Any member of the family 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,* William Wells

DATED this 8th day of April one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1260.

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 Rushton ~~Physician~~ M. D. Ed
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) Court House
Dumfries
Dumfries
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) William Wells - shoemaker -
and that
the said William Wells
unsound mind
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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
Confusion of Ideas — delusions - want of Moral control —

(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,* John Rushton M.D.

Place of Abode, Buccleuch Street

DATED this eighth day of April One thousand eight hundred and fifty eight

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 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
Dumfries
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) William Wells a Teacher
residing at Lochmaben
and that
the said William Wells
of unsound mind
is a (5) 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) Incoherence and delusions

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Murders over the Country attributed an object as stated by his father

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crichton Royal Institution

DATED this ninth day of April one thousand eight hundred and fifty eight.

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 William Wells is a (1) Person of unsound mind hereby further certify that the Case of the said William Wells is One of Emergency, and I recommend the immediate removal of the said William Wells to an Asylum accordingly.

Name, John Clusholm

Place of Abode, Brucehill Street

DATED this eighth day of April one thousand eight hundred and fifty eight

(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 Roller, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Wells Senio residing in Lochmaben Certificates under the hands of John Clusholm 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) William Wells Senio, Teacher, Lochmaben and that the said William Wells Senio 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 Wells Senio as a Patient into the (6) Public Asylum of Southern Counties, Dumfries and I authorise this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Wells Senio which accompanied the said Petition.

(SIGNED) John P. Roller.

DATED this Tenth day of April one thousand eight hundred and fifty eight.

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.

William Wells
Aged 74 1/2
Born
Nov 18

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 ~~Alexander~~ Dobie Townfoot Kirkmichael

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Dobie my ~~daughter~~ 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 Mary Dobie to the Dumfries Counties Asylum and to sanction ~~his~~ her admission into the said Asylum.

(Signed) Alexander Dobie

(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 April one thousand eight hundred and fifty eight

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 Dobie
2. Sex and Age,	Female, ~~at~~ 45.
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,	Bush Mill & Townfoot Townfoot
7. Place where Found and Examined,	
8. Length of time Insane,	about 20. years
9. Whether first Attack,	~~no~~ yes
10. Age (if known) on first Attack,	about 25.
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	twenty years
13. Supposed Cause,	none 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. 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 Dobie her father Townfoot Kirkmichael 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, John Dobie (Father)

Dated this tenth day of April one thousand eight hundred and 58.

* 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, 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 Dumfries in the County of separately from any other Medical Practitioner visited and personally examined (4) Mary Dobie resident at Townfoot Kirkmichael and that the said Mary Dobie 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) patient incoherent - incoherence and irritability

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Suicidal erotic epileptic as stated by brother

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crichton Royal Institution

DATED this eleventh day of April One thousand eight hundred and fifty eight

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 Rutherford being a (1) Licentiate of 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) Townfoot Parish of Kirkmichael Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Dobie Townfoot Kirkmichael and that the said Mary Dobie 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)

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Mrs Dobie states - that she pushed up the window sat out - and wandered the fields - struck the servant man - is very restless during the night -

(SIGNED) *Name and Medical Designation,* Robert Rutherford Surgeon

Place of Abode, Kirkmichael

DATED this twelfth day of April one thousand eight hundred and 58.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in case 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 Dobie, Townfoot, Kirkmichael is a (1) person of unsound mind and I hereby further certify that the Case of the said Mary Dobie is One of Emergency, and I recommend the immediate removal of the said Mary Dobie to an Asylum accordingly.

Name, Robert Rutherford, Surgeon

Place of Abode, Kirkmichael

DATED this tenth day of April one thousand eight hundred and 58.

(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 Pilgrim Rotter, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Alexander Dobie, Townfoot Kirkmichael Certificates under the hands of James Gilchrist and Robert Rutherford, 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 Dobie residing at Townfoot, Kirkmichael and that the said Mary Dobie 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 Dobie as a Patient into the (6) Public Asylum of Southern Counties 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 Dobie which accompanied the said Petition.

(SIGNED) John P. Rotter

DATED this Twelfth day of April one thousand eight hundred and fifty eight 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.

Mary Dolan
10/4/15

1009

No 19

CRICHTON ROYAL INSTITUTION,

Parent Department.

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.

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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.	Mary Dobie, Æ 45. House maid when She did work, easily excited, average education,
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	
3. Before the invasion 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.?	none / Bowels sluggish Slept very ill for long time back. has been in the habit of sitting during the nig
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?	
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?	Increasing
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.	appetite bad Bowels obstinate was in the habit of taking Laxative Pills - Pulse quick,
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?	
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?	
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	none
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thought excited by any particular subject or event?	yes
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 prominent propensity, or tendency to crime?	
12. What treatment has been resorted to, for what length of time, and with what success?	none
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	was never in any asylum

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 Purdie Inspector of Poor, Dornock

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Catherine Mc Glashan 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 Mc Glashan to the Southern Counties Asylum and to sanction her 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 Eleventh (3) day of April one thousand eight hundred and forty Eight

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 Mc Glashan
2. Sex and Age,	Female 45 yrs
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Knitter
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	has resided 35 yrs in Lamplaw Cottage Dornock
7. Place where Found and Examined,	Christlands Dornock
8. Length of time Insane,	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,	Eight Months
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	not known
16. Whether Dangerous to others,	Suspected
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dornock
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 Mc Glashan her Mother — no other Member of the family is known to have been Affected
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,* Wm Purdie.

DATED this Eleventh day of April one thousand eight hundred and forty Eight

* 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, Thomas Williamson being a (1) Surgeon L.R.C.S. Edinb. {Surgeon and General in Medicine} practitioner (2) hereby certify, on soul and conscience, that I have this day, at (3) Napleton in the parish of Cornock Christlands in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Catherine Mc Glashan a pauper residing with her mother at Christlands and that the said Catherine Mc Glashan 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) Insulted and wandering habits, impatience of restraint, refusing obedience to her mother and both in [illegible] things reasonable, labouring under delusions about matters [illegible] to her

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Threatening to injure her mother, by stealing from bed and morning stealthily from bed and morning stealthily from bed and morning stealthily

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 Pelarin Rollo (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) William Sudie, Inspector of Poor for the parish of Dunrock
Certificates under the hands of Thomas Williamson
and William Edgar, 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) Catharine McGlashan residing at Christlands Stephen a pauper and that the said Catharine McGlashan is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Catharine McGlashan 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 Catharine McGlashan which accompanied the said Petition.

(SIGNED) John P. Rollo

DATED this Fifteenth day of April one thousand eight hundred and fifty eight years

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.

610

Catherine M. Glasken

15/4/58

610

No 20

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 John Rae, Labourer, Rhimyrigg Tile Works in the parish of Annan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Graham or Rae, 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 Margaret Graham or Rae to the Southern Counties Asylum — and to sanction her admission into the said Asylum.

(SIGNED) John Rae

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

DATED this Fifteenth (*) day of April one thousand eight hundred and fifty eight 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 Graham or Rae
2. Sex and Age,	Female aged 39
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Labr Wife & previously a Nursemaid
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Longtown, Cumberland, in England
7. Place where Found and Examined,	Rhimyrigg Tile Works
8. Length of time Insane,	A fortnight or there about—was previously confined about Jany 1857.-
9. Whether first Attack,	Second attack
10. Age (if known) on first Attack,	39
11. When and where previously under Examination and Treatment,	Previously treated & cured at the Southern Counties Asylum, in 1857
12. Duration of existing Attack,	About a fortnight
13. Supposed Cause,	Not known, but was lately delivered of a child & got cold
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Previous attack she was so disposed, not on this occasion
16. Whether Dangerous to others,	Yes by threatening her family
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Annan
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 Rae, Labr, Rhimyrigg Tile Works Hy. 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,* John Rae

DATED this Fifteenth day of April one thousand eight hundred and fifty eight years

* 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, Agnes Black Boyle,
being a (1) Member 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) Whiting rip
File works, near Anstruther,
in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Margaret Graham or Rae
Pauper, residing at Whitingrigs
and that
the said Margaret Graham or Rae 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)
Appearance wild unsettled. Eyes in volume
rapid irritable appreciation: in fact complete
confusion of intellect. Language of this obscure

(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
threatened to destroy children

(SIGNED) *Name and Medical Designation,* Agnes Black Boyle. M.D.

Place of Abode, Thrids Park. Anstruther

DATED this fifteenth day of April One thousand eight hundred and fifty eight

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 Ewart
being a (1) Member 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) Whinny rigs
File Works, near Anstruther
in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Margaret Graham or Rae
Pauper residing at Whinnyrigs
and that
the said Margaret Graham or Rae 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 wild and unsettled appearance, Erratic
and incoherent ideas, and obscure language

(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 threatened to children, and would
if permitted destroy articles in the house.

(SIGNED) *Name and Medical Designation,* William Ewart, Surgeon

Place of Abode, Edinaple Anstruther Fife

DATED this fifteenth day of April one thousand eight hundred and fifty eight

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, Alexander Kennedy (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Rae, Labourer at Whinnyrigg Tile Works in the parish of Dumfries Certificates under the hands of Agnew Black Bogie and William Ewart 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 Graham or Rae at Whinnyrigg Tile work a pauper and that the said Margaret Graham or Rae is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Graham or Rae 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 Margaret Graham or Rae which accompanied the said Petition.

(SIGNED) A. Kennedy

DATED this seventeenth day of April one thousand eight hundred and fifty eight years

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

A. Kennedy

(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.
(7) Public, District, or Private.

Margaret Goodman
St Bees
1874/58

611
No 21

20 & 21 *Vict., Cap.* 71, *Sect.* 3[illegible]

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 Wyse Jr Inspector Kirkmichael humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Shankland - 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 Shankland [illegible] to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) James Wyse Jr Insp.

(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 April one thousand eight hundred and fifty eight 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,	James Shankland
2. Sex and Age,	Female - about 30 years -
3. Married, Single, or Widowed,	Single -
4. Condition of Life, and previous Occupation (if any),	None -
5. Religious Persuasion, so far as known,	do -
6. Previous Place of Abode,	Parish Kirkmichael
7. Place where Found and Examined,	Rennoch Hill - Kirkmichael
8. Length of time Insane,	23 years
9. Whether first Attack,	
10. Age (if known) on first Attack,	7 years
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	about 2 Days
13. Supposed Cause,	
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	Think not - never heard of such,
16. Whether Dangerous to others,	suppose not do -
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkmichael
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,	Wasted in Shankland Rennoch Hill - Mother & Brothers None of the family ever known to be 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,* James Wyse Jr

DATED this 27th day of April - one thousand eight hundred and 58 -

* 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.*

I, the undersigned, William Scott being a (1) member of the Royal Colaze of Physicians Edinburgh and being in actual practice as a (2) Surgeon & Physician hereby certify, on soul and conscience, that I have this day, at (3) Renwick H in the Pauper Ward of the Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Janet Shankhing a Pauper and that the said Janet Shankhing 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) Incoherence and tendency to destroy whatever articles she may come within the reach—

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Became insane at the age of seven years after an attack of Fever and has been subject to Epilepsy Fits ever since that time—

(SIGNED) *Name and Medical Designation,* William Scott M Physician Surgeon

Place of Abode, Dumfries —

DATED this 26th day of April One thousand eight hundred and 58

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, Alexander Borthwick being a (1) Graduate of the University of Edinburg and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Renwick Ho Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Janet Shankland a Pauper and that the said Janet Shankland is a (5) Lunatic 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) Incoherent furious, noisy

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Mother states that she is difficult to restrain and at times strikes those in attendance

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

Place of Abode, Dumfries

DATED this 25th day of April one thousand eight hundred and fifty eight

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 Rolle, Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) James Lyall
Inspector of Poor, Kirkmichael
Certificates under the hands of William Scott
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)
Janet Shankland a pauper and that the said
Janet Shankland is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Shankland as a Patient into the (6) Public Asylum of Southern Counties 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 Shankland which accompanied the said Petition.

(SIGNED) John P. Rolle

DATED this twenty-seventh day of April one thousand eight hundred and fifty-eight years

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.

612
Louis Thomas Hamel
3/4/1866

612
No 212

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 James Inverarity Rosemount Dorfar

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Stewart Inverarity my 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 Stewart Inverarity to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) J. Inverarity

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

DATED this Seventh (3) day of May one thousand eight hundred and fifty eight.

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 Stewart Inverarity
2. Sex and Age,	Male 31
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Civil Servant of the East India Co
5. Religious Persuasion, so far as known,	Episcopalian
6. Previous Place of Abode,	Ahmadabad India
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	~~Fifty~~ Five months
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	31
11. When and where previously under Examination and Treatment,	Bombay, India
12. Duration of existing Attack,	Five months
13. Supposed Cause,	~~Fever~~ Heat
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Irritable
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 Inverarity Rosemount Dorfarshire his father Aunt eccentric
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,* J. Inverarity

DATED this Seventh day of May one thousand eight hundred and fifty eight

* 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, Alexander Patterson K. Ge. [illegible] being a (1) Graduate 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 Asylum Institution Dumfries in the County of separately from any other Medical Practitioner visited and personally examined (4) John Stuart Insanity and that the said John Stuart Insanity 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 as to time, distance and locality

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His attendant stated that he was incoherent and was peculiar in his notions about the quantity of food [illegible]

(SIGNED) *Name and Medical Designation,* Alex Patterson K [illegible]

Place of Abode, Dumfries

DATED this 4th day of May One thousand eight hundred and fifty eight

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 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) John Stewart Insanity on the Civil Service Bombay Indian and that the said John Stewart Insanity 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 Delusions

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Peculiarities of Behaviour & Incoherence of Thought and Expression & Delusions of Persecution & Delusions of Grandeur from the attendant

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Dumfries

DATED this fourth day of May one thousand eight hundred and fifty eight.

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 Pittairn Rolly, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Imrearity, Rosemount, Porfar Certificates under the hands of Alexander Bathwick 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 Stewart Imrearity and that the said John Stewart Imrearity 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 Stewart Imrearity as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise you Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Stewart Imrearity which accompanied the said Petition.

(SIGNED) John P. Rolly

DATED this Eleventh day of May one thousand eight hundred and fifty eight years. The date "Eleventh" altered.

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

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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.

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John Stewart University
29/4/68
796
No 1

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.*—

Eastbourne House, Skipton Yorkshire

The Petition of James Maitland Wilson humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Wilson, my 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 Wilson to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) James Maitland Wilson

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

DATED this thirtieth (3) day of April one thousand eight hundred and fifty eight 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 Wilson
2. Sex and Age,	male, twenty one years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Clerk
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Eastbourne House, Skipton, Yorkshire
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	Four 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,	four weeks
13. Supposed Cause,	over work
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. 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 Maitland Wilson, Eastbourne House, Skipton, Yorkshire, Father of the patient
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,* James Maitland Wilson

DATED this thirtieth day of April one thousand eight hundred and fifty eight

* 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.*

I, the undersigned, Graduate of the University of Edinburgh &c being a (1) Physician &c and being in actual practice as a (2) Physician &c hereby certify, on soul and conscience, that I have this day, at (3) the Salutation in the County of Kircudbright separately from any other Medical Practitioner, visited and personally examined (4) George Wilson and that the said George Wilson 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) He was lying on his on the ground, rolling his head about rapidly, shouting & talking in incoherently, eyes wild & furious, paid no attention to questions &c

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His states that he was very steady, sober & attentive to business, became melancholy some time ago, took him, therefore, with him from Skipton, (his residence), to G for change of scene, he became acutely maniacal only on his way from Glasgow

(SIGNED) *Name and Medical Designation,* James M. M'Culloch M. D. &c

Place of Abode, 38 Castle Street, Dumfries

DATED this 30th day of April One thousand eight hundred and fifty eight 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.*

I, the undersigned, William Marshall Graduate of the Faculty of Physicians & Surgeons Glasgow and College of Edinburgh 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) the Salutation Crichton Street, Dumfries Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) George Wilson and that the said George Wilson 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) He was lying on back and throwing himself about in all direction incoherently, eyes closely shut paid no attentions to

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) His states that he was a steady sober and of considerable b habits sometime since he became melancholy took from Skipton to Glasgow for change of scene he forwards only on his return from Glasgow

(SIGNED) *Name and Medical Designation,* William Marshall M.D.

Place of Abode, Buccleuch Street Dumfries

DATED this 30th day of April one thousand eight hundred and fifty eight years

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in case 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 George Wilson is a (1) Lunatic hereby further certify that the Case of the said George Wilson is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

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

Place of Abode, 38 Castle Street, Dumfries

DATED this 30th day of April one thousand eight hundred and fifty eight 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, Mr Peter Trotter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Maitland Wilson of East Bonnie House Shapton Lincolnshire Certificates under the hands of James Murray McCulloch 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) George Wilson, a clerk, son of the Petitioner and that the said George Wilson is a ~~Pauper~~ Insane Person and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Wilson as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorise ~~him~~ Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Wilson which accompanied the said Petition.

(SIGNED) Wm P. Trotter

DATED this First day of May one thousand eight hundred and fifty eight

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.

Geo Thorpe Milne
30/4/58
No 8

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 Mrs Maryann Copland or Turner

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Ann Copland or Heughan my 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 Mrs Ann Copland or Heughan to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) Mary Ann Turner

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

DATED this Twenty ninth (*) day of April one thousand eight hundred and fifty eight 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,	Anne Copland or Heughan
2. Sex and Age,	Female, sixty three years of age
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Lives on her money, widow of sea captain
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Glencaple
7. Place where Found and Examined,	Glencaple
8. Length of time Insane,	About three months, the accession gradual
9. Whether first Attack,	No, the fifth
10. Age (if known) on first Attack,	Forty nine years
11. When and where previously under Examination and Treatment,	At Glencaple & Royal Crichton Asylum, Dumfries
12. Duration of existing Attack, (*continuously*)	Unsatisfactory marriage about 14 years ago
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Has a tendency that way.
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,	George Copland, Liverpool, nephew, no member of the family ever known to be insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None, excepting duration of attacks, which are forgotten

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

(SIGNED)* *Name,* James McCulloch M.D. &c. Surgeon

DATED this 29th day of April one thousand eight hundred and fifty eight

* 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.

I, the undersigned, graduate of the University of Edinburgh being a (1) Physician

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

and being in actual practice as a (2) Physician &c.

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

hereby certify, on soul and conscience, that I have this day, at (3) Glencaple, in Parish of Caerlaverock in the County of Dumfries separately from any other Medical Practitioner,

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

visited and personally examined (4) Mrs Anne Copland or Hughan and that

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

the said Mrs Copland or Hughan 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) Lowness of spirits irrational fear or dread, without being capable of giving any or cause for such fear, alternations of excitement & incoherent talk &c. this being the fifth attack of insanity to my knowledge

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) From Miss Hughan, sister-in-law, similar statements

(SIGNED) *Name and Medical Designation,* James Murray M'Culloch M.B.

Place of Abode, 38 Castle Street, Dumfries

DATED this 29th day of April One thousand eight hundred and fifty eight 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.

I, the undersigned, James Gilchrist being a (1) Graduate of the University of Edinburgh

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

and being in actual practice as a (2) Physician

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

hereby certify, on soul and conscience, that I have this day, at (3) Scotstoun Counties' Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner,

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

visited and personally examined (4) Mrs Ann Copland or Hughan ~~Glencaple~~ Captain's wife Resident and that

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

the said Mrs Ann Copland or Hughan 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) Mental depression fear, some excitement and incoherence

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Occasionally violent as stated by accompanying attendant

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crichton Royal Institution Dumfries

DATED this Thirtieth day of April one thousand eight hundred and fifty eight.

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 Blair Rolle, Sher. Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Mr. Mary Ann Copland or Turner Certificates under the hands of James Murray 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) Mr. Ann Copland or Naughan residing at Glencaple and that the said Mr. Ann Copland or Naughan 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. Ann Copland or Naughan 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 Mr. Ann Copland or Naughan which accompanied the said Petition.

(SIGNED) John B. Rolle

DATED this First day of May one thousand eight hundred and fifty eight year

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.

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Mrs Ann Copeland

v Heaghan

30/4/57

613

No 23

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 McLellan, Inspr of Police Annan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Bottles in Annan —— 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 Bottles —— to the Southern Counties Lunatic Asylum and to sanction his admission into the said Asylum.

(SIGNED) John McLellan Insp.r

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

DATED this Thirtieth (*) day of April —— one thousand eight hundred and fifty eight 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,	Jack or John Bottles
2. Sex and Age,	Male aged 69 or there about
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Postilion
5. Religious Persuasion, so far as known,	Not known
6. Previous Place of Abode,	Mary Glover's Brae Street Annan
7. Place where Found and Examined,	Mary Clerk's Scotts Street in Annan
8. Length of time Insane,	Above 40 years
9. Whether first Attack,	
10. Age (if known) on first Attack,	Not known exactly
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	40 years
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Quite harmless
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Annan
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,	Relations not known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Lunatic came from Perth into the service of the late Mr Brown Queensberry Arms Annan as a Postillion about 40 years ago & his relations are unknown

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

(SIGNED)* *Name,* John McLellan Insp.r

DATED this Thirtieth day of April —— one thousand eight hundred and fifty eight years

* To be Signed by the Party applying.

Lunacy Board,—Dec.—37.—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, William Ewart 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) 36th Street Annan Dumfries in the County of separately from any other Medical Practitioner visited and personally examined (4) John Bottles, 36th Street Annan a pauper and that the said John Bottles 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) Complete Aberration of Mind, this peculiar habits observed for several years

(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,* William Ewart, Surgeon

Place of Abode, Edinburgh Street, Annan

DATED this twenty sixth day of April One thousand eight hundred and fifty eight.

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 B Bogie being a (1) Member of the Royal College of Physicians & 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) Scott St Annan Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) John Bottles, Scott St Annan and that the said John Bottles 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) Complete Aberration of Mind for many years.

(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,* A B Bogie M.D.

Place of Abode, Friars Park, Annan

DATED this twenty sixth day of April one thousand eight hundred and fifty eight.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in case 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 Pelarin Trotter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John M^c^ Lellan Inspector of Poor, Annan Certificates under the hands of William Ewart and Agnew Black Boyle, 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 Bolles a pauper and that the said John Bolles is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Bolles as a Patient into the (6) Public Asylum of Southern Counties, Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Bolles which accompanied the said Petition.

(SIGNED) John P Trotter

DATED this Thirtieth day of April one thousand eight hundred and fifty eight year.

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.

614
John Bottles
30/4/68

614
Nr 24

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 David Galbraith, Inspector of Poor Roddam humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Campbell 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 Campbell to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) D Galbraith

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

DATED this third (3) day of May one thousand eight hundred and fifty eight

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 Campbell
2. Sex and Age,	Male – 62 years
3. Married, Single, or Widowed,	Married – separated from Wife
4. Condition of Life, and previous Occupation (if any),	Weaver – latterly worker in Coalpit
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Winlaton – Northumberland
7. Place where Found and Examined,	Kirkpatrick Fleming Union Poorhouse
8. Length of time Insane,	Came on gradually some weeks back
9. Whether first Attack,	not known
10. Age (if known) on first Attack,	Age at present 62 years
11. When and where previously under Examination and Treatment,	not known
12. Duration of existing Attack,	Came on gradually some weeks ago
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,	Roddam
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,	His wife from whom he has been separated for thirty years resides at Meinside near Ecclefechan Not known
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, D Galbraith. Insp. of Poor

DATED this third day of May one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—37.—1000.

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 of Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Combination Poor of Kirkpatrick Fleming Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) John Campbell pauper in said Combination Poorhouse and that the said John Campbell or Lunatic is a (5) person fatuous 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 attempts often to leave the Poorhouse when apparently having any idea where he goes

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

(SIGNED) *Name and Medical Designation,* James Carruthers Surgeon

Place of Abode, Kirkpatrick Fleming

DATED this Third day of May One thousand eight hundred and Fifty eight

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 hereby certify, on soul and conscience, that I have this day, at (3) Kirkpatrick Fleming Poorhouse in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) John Campbell Pauper in said Poorhouse and that the said John Campbell 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) Absent & vague, incoherent discourse, and a general misunderstanding in the answers given by him to questions put.

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

(SIGNED) *Name and Medical Designation,* William Young Surgeon

Place of Abode Eaglesham

DATED this Third day of May one thousand eight hundred and fifty Eight

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 Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) David Galbraith
Inspector of Poor, Hoddam
Certificates under the hands of James Carruthers
and William Grieve, 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 Campbell, a pauper of said parish and that the said
John Campbell is a (5) person of unsound mind
Patient or Lunatic
and a proper Person to be detained, and taken care of, DO HEREBY AUTHORIZE you to receive the said John Campbell 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 Campbell which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this 4th day of May one thousand eight hundred and fifty eight years.

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.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, or Private.
(7) Public, District or Private.

615
Johnd Cumsbee
4/5/58
615
No 25

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,—*

Dumfries. The Petition of John Dinwoodie, Inspector of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Frances Neilson 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 Frances Neilson to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John Dinwoodie

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

DATED this Third (3) day of May one thousand eight hundred and fifty Eight 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,	Frances Neilson
Sex and Age,	Female – age 32 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Poor — Labourer
Religious Persuasion, so far as known,	Protestant
Previous Place of Abode,	Poorhouse Dumfries
Place where Found and Examined,	Do. Do.
Length of time Insane,	Not Known
Whether first Attack,	Not Known
Age (if known) on first Attack,	Not Known
When and where previously under Examination and Treatment,	Poorhouse Dumfries & Southern C. Asylum
Duration of existing Attack,	Not Known
Supposed Cause,	Not Known
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	She strikes when thwarted
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
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 Known relatives –
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 Dinwoodie Inspector

DATED this Third day of May one thousand eight hundred and fifty Eight

* To be Signed by the Party applying.

[4]

Fanny Nelson

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 Mc. McCulloch
being a (1) Physician, Licentiate of 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 Parish
Workhouse of Dumfries
Dumfries in the County
separately from any other Medical Practitioner
visited and personally examined (4) Frances Neilson, pauper in
Workhouse
the said Frances Neilson and
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) Countenance wild
& restless, language & answers incoherent, seems not to attend to or to
anything about her, sits constantly, when allowed in front of
house gazing through a rail and muttering to herself.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The Master of the Workhouse states similar facts

(SIGNED) *Name and Medical Designation,* James Mc. McCulloch

Place of Abode, 38 Castle Street, Dumfries

DATED this 24th day of April One thousand eight
hundred and fifty eight 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 Marshall
being a (1) Graduate of the Faculty of Physicians &
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) the Workhouse
Dumfries Dumfries in the County
separately from any other Medical Practitioner
visited and personally examined (4) Frances Nelson pauper in
the Workhouse
the said Frances Nelson and
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) Countenance wild
and demeanor talks incoherently & unconnectedly
repeating her name & age & Parish of Dumfries
frequently & in a loud tone of voice gazing through
fencing railes and talking to herself

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
The Governor gives a similar history
of her

(SIGNED) *Name and Medical Designation,* William Marshall

Place of Abode Barclay's Hall Dumfries

DATED this 27 day of April one thousand eight
hundred and 58

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 Boller, Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dun-
woodie, Inspector of Poor, Dumfries
Certificates under the hands of James Murray M'Culloch
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)
Frances Neilson a pauper and that the said
Frances Neilson is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Frances Neilson 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 Frances Neilson which accompanied the said Petition.

(SIGNED) John P. Boller.

DATED this ~~Third~~ Fifth day of May one thousand eight hundred and fifty eight years The word "Third" delete. 2 p.

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.

614

Francis Nielson

6/5/54

614

No 24

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 Ayr and his Substitutes,—

The Petition of Jno Mc Farlane Inspector of Poor Lesmahagow

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Spiers 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 Ayrshire Royal Institution at Sunnyside and to sanction his admission into the said Asylum.

(SIGNED) M. M'Farlane

(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 May one thousand eight hundred and Fifty Eight

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),	Sewer
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Maybole
7. Place where Found and Examined,	Maybole
8. Length of time Insane,	About fine days this time
9. Whether first Attack,	No
10. Age (if known) on first Attack,	Twenty three
11. When and where previously under Examination and Treatment,	At Dumfries Asylum
12. Duration of existing Attack,	Fine days
13. Supposed Cause,	
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	No
16. Whether Dangerous to others,	She is inclined to be so.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Lesmahagow
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,	Jane Spiers Maybole Sister None known
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, M. M'Farlane

DATED this 5th day of May one thousand eight hundred and fifty Eight

* 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, Robert Govan
being a (1) Member of the 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) School House
Maybole
Ayr
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Agnes Spiers formerly Lennox and pauper residing in School House Maybole and that
the said Agnes Spiers
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) Complete loss of self control and outrageous conduct towards her sister Jane Spiers who previously certified her to be insane

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her sister Jane Spiers her Mother to me that she had been four times in a Lunatic Asylum

(SIGNED) *Name and Medical Designation,* Robert Govan Surgeon

Place of Abode, Maybole

DATED this 5th day of May One thousand eight hundred and 58

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, Crawford
being a (1) Surgeon

and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) School House
Maybole
Ayr
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Agnes Spiers residing in Maybole, a Lunatic & Pauper
the said Agnes Spiers
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 her appearance, conversation, & conduct I consider it proper her under restraint

(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 her sister Jane Spiers that she has been since fourteen years of age, four times in a Lunatic Asylum

(SIGNED) *Name and Medical Designation,* Crawford Surgeon

Place of Abode Maybole

DATED this 5th day of May one thousand eight hundred and 58.

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 (*) 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

(*) 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, Robert McDermid Dougushee Esqr (1) Sheriff Substitute
of the (2) County of Ayr
having had produced to me, with a Petition at the instance of (3) Malcolm McFarlane Inspector of Poor for the Parish of Newalton
Certificates under the hands of Robert Irwan Surgeon in Maybole
and Robert Crawford Surgeon there, 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 Spiers pauper residing in Kirkoswald Maybole and that the said
Agnes Spiers is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Agnes Spiers as a Patient into the (6) Crichton Royal ~~Asylum~~ Institution 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 Agnes Spiers which accompanied the said Petition.

(SIGNED) M D Dougushee

DATED this Fifth day of May one thousand eight hundred and fifty eight years

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

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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.

616
Agnes Speers
6/5/56

616
No 26

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 Cromarty *and his Substitutes,—*

The Petition of Jacob Milligan Inspector of Poor for the parish of Dingwall humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Daniel McKinlay 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 Daniel McKinlay to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Jacob Milligan

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

DATED this Twenty Eighth (3) day of April one thousand eight hundred and fifty Eight.

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 McKinlay
2. Sex and Age,	Male 49 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Was a Pedlar
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Dingwall
7. Place where Found and Examined,	Upper Northfield Combination Poorhouse
8. Length of time Insane,	Thirteen years
9. Whether first Attack,	see 12th
10. Age (if known) on first Attack,	36
11. When and where previously under Examination and Treatment,	Southern Counties Asylum about 7 years since
12. Duration of existing Attack,	since 12th Sept. 1844
13. Supposed Cause,	Natural
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	no
16. Whether Dangerous to others,	Only may
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dingwall
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,	Jane McKinlay, Sugarbrook his Sister, one or two others of 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*, Jacob Milligan

DATED this Twenty Eighth day of April one thousand eight hundred and fifty Eight.

* 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.

I, the undersigned, Andrew Lorimer being a (1) Graduate of the University of St Andrews

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

and being in actual practice as a (2) Physician

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

hereby certify, on soul and conscience, that I have this day, at (3) Union Combination Poorhouse Thornhill in the County of Dumfries

separately from any other Medical Practitioner,

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

visited and personally examined (4) Daniel M'Kinnly Pauper

and that

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

the said Daniel M'Kinnly 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) Having attended him when first attacked with the malady several years ago, He was then in a state of great mental derangement and at one time attempted to murder his sister, and was sent to the Dumfries Asylum. and from

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) What I can learn from others he has been of unsound mind ever since. At present there is less excitement about him but there can be no doubt of his insanity.—

(SIGNED) *Name and Medical Designation,* Andr Lorimer M.D.

Place of Abode, Lauriston Glencairn

DATED this 15th day of April One thousand eight hundred and forty eight 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.

I, the undersigned, Alexander Crichton Chalmers being a (1) Doctor of Medicine of the University of Edinburgh

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

and being in actual practice as a (2) Physician

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

hereby certify, on soul and conscience, that I have this day, at (3) Upper Nithsdale Combination Poorhouse Dumfries

in the County of

separately from any other Medical Practitioner,

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

visited and personally examined (4) Daniel M'Kinnly Pauper

and that

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

the said Daniel M'Kinnly 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 has been an inmate of the Upper Nithsdale Combination Poorhouse for 21 months during which time he has been rarely Unoccupied, but is by turns violent & unable for any mental or physical pursuit. He has

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) of his habitually bad state of great excitement & of having at one attempted to murder his sister

(SIGNED) *Name and Medical Designation,* Alexr C. Chalmers

Place of Abode, Thornhill Dumfriesshire

DATED this 15th day of April one thousand eight hundred and forty eight

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 Rolfe Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Jacob Milligan Inspector of Poor, Dumfries
Certificates under the hands of Andrew Turner
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)
Daniel Mc Kinlay a pauper and that the said
Daniel Mc Kinlay is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Daniel Mc Kinlay as a Patient into the (6) Public Asylum of Southern Counties and I authorise you Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Daniel Mc Kinlay which accompanied the said Petition.

(SIGNED) John P Rolfe

DATED this Twenty eighth day of April one thousand eight hundred and fifty eight years.

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

---

(2) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(3) 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.

616
Daniel McMullen
10/5/54
618
No 228

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 James Peacock

Kilburn Yorkshire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Milroy 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 Milroy to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) James Peacock

(3) Jane Milroy

(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 May one thousand eight hundred and fifty eight

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 Milroy
2. Sex and Age,	Male 29
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	A Farmer
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Barrhanny Dumfries
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	Three weeks
9. Whether first Attack,	Third attack
10. Age (if known) on first Attack,	29
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Three weeks
13. Supposed Cause,	Intemperance
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. 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 Milroy Barrhanny his Mother 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,* James Peacock

Jane Milroy

DATED this eleventh day of May one thousand eight hundred and fifty eight

* 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, James Gilchrist 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) Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) John Milroy Farmer at Barnhannay Wamphrie and that the said John Milroy 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 Mental depression fear and restlessness

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

(SIGNED) *Name and Medical Designation,* James Gilchrist MD

Place of Abode, Crichton Royal Institution

DATED this eleventh day of May One thousand eight hundred and fifty eight.

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 M.D. Asst of the University of Edinburgh, &c 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) Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) John Milroy Farmer at Barnhannay Wamphrie and that the said John Milroy 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) Mental depression timidity and distaste of life, restlessness &c.

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Tendency to suicide, communicated by the person who accompanied him

(SIGNED) *Name and Medical Designation,* Jas Gilchrist M.D

Place of Abode, Dumfries

DATED this 12th day of May one thousand eight hundred and fifty eight.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in case 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 John Milroy, Farmer at Barnhenny, Wigtonshire is a (1) Lunatic and person of unsound mind, hereby further certify that the Case of the said John Milroy is One of Emergency, and I recommend the immediate removal of the said John Milroy to an Asylum accordingly.

Name, James Gilchrist M.D.

Place of Abode, Dumfries

DATED this twenty fourth day of May one thousand eight hundred and fifty eight

(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 Inglis Esqr. Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Adcock Wigtown, Wigtownshire Certificates under the hands of James Gilchrist and James Greer, 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 Milroy, farmer, Barnhenny, Wigtownshire and that the said John Milroy 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 Milroy as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Milroy which accompanied the said Petition.

(SIGNED) John P. Inglis

DATED this 12th day of May one thousand eight hundred and fifty eight

To the Superintendent of the (7) 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.
(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) County of Dumfries *and his Substitutes.*—

The Petition of George Osborne

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Hunter 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 Hunter to the Southern Counties Asylum and to sanction admission into the said Asylum.

(SIGNED) Geo. Osborne, Insp. of Poor

(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 May One thousand eight hundred and fifty 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 Hunter
2. Sex and Age,	Male
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Unknown
6. Previous Place of Abode,	Parish of Durrisdeer
7. Place where Found and Examined,	Knowhead Daugnhar
8. Length of time Insane,	About a Week
9. Whether first attack,	First Attack
10. Age (if known) on first Attack,	Eighteen years & 3 Weeks
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	a Week ends —
13. Supposed Cause,	— —
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,	Unascertained, considered to be Penpont or Carsphairn
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,	Hugh Hunter, his Father, lives at Knowhead, Daugnhar — None of the family have ever been known to be 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,* Geo. Osborne, Insp. of Poor Daugnhar

DATED this fifteenth day of May One thousand eight hundred and fifty eight

* 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 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) Knowhead Parish of Sanquhar Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Robert Hunter, pauper residing at Knowhead of Sanquhar and that the said Robert 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) He is furious and talks incoherently; is labouring under hallucinations says that he has seen death, and that big fat Butchers are outside to treat him like a Bullock, and he struggles to get out to them

× him.

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

None.

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

Place of Abode, Sanquhar

DATED this 14th day of May One thousand eight hundred and fifty eight.

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 Laurie, Sanquhar 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) at Knowhead, parish of Sanquhar County of Dumfries ~~in the County of~~ separately from any other Medical Practitioner, visited and personally examined (4) Robert Hunter, residing at Knowhead Burgh of Sanquhar and that the said Robert Hunter 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)
He is furious, restless, and talks incoherently, and that successantly. is subject to illusions of various kinds

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

(SIGNED) *Name and Medical Designation,* James Laurie Surgeon

Place of Abode, Sanquhar

DATED this fourteenth day of May One thousand eight hundred and fifty eight

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 Rotter, Sheriff Substitute (2) of the (3) County of Dumfries having had produced to me, with a Petition at the instance of (4) George Aborne Inspector of Poor, Langholm Certificates under the hands of William Kay and James Laurie, 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) Robert Hamilton a pauper and that the said Robert Hamilton is a (6) 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 Robert Hamilton as a Patient into the (7) 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 Hamilton which accompanied the said Petition.

(SIGNED) John P. Rotter.

DATED this Fifteenth day of May One thousand eight hundred and fifty eight 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.

619

Robert Hunter

12/5/68

619

No 29

20 & 21 *Vict., Cap.* 71, *Sect.* 84.

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 Arch^d. Montgomerie

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Arch^d. Montgomerie 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 Montgomerie to the Crichton Royal Institution, Dumfries, her and to sanction the admission into the said Asylum.

(SIGNED) A Montgomerie

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

DATED this 7th (*) day of May one thousand eight hundred and fifty eight.

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,	Christina Stephen a Mont-gomerie
2. Sex and Age,	Female, 37
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	Presbyterian, Free Church Glasgow
6. Previous Place of Abode,	
7. Place where Found and Examined,	
8. Length of time Insane,	Dipsomaniac for several years.
9. Whether first Attack,	
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Not previously treated Medically
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Has threatened
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,	A Montgomerie, husband residing at Greenbank Cottage near Ayr
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*, A Montgomerie

DATED this 7th day of May one thousand eight hundred and fifty eight,

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1240.

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, William Whiteside being a (1) M.D. of Edinburgh University.

and being in actual practice as a (2) Physician in Ayr hereby certify, on soul and conscience, that I have this day, at (3) Greenhead Cottage in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Mrs Archd. Montgomerie and the said Mrs Montgomerie 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 threatening to destroy herself

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Habitual intemperance and disorder of habits of diet fermentum &c communicated by her husband friends &c

(SIGNED) *Name and Medical Designation,* Wm Whiteside M.D.

Place of Abode, Ayr

DATED this 6th day of May One thousand eight hundred and 58.

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 Ronald being a (1) Licentiate of Glasgow Faculty

and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Greenhead Cottage Ayr in the County of Ayr separately from any other Medical Practitioner, visited and personally examined (4) Mrs Montgomerie and that the said Mrs Archd. Montgomerie 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 strong passion to do harm of some bodily injury to herself

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Disposing of her trifles when in low spirits & threats of burning house to satisfy a desire for stirring drinks

(SIGNED) *Name and Medical Designation,* John Ronald Surgeon

Place of Abode, 24 Wellington Square

DATED this Seventh day of May one thousand eight hundred and fifty Eight

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 Christison (1) Sheriff of Ayrshire
of the (2) County of Ayr
having had produced to me, with a Petition at the instance of (3) Archibald Montgomerie Teacher in Ayr Academy Ayr Certificates under the hands of William Whitelaw M.D and John Ronald 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) Mrs Archibald Montgomerie —— and that the said Mrs Archd Montgomerie 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 Archibald Montgomerie as a Patient into the (6) Public Asylum of Crichton Royal 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 Mrs Archibald Montgomerie which accompanied the said Petition.

(SIGNED) John Christison

DATED this eighth day of May one thousand eight hundred and fifty eight.

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.

Sig.

Christian Mantzonis
& Associates

1919

Nov 10

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 Samuel Copland of Shawfordhalmajin humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Copland or M'Cosker 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 Elizabeth Copland or M'Cosker to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) Samuel Copland

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

DATED this seventeenth (3) day of May one thousand eight hundred and fifty eight

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 Copland or M'Cosker
2. Sex and Age,	Female 43
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Sewer Labourers daughter
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Rhonehouse Castledouglas
7. Place where Found and Examined,	Southern Counties Asylum Castledouglas
8. Length of time Insane,	a fortnight
9. Whether first Attack,	3rd attack
10. Age (if known) on first Attack,	41
11. When and where previously under Examination and Treatment,	Not specially treated
12. Duration of existing Attack,	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,	Elizabeth Copland or M'Cosker
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 Copland Rhonehouse Castledouglas 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,* Samuel Copland

DATED this seventeenth day of May one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Blank.—No.—57.—1209.

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) Hallam Counties Asylum Dumfries
in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Copland or McCosker a pauper Roman Catholic Patient and that the said Elizabeth Copland or McCosker 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 appearance

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Restlessness and loud singing in Church Occasional violence to Mother and Sister. (Brother)

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D. Medical Officer

Place of Abode, Hallam Counties Asylum Dumfries

DATED this Seventeenth day of May One thousand eight hundred and fifty eight

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 Rotherie M.D. &c
being a (1) Graduate 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 Hallam Counties Asylum Dumfries
in the County of
separately from any other Medical Practitioner, visited and personally examined (4) Elizabeth Copland or McKay a private patient
and that the said Elizabeth Copland or McKay 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 and excited

(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 talks a great deal of nonsense and has delusions

(SIGNED) *Name and Medical Designation,* Alexr Rotherie M.D.

Place of Abode, Hallam Counties

DATED this 4th day of May one thousand eight hundred and fifty eight

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 Elizabeth Copland or M'Cosker is a (1) person of unsound mind hereby further certify that the Case of the said Elizabeth Copland or M'Cosker is One of Emergency, and I recommend the immediate removal of the said Elizabeth Copland or M'Cosker to an Asylum accordingly.

Name, Henry Scheduled M.D.

Place of Abode, Crichton Royal Asylum Dumfries

DATED this seventeenth day of May one thousand eight hundred and fifty eight.

(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 Glencairn Rotter, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Samuel Copland of Shankfoot, Balmaghie Certificates under the hands of Jame Gilchrist 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) Elizabeth Copland or M'Cosker a Lunatic Pauper and that the said Elizabeth Copland or M'Cosker 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 Copland or M'Cosker 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 Elizabeth Copland or M'Cosker which accompanied the said Petition.

(SIGNED) John G. Rotter

DATED this Nineteenth day of May one thousand eight hundred and fifty eight years

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.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, or Private.
(8) Public, District, or Private.

620

Elizabeth Copeland
vs McCorkle

1/5/58

620

1830

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 Fingland, Saugubar

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Fingland 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 Fingland to the Crichton Institution, Dumfries and to sanction his admission into the said Asylum.

(SIGNED) James Fingland

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

DATED this Seventeenth (3) day of May One thousand eight hundred and fifty eight

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 Fingland
2. Sex and Age,	Male.— Sixty two years of age
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	a Tradesman— a Tailor retired
5. Religious Persuasion, so far as known,	Unites Presbyterian
6. Previous Place of Abode,	Saugubar
7. Place where Found and Examined,	Saugubar
8. Length of time Insane,	about ten days
9. Whether first attack,	About ten days ago
10. Age (if known) on first Attack,	Sixty two
11. When and where previously under Examination and Treatment,	Saugubar
12. Duration of existing Attack,	Ten days
13. Supposed Cause,	Was connected with the Western Bank at its failure
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes attempted it in different ways
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not chargeable to any Parish
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 Fingland, Saugubar, Son of Wm Fingland — Never a member of the family was so afflicted.
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,* James Fingland

DATED this Seventeenth day of May One thousand eight hundred and fifty eight

* 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.*

I, the undersigned, Wm Kay 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) his own House High St of Sanquhar Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) William England Tailor Residing in High St of Sanquhar and that the said William England 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 melancholy and restless, subject to paroxysms of Passion.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His friends have been compelled to put him under restraint on account of his restlessness—

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

Place of Abode, Sanquhar.

DATED this Sixteenth day of May One thousand eight hundred and fifty eight

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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.*

I, the undersigned, James Laurie Surgeon Sanquhar being a (1) Licentiate of the Royal College of Surgeons Edinbr and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) his own house in Sanquhar Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) William England, Tailor Sanquhar and that the said William England 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 Peevish, unsettled & melancholy, and is subject to occasional fits of great excitement

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His relations, when under these fits of passion have had occasion to restrain him

(SIGNED) *Name and Medical Designation,* James Laurie Surgeon

Place of Abode, Sanquhar

DATED this Sixteenth day of May One thousand eight hundred and fifty eight

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, [illegible] Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) James England
in Sanquhar.
Certificates under the hands of William Ray
and James Laurie, 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 England Sailor in Sanquhar and that the said
William England 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 England as a Patient into the (6) Public Asylum of Crichton 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 England which accompanied the said Petition.

(SIGNED) John D. Veitch

DATED this Seventeenth day of May One thousand eight hundred and fifty eight years

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.

800
William Ringland
18/6/68
800
No 11

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 Dinwoodie, Inspector of Poor Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Breck Shoemaker 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 Breck. Shoemaker to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Dinwoodie, Inspector

(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 May one thousand eight hundred and Fifty Eight

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 Breck
2. Sex and Age,	Male - about 79 years
3. Married, Single, or Widowed,	Widower
4. Condition of Life, and previous Occupation (if any),	Shoemaker
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Southern Counties Asylum
7. Place where Found and Examined,	Southern Counties Asylum
8. Length of time Insane,	about a fortnight
9. Whether first Attack,	Second attack
10. Age (if known) on first Attack,	about 60 years
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
12. Duration of existing Attack,	About a fortnight since the first Symptoms appeared
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,	Dumfries
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 Breck, Shoemaker, Dumfries a Son No
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	where not definitively answered, the particulars could not be fully ascertained.

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

(SIGNED)* Name, John Dinwoodie, Insp.

DATED this Twenty second day of May one thousand eight hundred and Fifty Eight

* To be Signed by the Party applying.

Lunacy Board, Dec.—57.—1209.

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 Gilchrist 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) Southern
Comlin aspern Dumfries in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) William Brock Shoe
maker residing at Southern Comlin and that
the said William Brock 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) Depression
four extremities, melancholia

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Shutten to himself refuses his food
occupulsely as stated by his attendants

(Signed) *Name and Medical Designation,* James Gilchrist M.D.
Place of Abode, Crichton Royal Institution
Dumfries

Dated this twenty first day of May One thousand eight
hundred and forty Eight

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 Marshall M.D
being a (1) Graduate of the Faculty of Physicians
and Surgeons Glasgow and Licentiate of the 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) the Crichton
Institution Dumfries in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) William Brock
the said William Brock 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) Refuse my hes dog
to question put to him is thoughtful and
wish free from his confinement

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Says
to persons of insane Ages around part of
which there should not be a sufficiency
for the people of the work thinks his
food

(Signed) *Name and Medical Designation,* William Marshall M.D
Place of Abode, Crichton Royal Dumfries

Dated this 22 day of May one thousand eight
hundred and forty eight

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 Alexander Trotter, 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 Wm. Christie 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) William Breck a pauper and that the said William Breck 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 Breck as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Breck which accompanied the said Petition.

(Signed) John A. Trotter

Dated this Twenty fourth day of May one thousand eight hundred and fifty eight years

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.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, or Private.
(7) Public, District, or Private.

621

Jn Williams Brick

24/5/58

621

No 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.]

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 Geo. Osborne

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Lorimer 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 Lorimer to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Geo. Osborne. Insp. of Poor

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

DATED this 27th (*) day of May One thousand eight hundred and fifty eight

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 Lorimer
2. Sex and Age,	Male — Age 55 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,	Free Church
6. Previous Place of Abode,	Kingsburn, Sanquhar
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	about ten days ago.
9. Whether first attack,	First Attack
10. Age (if known) on first Attack,	fifty five
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Continuing
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	occasionly threatens
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	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,	Elizabeth Menzies — his Wife residing at Kingsburn, parish of Sanquhar
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*, Geo. Osborne

DATED this Twenty seventh day of May One thousand eight hundred and fifty eight

* 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 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) Kingsburn parish of Sanquhar Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) William Lorimer - ploughman residing at Kingsburn - Pauper - and that the said William Lorimer. 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 talkative very restless and engages himself turning out old furniture to have it sold by auct sometimes he is going to buy estates

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

None.

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

Place of Abode, Sanquhar.

DATED this 27th day of May. One thousand eight hundred and fifty eight.

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 Laurie 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) Kingsburn parish of Sanquhar Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) William Lorimer, Farm Ser! Kingsburn Sanquhar, a Pauper and that the said William Lorimer 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 very un! restless - wanders about all day, sleeps little, & is purchasing Mungoing estates! Citing parties to Edr he who are in his debt, Has sold his furniture & is about to dispose to one of his estates

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

His wife states that he eats his meals voluntarily with Knives & fork

(SIGNED) *Name and Medical Designation,* James Laurie Surg.

Place of Abode, Sanquhar

DATED this 27th day of May One thousand eight hundred and fifty eight

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 Gillies, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) George Osborne, Inspector of Poor Sanquhar Certificates under the hands of William Kay and James Laurie, 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 Lorimer, a pauper and that the said William Lorimer 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 Lorimer 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 William Lorimer which accompanied the said Petition.

(SIGNED) John P Gillies

DATED this Twenty eighth day of May One thousand eight hundred and fifty eight year

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.

622
William Sommer
29/5/58

622
1032

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 McKie, farmer Glenlaugh

Kirkconnel humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Milligan or McKie, my assistant labourer 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 Milligan or McKie to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(SIGNED) Joseph McKie

(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 May one thousand eight hundred and fifty eight

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 Milligan or McKie
2. Sex and Age,	Female (age probably in Asylum Books - 46
3. Married, Single, or Widowed,	Widow of late Chas McKie
4. Condition of Life, and previous Occupation (if any),	Farmer
5. Religious Persuasion, so far as known,	Presb.
6. Previous Place of Abode,	Newhall or Knowehead Farm - Barjarg
7. Place where Found and Examined,	New Cale Barjarg
8. Length of time Insane,	a few days
9. Whether first Attack,	Second attack
10. Age (if known) on first Attack,	~~In Asylum Books~~
11. When and where previously under Examination and Treatment,	In Southern Counties Asylum
12. Duration of existing Attack,	a few days
13. Supposed Cause,	a quarrel with a domestic
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	~~No~~ Yes
16. Whether Dangerous to others,	Yes
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,	Joseph McKie Farmer Glenlaugh - Barjarg Brother of the late husband Two Children are young Yes three sisters
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,* Joseph McKie

DATED this thirty first day of May one thousand eight hundred and fifty eight

* 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, Andrew Cuckton Chalmers being a (1) Doctor 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) Kinnethmont Kirk Turnpike in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Milligan or McPhie Farmers wife Auchnacall Banffshire and that the said Mary Milligan or McPhie 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) Incoherent talking, & complaining of those about her want of any profession. Complains much of a nasty which does not exist.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Statements corroborating the above given her attendants & Turnpike keeper

(SIGNED) *Name and Medical Designation,* Andr. C. Chalmers, Md.

Place of Abode, Kinnethmont

DATED this 31st day of May One thousand eight hundred and fifty eight

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 Gibbon 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) Strathmore Combie Asylum Dundee in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Milligan or McPhie Farmers wife Auchnacall Banffshire and that the said Mary Milligan or McPhie 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) Sullen morose and excitable

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Quarrelled with one of her servants and became violent and outrageous and has continued insane since, as stated by her husband

(SIGNED) *Name and Medical Designation,* James Gibbon MD

Place of Abode, Auchtonreoch Royal Cemetery Dundee

DATED this Thirtieth day of May one thousand eight hundred and fifty eight

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 Milligan or Mc Kie is a (1) Lunatic hereby further certify that the Case of the said Mary Milligan or Mc Kie is One of Emergency, and I recommend the immediate removal of the said Mary Milligan or Mc Kie to an Asylum accordingly.

Name, Andrew Crichton M.D.

Place of Abode, Thornliebank

DATED this 31st day of May one thousand eight hundred and fifty eight.

(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, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Joseph Mc Kie Farmer, Glenloch Kyle Certificates under the hands of Andrew Crichton Chalmers and Anne 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) Mary Milligan or Mc Kie residing at Newhall, Bargaly and that the said Mary Milligan or Mc Kie 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 Mary Milligan or Mc Kie 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 Milligan or Mc Kie which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this First day of June one thousand eight hundred and fifty eight years

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

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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.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, or Private.
(8) Public, District, or Private.

623

Mary Milligan
or Mc Vie
31/5/58

623

1835

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 Dinwoodie, Inspector of Poor Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Caldwell residing at Gas Close 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 Caldwell to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) John Dinwoodie Inspector

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

DATED this First (3) day of June one thousand eight hundred and fifty eight

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 Caldwell
2. Sex and Age,	Female – 36 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,	Presbyterian
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	Since infancy
9. Whether first Attack,	Has been so from infancy
10. Age (if known) on first Attack,	Not Known
11. When and where previously under Examination and Treatment,	Dumfries
12. Duration of existing Attack,	Not Known
13. Supposed Cause,	Alleged to be from bad Nursing
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. 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 Rain, Astralia, half sister. had a brother in this town who committed Suicide on account of a love affair –
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Could not be accurately ascertained

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

(SIGNED)* *Name,* John Dinwoodie Inspector

DATED this First day of June one thousand eight hundred and fifty Eight

* 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.

(6) *State the facts.*

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

I, the undersigned, Graduate of the University of Edinb
being a (1) Physician & licentiate of said University
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Gas Close, Ty
Street, Dumfries
Dumfries in the County
separately from any other Medical Practitione
visited and personally examined (4) Agnes Caldwell, a pauper
the said Agnes Caldwell and t
mind is a (5) person of
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) Talks incoheren
continuously, thinks that persons are conspiring
her of aliment &c.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
same & also, subject to fits of angry & unreason
& groundless excitement, exceedingly suspicious &c

(SIGNED) *Name and Medical Designation,* James Murray M'Culloch

Place of Abode, 38 Castle Street, Dumfries

DATED this 31st day of May One thousand eigh
hundred and fifty eight 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 Mars Hall M.D &
being a (1) Graduate of the Faculty of Physicians
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) Gas Close
Street Dumfries
Dumfries in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Agnes Caldwell, a pauper
the said Agnes Caldwell 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) talked incoher
and is continually fancying persons
to do away with her ailment

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
subject to paroxysms of anger with
the slightest cause or without
of every person intending to do her har

(SIGNED) *Name and Medical Designation,* William Mars Hall

Place of Abode Buccleuch Street Dumf

DATED this 31st day of May
hundred and fifty eight years one thousand eight

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 Alexander Trotter (1) Sheriff Substitute
of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Dunwoodie Inspector of Poor for the parish of Dumfries Certificates under the hands of James Murray McCulloch 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) Agnes Caldwell a pauper, in Gas Close Dumfries and that the said Agnes Caldwell 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 Caldwell 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 Caldwell which accompanied the said Petition.

(SIGNED) John A Trotter

DATED this Second day of June one thousand eight hundred and fifty eight

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.

624

Agnes Caldwell

2/6/68

624

1834

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 of the (2) Stewartry of Kirkcudbright *and his Substitutes.*—

The Petition of Andrew Burkby residing in Castle Douglas humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Nathaniel Burkby 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 Burkby to the Southern Counties Asylum, Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Andrew W Burkby

(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 fifty eight 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,	Nathaniel Burkby
2. Sex and Age,	Male Age 55 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Castle Douglas
7. Place where Found and Examined,	Do
8. Length of time Insane,	for a period of 3 or 4 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,	
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	No
16. Whether Dangerous to others,	worst against his wife and children
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kelton
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,	Andrew Burkby his Son None
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,* Andrew W Burkby

DATED this fourth day of June one thousand eight hundred and fifty eight years

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1000.

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.

I, the undersigned, being a Licentiate of the Royal College of
being a (1) Surgeons in Edinburgh

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

and being in actual practice as a (2) Surgeon

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

hereby certify, on soul and conscience, that I have this day, at (3) Academy
Castle Douglas
Kirkcudbright in the County of
separately from any other Medical Practitioner

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

visited and personally examined (4) Nathaniel Burbidge Labourer
Castle Douglas
and that

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

the said Nathaniel Burbie 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) Natural manner & ... Not quite changed. That his language was extremely incoherent ... that with great volubility he uttered words ... Meaning. Expression & countenance ... indicated mental derangement

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) By ... Nathl Burbie's wife. That her husband had for last month ... Sleepless nights. That he had threatened violence ... ordered a person to call Mrs Burbie's throat.

(SIGNED) *Name and Medical Designation,* James Laidlaw L.R.C.S.

Place of Abode, Castle Douglas

DATED this 30th day of June One thousand eight hundred and Fifty eight

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.

I, the undersigned, being a Physician of the University of Glasgow
being a (1) Physician

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

and being in actual practice as a (2)

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

hereby certify, on soul and conscience, that I have this day, at (3) Academy
Castle Douglas
Kirkcudbright in the County of
separately from any other Medical Practitioner;

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

visited and personally examined (4) Nathaniel Burbidge Lab
Castle Douglas
and that

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

the said Nathaniel Burbidge 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) Natural Manner ... quite changed. That his language was extremely ... that with great volubility he uttered words ... Meaning. That he ... his eyes shut & the ... body. It seems that his ... indicated mental derangement

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) By ... Burbidge wife. That her husband had ... sleepless nights for the last ... & that ... threatened violence ...

(SIGNED) *Name and Medical Designation,* James Smillay M.D

Place of Abode, Castle Douglas

DATED this 30th day of June one thousand eight hundred and fifty eight

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) Steward Substitute
of the (2) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3) Andrew M. Burkley
residing in Castle Douglas
Certificates under the hands of James Lindlay L.R.C.S. of Edinburgh
and James Findlay 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)
Nathaniel Burkley labourer Castle Douglas and that the said
Nathaniel Burkley is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Nathaniel Burkley as a Patient into the
(6) Southern Counties Asylum of Dumfries and I authorise
his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Nathaniel
Burkley which accompanied the said Petition.

(SIGNED) W. H. Dunbar Steward Substitute

DATED this fourth day of June one thousand eight hundred and Sixty Eight years.

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.

625

Nathaniel Bartlett

3/6/35

625

1835

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) Stewartry of Dumbarton & Bute *and his Substitutes,—*

The Petition of Margaret Gilchrist residing at 28 Battery Place Rothesay humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Gilchrist 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 Gilchrist to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(Signed) Margaret Gilchrist

(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 May one thousand eight hundred and fifty eight.

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 Gilchrist
2. Sex and Age,	Male Age 51
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	late Surgeon of the Hon.ble E. I. Company's Service
5. Religious Persuasion, so far as known,	Member of the Church of Scotland
6. Previous Place of Abode,	Madras
7. Place where Found and Examined,	28 Battery Place Rothesay
8. Length of time Insane,	Since Feby 1857.
9. Whether first Attack,	Has had similar attacks since 1851.
10. Age (if known) on first Attack,	about 43.
11. When and where previously under Examination and Treatment,	Govt St Georges Hospital Madras - Lunatic Asylum, Bengal.
12. Duration of existing Attack,	About fifteen months
13. Supposed Cause,	Sunstroke, from a journey to the Sand in India in 1844.
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	When excited or opposed, at times
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Without the slightest provocation.
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,	Margaret Gilchrist, 28. Battery Place Rothesay. Wife of the above Patient No Member of his family 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,* Margaret Gilchrist.

Dated this thirty first day of May one thousand eight hundred and fifty eight.

* 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.*

I, the undersigned, John Combe Maddever M.D. being a (1) Doctor of Medicine of the Univ of Glasgow and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) No 20 Battery Place Rothesay Bute in the County of separately from any other Medical Practitioner,

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

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

visited and personally examined (4) Dr William Gilchrist Surgeon H.E.I Co service and that the said Dr William 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) Restlessness sleeplessness great aversion towards his wife times, at others the reverse. And an inordinate craving for malt liquors

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) resorting to the various dram shops and Spirits of Wine Tincture Gentian and other stimulants joining for board Messmates and obtaining Whisky the attendants. and other spirits from a person of

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

Place of Abode, 5 High Street Rothesay

DATED this 30th day of May One thousand eight hundred and fifty eight

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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.*

I, the undersigned, Charles Follows Maclachlan 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) No 20 Battery Place Rothesay Bute in the County of separately from any other Medical Practitioner,

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

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

visited and personally examined (4) Dr William Gilchrist Surgeon H.E.I Companys Service and that the said Dr William 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) A constant and uncontrollable desire for stimulating drinks being almost always in a state of intoxication resulting from taking incessantly, and often procuring poisonous

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Inattention to cleanliness, and cruelty in his personal appearance - Violent scenes in his family These particulars were communicated by his wife

(SIGNED) *Name and Medical Designation,* Charles Follows Maclachlan

Place of Abode, 5 Battery Place Rothesay

DATED this twenty fifth day of May one thousand eight hundred and fifty eight.—

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 Coventry Buck (1) Sheriff substitute
of the (2) County of Bute
having had produced to me, with a Petition at the instance of (3) Margaret Gilchrist residing at No 20 Battery Place Rothesay,
Certificates under the hands of John Coombe Maddocks
and Charles Fellowes Mackechnie, 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 Gilchrist Surgeon R.N.R. and that the said
William 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 William Gilchrist as a Patient into the
(6) Public Asylum of Dumfries and I authorise
the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Gilchrist which accompanied the said Petition.

(SIGNED) A Buck

DATED this first day of June one thousand eight hundred and fifty six

To the Superintendent of the (7) Public
Asylum of Dumfries or
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.

Dec 1891
St William Gaol Lincoln
4/6/58
Lot
No 12

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 David Gordon

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Ann Lennoxy Gordon 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 Ann Lennoxy Gordon to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) David Gordon

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

DATED this fifth (3) day of June one thousand eight hundred and fifty eight

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 Lennoxy Gordon
2. Sex and Age,	Female 43
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Wife of Medical Man
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Edinburgh
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	Some ~~months~~ years
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	36
11. When and where previously under Examination and Treatment,	Dumfries & Montrose Asylums
12. Duration of existing Attack,	Some 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. 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,	Dr David Gordon 32 Heriot Row Edinburgh — Husband Brother Paralytic.
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, David Gordon

DATED this fifth day of June one thousand eight hundred and fifty eight

* 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.*

I, the undersigned, James Steenes being a (1) Graduate of Medicine of the University of Edinburgh & Licentiate of the Royal College of Surgeons 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 Dumfries separately from any other Medical Practitioner,

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

visited and personally examined (4) Mrs Gordon of Edinr. 32 Buccleuch Place Edinburgh Lunacy Practice and that the said Mrs Gordon is a (5) a 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.:—

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

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Nervous irritability and excitement.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Depressomania, from herself, and others who-- having left me under similar Institutions, & left for the same cause.

(SIGNED) *Name and Medical Designation,* James Steenes M.D.

Place of Abode, Dumfries

DATED this fourth day of June One thousand eight hundred and fifty eight.

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.*

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) Crichton Royal Institution, Dumfries in the County of Dumfries separately from any other Medical Practitioner,

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

visited and personally examined (4) Mrs Ann Lawson Gordon 32 Buccleuch Place Edinburgh and that the said Mrs Ann Lawson Gordon 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.:—

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

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) General excitability and excitement and uncontrollable craving for stimulants.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Incessant craving for stimulants accompanied by paroxysms of excitement are testified to by her husband

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crichton Royal Institution

DATED this fourth day of June one thousand eight hundred and fifty eight.

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 Mrs Anne Sauneway Gordon 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 Dickson Cotter Esquire Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) David Gordon M.D. Edinburgh Certificates under the hands of James Grieve 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) Anne Sauneway Gordon and that the said Anne Sauneway Gordon 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 Sauneway Gordon 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 Anne Sauneway Gordon which accompanied the said Petition.

(SIGNED) John D. Cotter

DATED this Eighteenth day of June one thousand eight hundred and fifty eight

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.

403 802
Ann Lawson Foster
4/6/1850

802
No 13

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 Thomson, Tailor, Howgill, *as the Lunatic's Guardian,* John McLellan Inspector of Poor of the parish of Annan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Thomson my Son at Howgill 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 Thomson – to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Robert Thomson
John McLellan Insp.r

(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 June one thousand eight hundred and fifty eight

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 Thomson
2. Sex and Age,	Male, aged 21
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Hawking Drapery Goods for Sale
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Sometime in England
7. Place where Found and Examined,	Howgill
8. Length of time Insane,	About three weeks
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	21
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Nearly three weeks
13. Supposed Cause,	Hereditary, as is supposed
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	Disposed to self destruction
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Annan
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,	Robert Thomson, Tailor, Howgill, Petitioner, his Father whose daughter, Janet Thomson, ~~late~~ inmate of the above Asylum, chargeable to the Parish of Annan
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. Robert Thomson

(SIGNED)* *Name,* John McLellan Insp.r of Poor

DATED this Ninth day of June one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1280.

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.*

I, the undersigned, Agnes B Bayis 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) Bonnyhill in the Parish of Annan Dumfries in the County of separately from any other Medical Practitioner visited and personally examined (4) George Thomson, Pauper residing at Hourgill and that the said George 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Extreme dejection of spirits in Conversation.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) several attempts to commit suicide, according to his father's statement. Religion is the principal topic that he will converse on.

(SIGNED) *Name and Medical Designation,* Agnes B Bayis M.B.

Place of Abode, Friar Park

DATED this Ninth day of June One thousand eight hundred and fifty eight.

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.*

I, the undersigned, Wilkie Ewart being a (1) Member of the Royal College of Surgeons in Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Annan in the Parish of Annan Dumfries in the County of separately from any other Medical Practitioner visited and personally examined (4) George Thomson, Pauper residing at Hourgill and that the said George 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Extreme dejection and taciturnity, and at times his refusing to take food or Medicine.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Father and Mother state his having made at least two attempts at self-destruction

(SIGNED) *Name and Medical Designation,* Wilkie Ewart Surgeon

Place of Abode, Edwards West Annan

DATED this Ninth day of June one thousand eight hundred and fifty eight.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in case 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, Alexander Hannay (1) Sheriff Substitute
of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Thomson, Tailor Howgill & Wm McClellan Inspectors of Poor Annan
Certificates under the hands of Agnew Black Boyle M.D.
and William Swait, 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) George Thomson at Howgill, Pauper and that the said George 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 George Thomson as a Patient into the (6) Public Asylum of Southern Counties, Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Thomson which accompanied the said Petition.

(SIGNED) Alex Hannay

DATED this Eleventh day of June one thousand eight hundred and fifty Eight.

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.

627
Hoyt Thomson
12/6/58
627
1034

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 John Dinwoodie, Inspector of Poor, Dumfries

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Robson 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 Alexander Robson to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Dinwoodie, Inspr

(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 June one thousand eight hundred and Fifty Eight

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 Robson
2	Sex and Age,	Male – 27 years
3	Married, Single, or Widowed,	Single
4	Condition of Life, and previous Occupation (if any),	Agricultural Servant
5	Religious Persuasion, so far as known,	Established Church of Scotland
6	Previous Place of Abode,	Maxwelltown
7	Place where Found and Examined,	Dumfries
8	Length of time Insane,	About two or three years since first observed
9	Whether first Attack,	First attack
10	Age (if known) on first Attack,	About 24
11	When and where previously under Examination and Treatment,	Was never under treatment before
12	Duration of existing Attack,	About two or three 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,	Dumfries in the Meantime
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 Kirkpatrick or Robson, Mother Maxwelltown – 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, John Dinwoodie, Inspr

DATED this Twelfth day of June one thousand eight hundred and Fifty Eight

* 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, [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 Dumfries separately from any other Medical Practition visited and personally examined (4) Alexander Robson and th the said Alexander Robson 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. :—

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

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

(SIGNED) *Name and Medical Designation,* [illegible]

Place of Abode, [illegible]

DATED this [illegible] day of [illegible] One thousand ei hundred and [illegible]

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 member of the Royal being a (1) College of Physicians in Edinburgh and Member of the College of 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 Prison of Dumfries in the County of Dumfries separately from any other Medical Practition visited and personally examined (4) Alexander Robson and th the said Alexander Robson is a (5) Lunatic and a proper person to be detain under Care and Treatment, and that I have formed this opinion upon the follows grounds, viz. :—

1. Facts indicating Insanity observed by myself: (6) He is under the impression that he has been shot at by several people, that a friend of his has been hanged by order of the Sheriff — that a number of people are present in his apartment which is not the case — [illegible]

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Found on the street during the night in a state of incoherence

(SIGNED) *Name and Medical Designation,* William Scott MD

Place of Abode Dumfries

DATED this 12th day of June one thousand ei hundred and 58 —

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 is One of Emergency, and I recommend the immediate removal of the said

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, Alexander Ramsay, Sheriff Substitute (2)
of the (3) County of Dumfries
having had produced to me, with a Petition at the instance of (4) 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 (5)
Alexander Robson a pauper and that the said
Alexander Robson is a (5) person of ~~unsound~~ unsound
mind and Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Robson 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 Alexander Robson which accompanied the said Petition.

(SIGNED) Alex Ramsay

DATED this Twelfth day of June one thousand eight hundred and fifty eight 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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CRICHTON ROYAL INSTITUTION,

Lunatic Department.

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 SIBBALD, Esq. of Dalswinton.
M. C. MAXWELL, Esq. of Terreglen.
P. DUDGEON, Esq. of Cargen.
THOMAS STEUART 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.
ANDREW 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 (3d 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 hey 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 department of the Patient.	Alex Robertson —
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	Not known
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.?	No! known
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?	Not that I am aware of Not for any that I know of
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?	Not any in particular 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.	All 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
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?	Very little known of the Man here
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	No
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thought excited by any particular subject or event?	No
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 prominent propensity, or tendency to crime?	Not that is known of
12. What treatment has been resorted to, for what length of time, and with what success?	Not any
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	About two years Never

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 David Lockerby, residing at Warrenhill, Torthorwald humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Lockerby, my 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 Lockerby to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) David Lockerby

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

DATED this 16th (3) day of June one thousand eight hundred and fifty eight 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 Lockerby
2. Sex and Age,	male, aged twenty two
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Travelling Draper's assistant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dudley, England
7. Place where Found and Examined,	Warrenhill - Parish of Torthorwald
8. Length of time Insane,	a few weeks, so 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,	See answer to No. 9
13. Supposed Cause,	Loss of situation
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	This is suspected to
16. Whether Dangerous to others,	suffered not.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Torthorwald
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,	David Lockerby - residing at Warrenhill, Parish of Torthorwald father of the Patient, no other Member of family 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, David Lockerby

DATED this 16 day of June one thousand eight hundred and fifty eight

* 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, James Aldebrid 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
Crombie's Asylum Dumfries in the County
of Dumfries separately from any other Medical Practitioner
visited and personally examined (4) William Lockerby
Weaver Burgh
the said William Lockerby and that
is a (5) 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) Taciturnity - Depression - Loss of Memory - Inability to appreciate his relation to persons and objects

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Placed himself upon a Rail
way Train - supposed with sinister
intentions

(SIGNED) *Name and Medical Designation,* James Aldebrid M.D.

Place of Abode, Crichton Royal Institution

DATED this seventeenth day of June One thousand eight
hundred and fifty eight

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 Borthwick
being a (1) Graduate of the University of Edinb
and being in actual practice as a (2) Physician and Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Rosedale
Rothesay Terrace in the County o
separately from any other Medical Practitioner
visited and personally examined (4) William Lockerby
the said William Lockerby and that
is a (5) 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) Taciturnity,
willingness to submit to Medical Examination, a
total disregard of ordinary prudence in taking
a Ferry

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
He by the States that he is Factory Inspector
that Crombie urged him to inspect this
and that he has attempted to destroy himself

(SIGNED) *Name and Medical Designation,* Alexr Borthwick M.D.

Place of Abode Rosedale Rothesay Terrace

DATED this 17th day of June one thousand eight
hundred and fifty eight

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 William Lockerby is a (1) person of unsound mind, hereby further certify that the Case of the said William Lockerby is One of Emergency, and I recommend the immediate removal of the said William Lockerby to an Asylum accordingly.

Name, James Aitchison M.D.

Place of Abode, Crichton Royal Institution Dumfries

DATED this 18th day of June one thousand eight hundred and fifty eight.

(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 Pagan Foster (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) David Lockerby residing at Warmanbie Johnstonwald Certificates under the hands of James Aitchison and Alexander Bowman, 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 Lockerbie at Warmanbie and that the said William Lockerbie 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 Lockerby 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 Lockerbie which accompanied the said Petition.

(SIGNED) John P. Foster

DATED this 18th day of June one thousand eight hundred and fifty eight

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.

629

William Lochrie

17/6/58

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1039

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 Mrs Sherierson - Wood Horn Mosspeth -

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Hutchinson - 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 ~~Elizabeth Hutchinson~~ to the Crichton Royal Institution and to sanction the admission into the said Asylum.

(SIGNED) Mary Ann Shepherdson

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

DATED this Thirtieth (3) day of June one thousand eight hundred and fifty eight

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 Hutchinson
2. Sex and Age,	Female - 50 Years
3. Married, Single, or Widowed,	Single -
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Wigton Cumberland
7. Place where Found and Examined,	do do
8. Length of time Insane,	about 16 Years
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	about 24 Years -
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	
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,	
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 Hutchinson - Hollingsworth Durham Sister Not Known
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,* Mary Ann Shepherdson

DATED this Thirtieth day of June one thousand eight hundred and fifty eight

* 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.*

I, the undersigned, Thomas Mechan Stacey being a (1) Member of the College of Physicians and Physician and (2) hereby certify, on soul and conscience, that I have this day, at (3) West Street Wigton in the County of Cumberland separately from any other Medical Practitioner visited and personally examined (4) Elizabeth Hutchinson

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

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

Gentlewoman - Wigton - Cumberland. and the said Elizabeth Hutchinson 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 own admission that she attempted to commit Suicide with a Knife & her throat - & Jumping out of bed & attempting to throw herself over the Stairs - & out of the window - & refusing her medical attendant

(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,* Thomas Mechan Stacey

Place of Abode, West Street Wigton

DATED this 18th day of June One thousand eight hundred and [illegible]

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.*

I, the undersigned, James Gilchrist M.D. being a (1) graduate of the University of Edinburgh and (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Crichton Royal Institution Dumfries Dumfries in the County of separately from any other Medical Practitioner visited and personally examined (4) Elizabeth Hutchinson

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

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

gentlewoman Cabinet Maker at present Inmate of this Institution and the said Elizabeth Hutchinson 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) Recent depression, sleeplessness and delusions Recent depression & delusions

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Repeated attempts at suicide as testified by her medical attendant and nurse She suffers from a delusion upon the subject of these attempts

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crichton Royal Institution Dumfries

DATED this thirtieth day of June one thousand eight hundred and [illegible]

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, Alexander Hannay Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Mrs Mary Anne Shepperdson of Woodhouse Morpeth Certificates under the hands of Thomas McNaughton M.D. and James Gilchrist 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 Hutchinson of Western Cumbernauld and that the said Elizabeth Hutchinson 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 Hutchinson 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 Elizabeth Hutchinson which accompanied the said Petition.

(SIGNED) A. McHannay

DATED this Thirtieth day of June one thousand eight hundred and fifty eight

To the Superintendent of the (7) Public 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, or Private.
(7) Public, District, or Private.

803
Mary Watkinson
1858
888
1914

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 Carruthers Inspector of Poor of Kirkpatrick Fleming humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Sarah Hetherington 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 Hetherington to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John Carruthers

(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 June one thousand eight hundred and Fifty Eight

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 Hetherington
2. Sex and Age,	Female — 22 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Teacher's daughter - Domestic Servant
5. Religious Persuasion, so far as known,	Free Church of Scotland
6. Previous Place of Abode,	Burnhead - Kirkpatrick Fleming
7. Place where Found and Examined,	Poorhouse
8. Length of time Insane,	Part of last two years
9. Whether first Attack,	Second attack
10. Age (if known) on first Attack,	19 or 20 years
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
12. Duration of existing Attack,	Three or four 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. 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 Hetherington Teacher Burnhead Father — Has a Sister 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 Carruthers

DATED this Twenty Second day of June one thousand eight hundred and Fifty Eight

* 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.*

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) The Combination Poorhouse Kirkpatrick Fleming in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Sarah Nicholson, Pauper, Kirkpatrick Fleming Poorhouse and that the said Sarah 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) The great change in her deportment generally, pompous & lofty demeanour & her talkativeness and rambling conversation merry and laughing when she might be rationally supposed to be in the opposite mood

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Singing, talking and dancing late and early unseasonable times and hours

(SIGNED) *Name and Medical Designation,* James Carruthers, Surgeon

Place of Abode, Kirkpatrick Fleming

DATED this Nineteenth day of June One thousand eight hundred and fifty Eight

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.*

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) Kirkpatrick Fleming Poorhouse in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Sarah Nicholson Pauper, Poorhouse, Kirkpatrick Fleming and that the said Sarah Nicholson 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) The general deportment, expression of countenance, talkativeness, rambling conversation, and malice against relatives

(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,* William Young, Surgeon

Place of Abode, Gelspecham

DATED this Nineteenth day of June one thousand eight hundred and fifty Eight

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 Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Cairns Inspector of Poor of Kirkpatrick Fleming Certificates under the hands of James Cairns Fleming 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) Sarah Robertson, a Pauper and that the said Sarah Robertson is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Sarah Robertson 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 Sarah Robertson which accompanied the said Petition.

(SIGNED) J. Pitcairn Trotter

DATED this Twenty third day of June one thousand eight hundred and fifty Eight 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.

630

Sarah Herbertson

23/6/58

630

No 40

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 John Carruthers Inspector of Poor of Parish of Kirkpatrick Flemming

humbly sheweth, that it appears from the subjoined Statement and accompanying Medical Certificates, that Phillis Gordon 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 Phillis Gordon, to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John Carruthers

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

DATED this Twenty Second (*) day of June one thousand eight hundred and fifty Eight

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,	Phillis Gordon
Sex and Age,	Female — 50 years
Married, Single, or Widowed,	Married
Condition of Life, and previous Occupation (if any),	Labourer's Wife
Religious Persuasion, so far as known,	Church of Scotland
Previous Place of Abode,	Woodhouse
Place where Found and Examined,	Woodhouse
Length of time Insane,	Insanity has come on gradually of late
Whether first Attack,	Yes
Age (if known) on first Attack,	about 48
When and where previously under Examination and Treatment,	
Duration of existing Attack,	Symptoms observed more than 12 months ago
Supposed Cause,	Not known
Whether subject to Epilepsy,	No
Whether Suicidal,	No
Whether Dangerous to others,	Doubtful
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkpatrick Flemming Parish
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 Gordon Woodhouse, Husband — 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.

(SIGNED)* *Name,* John Carruthers

DATED this Twenty Second day of June one thousand eight hundred and fifty Eight

* 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, 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) the Woodhouse in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Phillis Gordon, Woodhouse, Pauper and that the said Phillis Gordon 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) The appearance of her countenance her absurd conversation and ideas, alleging that the house was falling or revolving round and her unaccountable expression of [illegible] or ill feeling towards some of her relations

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Strolling in the woods and fields at night to meet with persons whom she could not reasonably expect to meet with there

(SIGNED) *Name and Medical Designation,* James Carruthers, Surgeon

Place of Abode, Kirkpatrick Fleming

DATED this nineteenth day of June One thousand eight hundred and fifty eight

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 Goung
being a (1) Licentiate of the Royal Colleges of Surgeon Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Woodhouse in the parish of Kirkpatrick Fleming in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Phillis Gordon Pauper Woodhouse and that the said Phillis Gordon 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 incleination to wander both by day & night labouring under the delusion that her dwelling house will fall on her, and that trees follow her and her threatnings of vengeance against her relations & [illegible] injurious done her

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

(SIGNED) *Name and Medical Designation,* William Goung, Surgeon

Place of Abode Eeelefechan

DATED this nineteenth day of June one thousand eight hundred and fifty eight.

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 Pelearin Rotter, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Carruthers Inspector of Poor, Kirkpatrick Fleming Certificates under the hands of James Carruthers 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) Phillis Gordon a pauper and that the said Phillis Gordon is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Phillis Gordon 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 Phillis Gordon which accompanied the said Petition.

(SIGNED) J. Pelearin Rotter

DATED this Twenty third day of June one thousand eight hundred and fifty eight years

To the Superintendent of the (7) Public
Asylum of Southern Counties, 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.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, or Private.
(8) Public, District or Private.

631

Phillis Jordon

23/6/58

631

No 41

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 Wigtown and his Substitutes,—

The Petition of John McCallum Inspector of the Poor for the parish of Penninghame humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Finlay or McFinlay 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 Finlay or McFinlay to the Crichton Asylum at Dumfries or the Asylum and to sanction her admission into the said Asylum at Dumfries or other Asylum to be fixed by Your Lordships (SIGNED) John McCallum Inspector of Poor

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

DATED this twenty fourth (*) day of June One thousand eight hundred and fifty eight

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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 McFinlay
2. Sex and Age,	Female, 30 years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Servant of all work
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Her fathers home, Newton Stewart
7. Place where Found and Examined,	Examined in Wigtown
8. Length of time Insane,	Not Known to petitioner
9. Whether first attack,	Not Known to petitioner
10. Age (if known) on first Attack,	Not Known to petitioner
11. When and where previously under Examination and Treatment,	Not Known ever to have been so
12. Duration of existing Attack,	Not Known to petitioner
13. Supposed Cause,	Sudden news of her brothers death
14. Whether subject to Epilepsy,	reported to be subject to epilepsy
15. Whether Suicidal,	— Not known to be
16. Whether Dangerous to others,	— Not known to be
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	— Penninghame
18. Date of becoming Chargeable,	fourteenth of June 1858
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 McFinlay Back Road Newton Stewart her father Not Known
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Have been recently appointed Inspector of Poor for Penninghame

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

(SIGNED)* Name, John McCallum Inspector of Poor

DATED this twenty fourth day of June One thousand eight hundred and fifty eight

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Samuel Snowdon
being a (1) Medical Graduate of the University 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) Wigtown Prison in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Jane Kinley or M'Kinley of Motionstreet and a Pauper of Birmingham and that the said Jane Kinley or M'Kinley 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) From personal Consultation and observation as well as from her actions.

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

(SIGNED) *Name and Medical Designation,* Samuel Snowdon M.D.

Place of Abode, Wigtown

DATED this 24th day of June One thousand eight hundred and fifty eight-pus.

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

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

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

(4) *Insert 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 J. Jackson
being a (1) a 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) Wigtown Prison in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Jane Kinley or M'Kinley and that the said Jane M'Kinley 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) from Conversation I came to the Conclusion that she is a Lunatic & a proper person to be detained

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

(SIGNED) *Name and Medical Designation,* Wm J. Jackson Surgeon &c

Place of Abode, Wigtown

DATED this 24th day of June One thousand eight hundred and fifty eight—58

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

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

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

(4) *Insert 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 (2) _____ 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 _____

(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, Macduff Rhind Esquire Advocate Sheriff Substitute (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) John McCallum Inspector of the Poor for the parish of Penninghame
Certificates under the hands of Samuel Snadon _____ and William J. Jackson _____, 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 Kinley or McKinley _____ and that the said Jane Kinley or McKinley is a (5) Lunatic _____

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Kinley or McKinley as a Patient into the (6) Royal ~~Asylum of~~ Crichton Institution 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 Jane Kinley or McKinley which accompanied the said Petition.

(SIGNED) M. Rhind Sheriff Sub

DATED this twenty fourth day of June One thousand eight hundred and fifty eight.

To the Superintendent of the (7) Royal Crichton Institution
~~Asylum of~~ 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, or Private.
(7) Public, District, or Private.

632
Lewis M. Kimball
25/6/51
632
M42

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 of the (2) Stewarty of Kirkcudbright *and his Substitutes,*—

The Petition of Thomas Bell, Inspector of the Poor of Longland humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary McLellan 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 Mc Lellan to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) Thomas Bell

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

DATED this Twenty eighth (3) day of June one thousand eight hundred and fifty eight

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 McLellan
2. Sex and Age,	Female 60 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Farm Servant's wife – Servant
5. Religious Persuasion, so far as known,	Free Church of Scotland.
6. Previous Place of Abode,	Kirkconnel Parish of Longland
7. Place where Found and Examined,	High Clauchan Longland
8. Length of time Insane,	Has been slightly ailing for Sixteen weeks
9. Whether first Attack,	About 12 years ago she had a slight attack
10. Age (if known) on first Attack,	About 48 years
11. When and where previously under Examination and Treatment,	About 1846 attack then very slight at her own house Kirkconnel Longland
12. Duration of existing Attack,	16 weeks
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	Believe not.
15. Whether Suicidal,	Not
16. Whether Dangerous to others,	Not
17. Parish or Union to which the Lunatic (if a Panper) is Chargeable,	Longland
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 McLellan Husband
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 Bell

DATED this Twenty eighth day of June one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1500.

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 of Edinburgh 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 Clach
of Tongland in the County
Kirkcudbright separately from any other Medical Practitioner
visited and personally examined (4) Mary McLellan
and that
the said Mary McLellan 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 restless
ness & flightiness with mild wandering look a
bonis & inability to take interest in the duties of the
household & family - as formerly - but more depres
sion.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Constant wakefulness & believing a cause of
anxiety not existing - at times in state of
Religious Melancholy - the last short time
the first attack but the second at least (12

(Signed) Name and Medical Designation, } J M Shand M.D.

Place of Abode, Oak Bay House Kirkcudbright

Dated this twentieth day of June One thousand eight
hundred and fifty eight.

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 Sandby Shand
being a (1) Physician of the Edinburgh University
and being in actual practice as a (2) Medical Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) High Clachan
of Tongland in the County of
Kirkcudbright separately from any other Medical Practitioner
visited and personally examined (4) Mary McLellan
and that
the said Mary McLellan 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 Constant Countenance
Speech Slow & hesitating, Fended not be fixed to one subject - Must sh
does not sleep save three hours pilling into the Bed - had visited the sea
but found nothing she did not think it was, Man or woman, Nurse

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
That she takes no interest in the affairs of the Family, walks
Sleeps in Bed at night & is constantly talking to herself

(Signed) Name and Medical Designation, } John S. Shand M.D. &c.

Place of Abode Royal Burgh of Kirkcudbright

Dated this 23d day of June one thousand eight
hundred and fifty eight

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, William Hyndman Sumbar, Esquire, Steward Substitute of the (2) Steward of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Thomas Bell Inspector of Poor for the Parish of Tinwald Certificates under the hands of John Shand and John Sanders Shand, 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 McLellan, a pauper, and that the said Mary McLellan 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 McLellan as a Patient into the (6) Dumfries Lunatic 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 McLellan which accompanied the said Petition.

(SIGNED) W. H. Sumbar, Steward Substitute

DATED this twenty eighth day of June one thousand eight hundred and fifty eight year

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, or Private.
(7) Public, District or Private.

~~633~~ 633

Mary McLellan

2/3/58

633

1043

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) Co of Dumfries
of *and his Substitutes,*

The Petition of William Edleston of Beanfort JP Dumfries.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Scott - servant to the applicant 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 Scott to the Crichton Institution and to sanction his admission into the said Asylum.

(SIGNED) W Edleston

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

DATED this first (3) day of July one thousand eight hundred and fifty eight

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 Scott
2. Sex and Age,	male 24 years old
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,	Langholm
7. Place where Found and Examined,	Westerkirk (Beanfort)
8. Length of time Insane,	one year
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,	—
14. Whether subject to Epilepsy,	—
15. Whether Suicidal,	no
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,	Jean Stothard (or Scott) his Mother residing at Langholm
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,* W Edleston

DATED this first day of July one thousand eight hundred and fifty eight

* 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 Johnston Carlyle M.D. Edin[burgh] 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) Town Hall Langholm in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) George Scott, Burgher [of Langholm] and that the said George Scott of unsound mind is a (5) 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) He is labouring under delusions, such as those from his Christ like whitened raiment or after he returned to [illegible] his seeing and hearing unnatural exhibitions of his feelings and sentiments —

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

(SIGNED) *Name and Medical Designation,* W. J. Carlyle M. D. Edin[burgh]

Place of Abode, Langholm

DATED this first day of July One thousand eight hundred and fifty eight

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 Maycroft Surgeon Langholm being a (1) Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (2) Surgeon at Langholm hereby certify, on soul and conscience, that I have this day, at (3) Langholm in the County of Dumfries — separately from any other Medical Practitioner, visited and personally examined (4) George Scott residing at Burgh and that the said George 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.:— That he is labouring under illusions of

1. Facts indicating Insanity observed by myself: (6) ascribing certain morbid bodily feelings to the influence and operations of the Holy Ghost —

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

(SIGNED) *Name and Medical Designation,* William Maycroft Surgeon Langholm

Place of Abode, Langholm

DATED this first day of July one thousand eight hundred and fifty eight —

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, James Deans Trotter (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William C. Malcolm residing at Burnfoot Certificates under the hands of William Johnstone 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) George Scott, servant to said Petitioner and that the said George 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 George Scott as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Scott which accompanied the said Petition.

(SIGNED) James Deans Trotter

DATED this Third day of July one thousand eight hundred and fifty eight

To the Superintendent of the (7) Public *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, or Private.
(7) Public, District, or Private.

6344
Mary Ann Cook
May 6th
1844

6344
Mary Ann Cook
May 6th
1844

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 Andrew Nicholson Cummertrees

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Gorstown Thorburn my cousin & Broad 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 Gorstown Thorburn to the Southern Counties Asylum Dalgs and to sanction his admission into the said Asylum.

(SIGNED) Andrew Nicholson

(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 July one thousand eight hundred and fifty eight

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 ~~Gorstown~~ Gorstown Thorburn
2. Sex and Age,	Male 60 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Surgeon
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	Cummertrees
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	6 years
9. Whether first Attack,	3d attack
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Southern Counties Asylum Dumfries
12. Duration of existing Attack,	1 month
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. 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,	Wife Mrs Thorburn Cummertrees, near Lond. Distant Relations are 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,* Andrew Nicholson

DATED this fourteenth day of July one thousand eight hundred and fifty eight

* 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.*

I, the undersigned, James Gibson 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 of
separately from any other Medical Practitioner
visited and personally examined (4) Dr James Gairstown Thorburn Labelled residing at Cuningplatts Thorburn and that
the said Dr James Gairstown Thorburn 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 excitement abusive language

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Wanders at night - wastes his property on improper objects.

(SIGNED) *Name and Medical Designation,* James Gibson M.D.

Place of Abode, Crichton Royal Institution

DATED this eleventh day of July One thousand eight hundred and fifty eight

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, 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) Southern Counties Asylum, Dumfries
in the County of
separately from any other Medical Practitioner
visited and personally examined (4) Dr James Gairstown Thorburn and that
the said Dr James Gairstown Thorburn 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, and a long statement of delusions and equally improbable events

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) John Paterson his attendant states that he was very much excited, and going to hurt himself

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

Place of Abode, Dumfries

DATED this twelfth day of July one thousand eight hundred and fifty eight

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 Gorstown Thorburn is a (1) person of unsound mind, hereby further certify that the Case of the said James Gorstown Thorburn is One of Emergency, and I recommend the immediate removal of the said James Gorstown Thorburn to an Asylum accordingly,

Name, James Gilchrist M.D.

Place of Abode, Crichton Royal Dumfries

DATED this eleventh day of July one thousand eight hundred and fifty eight.

(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) Andrew Nicholson Cummertrees Certificates under the hands of James Gilchrist 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) James Gorstown Thorburn and that the said James Gorstown Thorburn 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 Gorstown Thorburn as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Gorstown Thorburn which accompanied the said Petition.

(SIGNED) J Pitcairn Trotter

DATED this 14th day of July one thousand eight hundred and fifty eight 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.

635

James Boston & Sons

10/7/64

635

1045

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) Shirestry of Kirkcudbright *and his Substitutes,—*

The Petition of Charles Hogg

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Hogg 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 Hogg to the Dumfries & Galloway Asylum and to sanction his admission into the said Asylum.

(SIGNED) Charles Hogg

(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 July one thousand eight hundred and fifty-eight

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 Hogg
2. Sex and Age,	Female aged 20 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Woman
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	In Australia for the last
7. Place where Found and Examined,	Kirkcudbright Asylum. Parish of Kirkmichael
8. Length of time Insane,	Six Three months
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	Twenty four
11. When and where previously under Examination and Treatment,	Unknown
12. Duration of existing Attack,	Six three months
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Not so far as known
16. Whether Dangerous to others,	Sometimes
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,	Charles Hogg, Dillington Near Castle Douglas Father to the Patient, A Sister 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,* Charles Hogg

DATED this twenty-fifth day of July one thousand eight hundred and fifty-eight

* 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, James Douglas Clement being a (1) M.D. & L.R.C.S.E. and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Hillcrest in the Parish of Glen Michael in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Henry Hogg seaman Hillcrest in the Parish of Glen Michael and that the said Henry 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) The delusions which he entertains. The suspicious and strange stories which he sometimes tells.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His Father. Violence and almost uncontrollable fury at times.

(SIGNED) *Name and Medical Designation,* James D. Douglas Clement M.D.

Place of Abode, Castle Douglas

DATED this twenty fifth day of July One thousand eight hundred and fifty eight

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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, 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) Hillcrest Mans in the Parish of Glencorp Michael in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Henry Hogg seaman Hillcrest in the Parish of Glencorp Michael and that the said Henry 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) The delusions on various subjects under which he labours—

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) His father states that he has occasionally been very difficult to manage, and has on one or two occasions threatened to strike his brother.

(SIGNED) *Name and Medical Designation,* Patk. Thomson L.R.C.S.

Place of Abode, Castle Douglas

DATED this twenty fifth day of July one thousand eight hundred and fifty eight

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 Hyndman Dunbar, Esquire, (4) Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Charles Hogg Certificates under the hands of James Douglas Clement and Patrick 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) Henry Hogg and that the said Henry Hogg is a (5) lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Henry Hogg as a Patient into the Southern Counties Asylum of Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Henry Hogg which accompanied the said Petition.

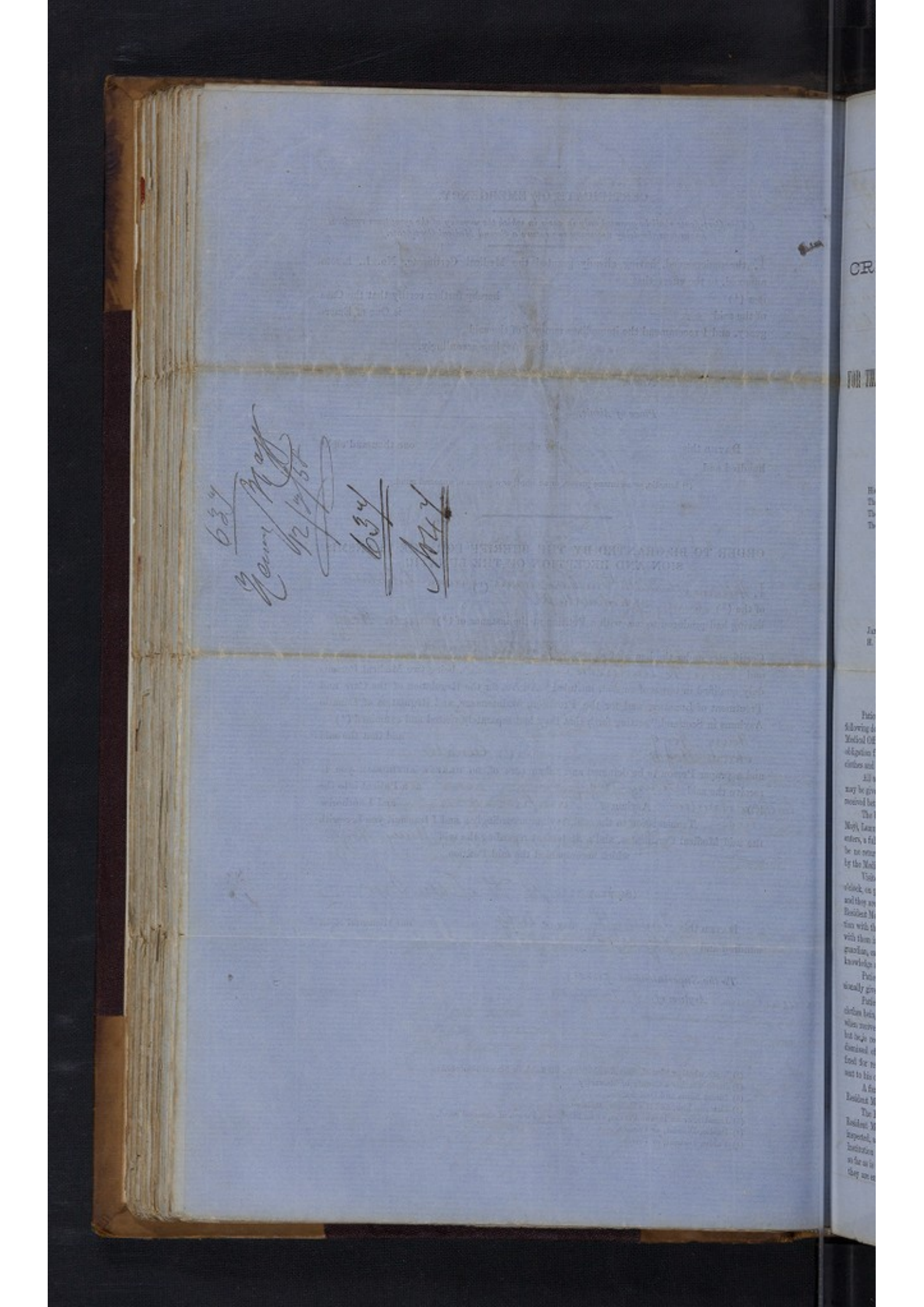
(SIGNED) W H Dunbar

DATED this Twelfth day of July one thousand eight hundred and fifty eight

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.



CRICHTON ROYAL INSTITUTION,

Junior Department.

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 Dalawoodie.
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 Headder, 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.	Mary Ross Lately from Glen to Ford Parish Common Aberdeen Quiet disposition Good Education
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	Unknown as the Complaint to a to have appeared by the Left Ear and the cause is not to be
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.?	Unknown
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?	None, so far as known, always Very 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?	Suspicion, increasing
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.	Functions of the body appear correct
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?	First attack
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?	Written to his Landlord Accuses him to the Police accidentally Put himself to be Murdered in Jump Mary Effects out of Room as before No but sometimes appears to hear as Many of this Body, and Many Can be Seen Room
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thought excited by any particular subject or event?	When Opposed or Contradicted he may by his Brother Has not to Injure them —
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 prominent propensity, or tendency to crime?	A Sister attempted Suicide and afterwards died Insane
12. What treatment has been resorted to, for what length of time, and with what success?	None as yet Unknown
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	For Several Months None so far as known

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 Robert M'Kean Inspector of Poor Kirkcaldy humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Richd Mills Fetmen Hosiery 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 Richd Mills to the Broughton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Robert M'Kean Inspector of Poor

(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 July one thousand eight hundred and fifty eight

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,	Richd Mills
2. Sex and Age,	Male 30 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,	Carnethorn of Kirkcaldy
7. Place where Found and Examined,	Carnethorn
8. Length of time Insane,	a few days
9. Whether first Attack,	Third attack
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Broughton Royal Institution Liverpool
12. Duration of existing Attack,	a few days
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,	Kirkcaldy Fife
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,	Robert Mills Liverpool cousin Sarah Mills in Carnethorn of Kirkcaldy mother cousin 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, Robert M'Kean Inspector of Poor

DATED this Thirteenth day of July one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1250.

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.*

I, the undersigned, James Peterson 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) Dalbeam Cottage Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Nicholas Reilly a pauper from Carsethorn Poorhouse and that the said Nicholas Reilly 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Restlessness of manner inattitude for work, impaired perception of the relation which subsists between himself and other persons and things

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Propensity to wander and squander his means as ascertained from the Procurator Fiscal

(SIGNED) *Name and Medical Designation,* James Peterson M.D.

Place of Abode, Dalbeam Royal Infirmary Dumfries

DATED this twelfth day of July One thousand eight hundred and fifty eight.

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.*

I, the undersigned, Alexander Patterson 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) Dalbeam Cottage Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Richard Reilly a pauper from Carsethorn Poorhouse and that the said Richard Reilly 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Manner sullen, reserved and haughty. Unwilling to answer ordinary questions

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) His attendant states that his manner is always much the same as described by me

(SIGNED) *Name and Medical Designation,* Alexr Patterson M.D.

Place of Abode, Dalbeam

DATED this twelfth day of July one thousand eight hundred and fifty eight

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, James Stevenson Trotter Sheriff (1) Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Robert Mckinnel
Inspector of Poor, Kirkbean.
Certificates under the hands of James Selkirk
and Alexander Robertson, 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)
Nichol Mills a forester & Labourer & Pauper and that the said
Nichol Mills 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 Nichol Mills as a Patient into the
(6) Public Asylum of Crichton Royal Institution and I authorise
the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Nichol
Mills which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this 13th day of July one thousand eight hundred and fifty eight.

To the Superintendent of the (7) Public
Asylums of Crichton Royal 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.

636
Richard Mills
12/8/1837
636
Mills

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 of the (2) Stewartry of Kirkcudbright *and his Substitutes,—*

The Petition of Rich? Nevatt, Inspector Keller

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Lorimer, in Rhonehouse 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 Lorimer ~~———~~ to the Crichton Royal Institution dumfries and to sanction his admission into the said Asylum.

(SIGNED) Rich Nevatt Inspector Keller

(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 July one thousand eight hundred and fifty eight 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,	John Lorimer
2. Sex and Age,	Male
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	New Cumnock
7. Place where Found and Examined,	Rhonehouse
8. Length of time Insane,	Three weeks
9. Whether first Attack,	No
10. Age (if known) on first Attack,	Unknown
11. When and where previously under Examination and Treatment,	Unknown
12. Duration of existing Attack,	Unknown
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	Unknown
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	New Cumnock
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,	Elias Lorimer brother & Jane Lorimer daughter. Both here.
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,* Rich Nevatt

DATED this twelfth day of July one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1260.

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, residing in Castle Douglas
being a (1) Licentiate of the Royal College of Surgeons
in Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Rhonehouse
in the County of Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) John Lorimer, Rhonehouse
a Pauper and that
the said John Lorimer 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) Natural character
absent talks very incoherently & rambling - repeating per
-ticulars - Strong propensity to borrow articles for which he
can't account - Eyes have the peculiar expression of the insane
tendency to wander from home - by night & day.

(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,* James Laidlaw L.R.C.

Place of Abode, Castle Douglas

DATED this third day of July One thousand eight hundred and fifty eight

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, James Douglas Bonar
being a (1) M.D. & L.R.C.S.E.
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Rhonehouse
in the County of Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) John Lorimer Rhonehouse
a Pauper and that
the said John Lorimer 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) No uneasy
restless demeaning manner. Delusions
delusions which he holds and attempts
to prevent deportment & to show recognition
2. Other facts (if any) indicating Insanity communicated to me by others. (7) Nil

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

(SIGNED) *Name and Medical Designation,* James Douglas Bonar M.D.

Place of Abode, Castle Douglas

DATED this eighth day of July one thousand eight hundred and fifty eight

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 Hyamilh Pumbar, Esquire Steward Substitute
of the (2) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3) Richard Havat
Certificates under the hands of James Faidlaw
and James Douglas Clement, 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 Forrimer and that the said
John Forrimer is a (5) lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Forrimer as a Patient into the Southern Counties Asylum of Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Forrimer which accompanied the said Petition.

(SIGNED) W H Lumbar

DATED this fourteenth day of July one thousand eight hundred and Eighty eight

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.

635
John Lukinner
15/7/58

638
No 48

Petition
for warrants to
land
John Forrence &
Ors Cogglesun
12 July 1858

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 of the (2) Stewartry of Kirkcudbright *and his Substitutes,*—

The Petition of Robert McVane Labourer Castledouglas

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James McVane, Gardener there 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 McVane _____ to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Robert McVane

(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 July one thousand eight hundred and fifty eight.

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 McVane
2. Sex and Age,	Male - 32 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	gardner
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Annan
7. Place where Found and Examined,	Castle Douglas
8. Length of time Insane,	five years ago
9. Whether first Attack,	~~Castle Douglas~~ No
10. Age (if known) on first Attack,	27 years Castle Douglas
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	about 10 ten days
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	never
15. Whether Suicidal,	No
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kelton
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,	Robert McVane, father - Castledouglas - Sane -
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,* Robert McVane

DATED this twelfth day of July one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1260.

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 residing in Castledou
being a (1) Licentiate of the Royal College of Surgeons in Edinburgh
and being in actual practice as a (2) Surgeon in Castledouglas
hereby certify, on soul and conscience, that I have this day, at (3) Academy
Castle Douglas
Kirkcudbright in the County o
separately from any other Medical Practitioner
visited and personally examined (4) James McVane Gardener
Castle Douglas and that
the said James McVane 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) Natural manner slightly changed - talks long one - but matters almost incoh
some unintelligible person to himself - talks into unmeaning
laughter without any obvious cause - his eyes have the peculi
expression of the insane. Faculty attention nearly

(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,* James Laidlaw L.R.C.S

Place of Abode, Castle Douglas.

DATED this tenth day of July One thousand eight hundred and fifty eight.

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'Taggart Cameron, M.D. L.R.C.
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) Academy, Ca
Castle Douglas
Kirkcudbright in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) James McVane Gardener
the said James McVane Castle Douglas 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Mr Cullen
states, that he was in a state of
excitement yesterday & evening, & that
he was violent & unmanageable, having
2. Other facts (if any) indicating Insanity communicated to me by others. (7)

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

(SIGNED) *Name and Medical Designation,* James M'Taggart Cameron M.D.

Place of Abode, Castle Douglas

DATED this Seventh day of July one thousand eight hundred and fifty-eight

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, Esq (1) Heretable Substitute
of the (2) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3) Robert
Mc Vane
Certificates under the hands of James Friedlaw
and James Douglas Clement, 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 Vane and that the said
James Mc Vane is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Mc Vane as a Patient into the
Southern Counties Asylum of (6) Dumfries and I authorise
this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Mc Vane
which accompanied the said Petition.

(SIGNED) W. H. Dunbar

DATED this fourteenth day of July one thousand eight hundred and fifty eight.

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.

639

James McVane

15/2/58

639

1849

Petition

for Warrant to Search

James McVane

& the Catholic Asylum

July 1858

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) Stewart of Kirkcudbright *of the* (2) Stewartry *and his Substitutes,—*

The Petition of Andrew Aitk

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Hugh Campbell 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 Hugh Campbell to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Andrew Aitk Insp. of Poor

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

DATED this tenth (3) day of July one thousand eight hundred and fifty eight

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,	Hugh Campbell
2. Sex and Age,	Male Thirty years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Field Labour
5. Religious Persuasion, so far as known,	Brought up in the Established church of Scotland
6. Previous Place of Abode,	Parish of Kirkmabreck
7. Place where Found and Examined,	Union Poorhouse Kirkcudbright
8. Length of time Insane,	Believed to have been insane for some time as a ordering the Poor (true) a 10th June he was suspected Cole & after misbehaviour confined Asylum
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,	Since 10th June 1858.
13. Supposed Cause,	
14. Whether subject to Epilepsy,	been subject to Epilepsy since he was seven years age
15. Whether Suicidal,	
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Kirkmabreck
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,	As far as I know his Father William Campbell is still alive. he Ayrshire with with his Brother. None of his relations ever known to have been
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	It was from the Union poorhouse that I received the first report of Hugh Campbell being a Lunatic

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

(SIGNED)* *Name,* Andrew Aitk Insp. of Poor

DATED this tenth day of July one thousand eight hundred and fifty eight.

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1260.

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.*

I, the undersigned, John S. Shand being a (1) Physician & Edinburgh Univ. Act. and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Union Poor House Kirkcaldy in the County of Fife separately from any other Medical Practitioner visited and personally examined (4) Hugh Campbell a pauper in the Kirkcaldy Union Poor House and that the said Hugh Campbell 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6)
Inability to take care of himself. & from attacks of Epilepsy. delusion depressing & intellect to the most

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
the conduct which originate the Insane Poor House has been Complained of & Labouring under delusions

(SIGNED) *Name and Medical Designation,* John S. Shand

Place of Abode, Kirkcaldy

DATED this 11th day of July One thousand eight hundred and 78.

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.*

I, the undersigned, John S. Shand being a (1) M.D. of Edin. University and being in actual practice as a (2) Medical Practitioner on behalf pursuant to hereby certify, on soul and conscience, that I have this day, at (3) Kirkcaldy Union Poor House Kirkcaldy in the County of Fife separately from any other Medical Practitioner visited and personally examined (4) Hugh Campbell a pauper in Kirkcaldy Union Poor House and that the said Hugh Campbell 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6)
That the Patient not the Consent thereto, the Name of Regent whether King or Queen, says he made him duly, & will never die. him first the day after admission & pronounced him insane

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
General Conduct that of Mental derangement — Conversation called by Mr. Beattie

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

Place of Abode, Kirkcaldy

DATED this 1st day of July one thousand eight hundred and 78.

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, Esq. Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Andrew Nish, Inspector of Poor, for the Parish of Kirkmabreck Certificates under the hands of John Shand, and John Sanders Shand 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) Hugh Campbell and that the said Hugh Campbell 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 Hugh Campbell as a Patient into the Southern Counties Asylum of Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Hugh Campbell which accompanied the said Petition. two words deleted

(SIGNED) W H Dunbar

DATED this Twelfth day of July one thousand eight hundred and fifty eight years

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.

640
Eugene Campbell
16/7/58

640
1050

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) Stewartry of Kirkcudbright *and his Substitutes,—*

The Petition of Isabella Edgar

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane 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 Jane Edgar to the Southern Counties' Asylum and to sanction her admission into the said Asylum.

(SIGNED) Isabella Edgar

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

DATED this Eighteenth (*) day of July one thousand eight hundred and fifty eight

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 Edgar
2. Sex and Age,	Female, aged 46
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Formerly Dairy Woman
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Rhonehouse
7. Place where Found and Examined,	Rhonehouse
8. Length of time Insane,	Two Months
9. Whether first Attack,	Second attack
10. Age (if known) on first Attack,	45.
11. When and where previously under Examination and Treatment,	From the latter part of 1853 and beginning of 1854 in Southern Co Asylum
12. Duration of existing Attack,	Two Months
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	At times
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,	Jane Edgar Rhonehouse Parish of Kelton a Daughter, None so far as known
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,* Isabella Edgar

DATED this Eighteenth day of July one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1500.

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 Douglas Clement being a (1) M.D. & L.R.C.S.E.: and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) 1 Kelton Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Jane Edgar, widow and that the said Jane 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.:—

1. Facts indicating Insanity observed by myself: (6) The extreme state of misery & despondency which she presents,

2. Other facts (if any) indicating Insanity communicated to me by ~~others~~ her daughter: (7) Strong delineation and frequent attempts to commit Suicide

(SIGNED) *Name and Medical Designation,* James Douglas Clement M.D. L.R.C.S.E.

Place of Abode, Castle Douglas

DATED this eighteenth day of July One thousand eight hundred and fifty eight

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 Laidlaw being a (1) Licentiate of the Royal College of Surgeons, Ed and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Rhonehouse Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Jane Edgar, widow and that the said Jane 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.:—

1. Facts indicating Insanity observed by myself: (6) Labours under permanent impression that not only her own but that the souls of her children are lost: Extreme melancholy, & despair

2. Other facts (if any) indicating Insanity communicated to me by ~~others~~. (7) Her daughter. Great tendency to commit suicide Made repeated attempts to do so

(SIGNED) *Name and Medical Designation,* James Laidlaw L.

Place of Abode, Castle Douglas

DATED this eighteenth day of July one thousand eight hundred and fifty eight

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 Edgar is a (1) Lunatic hereby further certify that the Case of the said Jane Edgar is One of Emergency, and I recommend the immediate removal of the said Jane Edgar to an Asylum accordingly.

Name James Douglas Clement M.D.

Place of Abode, Castle Douglas

DATED this Twenty Second day of July one thousand eight hundred and fifty Eight —

(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 Hyndmite Dunbar Esq. (2) Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Isabella Edgar Certificates under the hands of James Douglas Clement and James Laidlaw —— —— —— , 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 Edgar —— and that the said Jane Edgar —— is a (5) Lunatic —— and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Edgar —— as a Patient into the Dumfries Asylum of Dumfries —— and I authorise ther Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Edgar —— which accompanied the said Petition.

(SIGNED) W H Dunbar —

DATED this twentieth day of July —— one thousand eight hundred and ~~eighty~~ fifty eight years

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

6411
Ann Edgar
1/25/58

6411
1857

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 Ayr *and his Substitutes,—*

The Petition of Adam Murdoch Farm Labourer Soorn

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David Murdoch,

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 Institution and to sanction his admission into the said Asylum. —

(SIGNED) Adam Murdoch

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

DATED this Seventeenth (3) day of July one thousand eight hundred and fifty eight

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 Murdoch
2. Sex and Age,	Male. 42 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,	Various – latterly Evangelical Union
6. Previous Place of Abode,	Parish of Soorn.
7. Place where Found and Examined,	
8. Length of time Insane,	Evidenced for fully one year
9. Whether first Attack,	First —
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Has been under no particular treatment
12. Duration of existing Attack,	a few weeks
13. Supposed Cause,	— Religious anxiety
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	Has shewn no particular evidence
16. Whether Dangerous to others,	— Expresses himself as wishing to be restrained from injuring 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,	Adam Murdoch. Soorn. Brother. No other members of the family known 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, Adam Murdoch

DATED this Seventeenth day of July one thousand eight hundred and fifty eight

* 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.*

I, the undersigned, John Blackwood being a (1) Surgeon and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Som Ayr in the County separately from any other Medical Practitioner

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

visited and personally examined (4) Louis Murdoch and that the said Louis 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.:—

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

(6) *State the facts.*

I. Facts indicating Insanity observed by myself: (6) himself as indicating by his own delusions, that he is committing sin against the Holy Ghost, & is a subject of damnation, and that he has by himself in a very distressed state of mind

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) his brother states that he is exceedingly restless in the night and that he possesses the power of bringing down judgment upon the face of the earth

(SIGNED) *Name and Medical Designation,* John Blackwood Surg

Place of Abode, Catrine

DATED this 17th day of July One thousand eight hundred and 58

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.*

I, the undersigned, Robert Hutchison being a (1) Surgeon and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Ayr in the County of Ayr separately from any other Medical Practitioner

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

visited and personally examined (4) David Murdoch and that 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.:—

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

(6) *State the facts.*

His physical appearance and despondency of mind — he believing that his soul would be lost from having committed the sin against the Holy Ghost

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) His brother states that he is exceedingly restless in the night and that he has the power of bringing down the judgments of God on the face of the earth

(SIGNED) *Name and Medical Designation,* Robert Hutchison Surgeon

Place of Abode, Auchenlack

DATED this 17th day of July one thousand eight hundred and fifty-eight

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, James Robison Esquire advocate Sheriff Substitute of the (2) County of Ayr _____ having had produced to me, with a Petition at the instance of (3) Adam Murdoch farm labourer Son Certificates under the hands of John Blackwood Surgeon and Robert Hutchison 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) David Murdoch Son _____ 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) Crichton ~~Asylum~~ Institution ~~Dumfries~~ and I authorise 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.

(SIGNED) J. Robison

DATED this nineteenth day of July —one thousand eight hundred and fifty eight.

To the Superintendent of the (7)

~~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.

Davids Murdoch
20/2/58

8024
Nov 15

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 Christina Corson.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mr Robert Corson 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 Corson to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Christina Corson

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

DATED this 21 (3) day of July one thousand eight hundred and fifty eight

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 Corson
2. Sex and Age,	Male - 57
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Mail Guard.
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Coreborne Street Dumfries
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	3 months.
9. Whether first Attack,	Second
10. Age (if known) on first Attack,	36
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	3 months.
13. Supposed Cause,	Irregular Nervous Irritation Responsibility & change of Place
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. 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,	Christina Corson - Wife
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,* Christina Corson

DATED this 21st day of July one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board.—Dec. 57.—1260.

17
1/2

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.

I, the undersigned, Graduate of the University of Edinb
being a (1) Physician &c.
(2) Physician or Surgeon, *or otherwise, as the case may be.*
and being in actual practice as a (2) Physician at 38 Castle Street, Dum
(3) *Insert the street and number of the house (if any), or other like particulars.*
hereby certify, on soul and conscience, that I have this day, at (3) 38 Castle S
Dumfries
Dumfries in the County o
separately from any other Medical Practitioner
(4) *Insert Designation and Residence, and if a Pauper, state so.*
visited and personally examined (4) Robert Corson, Mail Guar
residing in Dumfries and th
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
the said is a (5) person o
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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Constant dres
without being capable of stating of what, inclination to
commit suicide &c.

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

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

(SIGNED) *Name and Medical Designation,* James M. McCulloch M
Place of Abode, 38 Castle Street, Dumf

DATED this 21st day of July One thousand eig
hundred and fifty eighth

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.

I, the undersigned, James Gibson M.D.
being a (1) Graduate of the University of
Edinburgh
(2) Physician or Surgeon, *or otherwise, as the case may be.*
and being in actual practice as a (2) Physician
(3) *Insert the street and number of the house (if any), or other like particulars.*
hereby certify, on soul and conscience, that I have this day, at (3) Criterion
Royal Institution Dumfries in the County o
Dumfries
separately from any other Medical Practitioner
(4) *Insert Designation and Residence, and if a Pauper, state so.*
visited and personally examined (4) Robert Gorson Mail
Guard residing in Dumfries and tha
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
the said Robert Gorson is a (5) person o
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 de
pression alternating with excitement
unfounded fear unfitness for
work &c

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Very restless, and wanders about
with a tendency to suicide as
stated by his wife

(SIGNED) *Name and Medical Designation,* James Gibson M
Place of Abode, Criterion Royal Institu

DATED this twenty fourth day of July One thousand eight
hundred and fifty eight

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, Alexander Hannay (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Christina Corson Certificates under the hands of James Aunay McCulloch 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) Robert Corson, Mail Guard, in Dumfries and that the said Robert Corson 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 Corson as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Corson which accompanied the said Petition.

(SIGNED) A. Hannay

DATED this twenty second day of July one thousand eight hundred and fifty eight years.

To the Superintendent of the (7) Public *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, or Private.
(7) Public, District, or Private.

805
Abril 6 1916

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 ~~Dumfries~~ of Dumfries *and his Substitutes,*—

The Petition of David Galbraith, Inspector of Poor

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Bell 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 Bell to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) D Galbraith . Insp

(*) 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 July one thousand eight hundred and fifty eight

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 Bell
2. Sex and Age,	Female 60
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Mason's Daughter
5. Religious Persuasion, so far as known,	Not Known
6. Previous Place of Abode,	Eichall, Cummertrees
7. Place where Found and Examined,	Collinhirst, Hoddam
8. Length of time Insane,	30 years of weak mind
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	about 30 years
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	about 30 years
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Supposed dangerous
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Hoddam
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 Bell, Brother at Collinhirst, Hoddam
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,* D Galbraith . Insp

DATED this twenty third day of July one thousand eight hundred and fifty eight.

* To be Signed by the Party applying.

Lunacy Board, Dec.—57.—1209.

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 Bell, first,
being a (1) Surgeon in the Royal Navy, Member of Royal College of
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Upper Colen
in the Parish of Hoddam in the County
of Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Mary Bell, a Pauper, and Mary
daughter, residing at Upper Colinhurst Parish of Hoddam, and that
the said Mary 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) I have seen some times in
conversing with her, and her Sister Grizzell Bell, during which time, the Right Mo
and talking to herself incessantly, her countenance was Vacant, and Wildish
And Apparently insensible to the conversation

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The
Grizzel Bell the only Member of her family at home, when I made my Visit, Says that
fright about twenty years ago, and from that Cause, and Violent, she would destroy
Clothes, and act ruthless with any thing under her charge, and inclined to be
if contradicted with — She has been in this State for about two years

(Signed) *Name and Medical Designation,* William Bell Surgeon Royal Navy

Place of Abode, Sinclair Burn Nr. Ecclefechan N.B.

Dated this twenty second day of July One thousand eigh
hundred and fifty eight

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 Young, Surgeon
being a (1) Licentiate of the Royal College of Surgeons.
Edinburgh
and being in actual practice as a (2) General Practitioner of Medic
hereby certify, on soul and conscience, that I have this day, at (3) Upper Colinh
Parish of Hoddam in the County
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Mary Bell, Pauper, residen
at Upper Colinhurst and that
the said Mary 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.:—

(6) *State the facts.*

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

General Delirium, Incoherency;

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

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

Her Sister Grace Bell, says that She is difficult
to manage at times, threatening to destroy
or any person attempting to control her

(Signed) *Name and Medical Designation,* William Young, Sur

Place of Abode, Ecclefechan

Dated this twenty second day of July one thousand eight
hundred and fifty eight

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, Wm Rennie Dalton Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) David Galbraith
Inspector of Poor of Boddam
Certificates under the hands of William Bell
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)
Mary Bell, a pauper at Upper Colmhirst and that the said
Mary 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 Mary Bell 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 Mary Bell which accompanied the said Petition.

(SIGNED) Wm R. Dalton

DATED this twenty Sixth day of July one thousand eight hundred and fifty eight years

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.
(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.

642
Mary Bell
2/8/58
642
1052

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* Berwick *and his Substitutes,—*

The Petition of Joseph Wells Inspector of Poor of

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that ~~John Christopher~~ ~~John B. J. Millman~~ ~~Scott M'C.~~ Peter M'Clark Sergeant Marwell Lodge 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 M'Clark to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Joseph Wells Inspector of Poor of Inquiry

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

DATED this twenty fourth (1) day of July one thousand eight hundred and fifty Eight 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,	Peter Mc Clark
2. Sex and Age,	Male 46 years of Age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	
5. Religious Persuasion, so far as known,	Presbyterian Established Church of Scotland
6. Previous Place of Abode,	College Street Musselburgh
7. Place where Found and Examined,	Do
8. Length of time Insane,	was first put into the Southern Counties asylum 1851
9. Whether first Attack,	was Delusions since his Infancy
10. Age (if known) on first Attack,	Do
11. When and where previously under Examination and Treatment,	Southern Counties Asylum Orminston
12. Duration of existing Attack,	within the last Two weeks
13. Supposed Cause,	Not Known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Dangerous to others
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Inquiry
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,	Has no Sister, mother dead not known Had a Sister Margaret M'Clark who died in the Southern Counties Asylum 16th October 1856
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,* Joseph Wells Inspector of Poor Inquiry

DATED this 27th day of July 1858 one thousand eight hundred and fifty Eight

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1209.

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 Olrisholm being a (1) Graduate of the University of Edin[burgh] and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) the Sinclair College (with the Police) Kirkandbright in the County separately from any other Medical Practitioner visited and personally examined (4) Peter McGurk and the said Peter McGurk 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) violence - incoherence - threats of violence

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) as informed by Attendants Secreting himself in a Garret refusing to come out has struck several of his neighbours

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

Place of Abode, Broadwath Street Dumfries

DATED this 26th day of July One thousand eight hundred and fifty eight

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 Todd being a (1) Graduate of the University of Edin[burgh] and being in actual practice as a (2) Physician or Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the [illegible] College Kirkcudbright in the County separately from any other Medical Practitioner visited and personally examined (4) Peter Mc Gurk and the said Peter Mc Gurk 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) An unprovoked assault on Dr Christolm - and threats thereto.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Secreting himself in a room refusing to work - Formerly a patient in the Lunatic Asylum

(SIGNED) *Name and Medical Designation,* William Todd M.D.

Place of Abode, Dumfries

DATED this 26th day of July one thousand eight hundred and 58 —

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, Wm Peterkin Trotter Sheriff Substitute of the (2) County of Dumfries having had produced to me with a Petition at the instance of (3) Joseph Nelson Inspector of Poor & Prosecutor Certificates under the hands of Wm Chisholm 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) Peter McGurk in College St. Maxwelltown, pauper and that the said Peter McGurk is an (5) Insane person or Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Peter McGurk as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Peter McGurk which accompanied the said Petition.

(SIGNED) Wm P. Trotter.

DATED this Twenty Seventh day of July one thousand eight hundred and fifty eight

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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Peter McGurk

28/2/58

1643

1853

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 George J Todd Inspector of Poor

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Bell, or Veitch

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 or Veitch to the Southern Counties Asylum and to sanction ~~his~~ her admission into the said Asylum.

(SIGNED) George J Todd Inspector

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

DATED this 2d Second (3) day of August one thousand eight hundred and fifty eight

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 Bell, or Veitch
2. Sex and Age,	Female 58 years
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Domestic Servant previous to Marriage
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Langholm
7. Place where Found and Examined,	Langholm
8. Length of time Insane,	only newly certified to be so. Symptoms unknown
9. Whether first Attack,	I should suppose the first attack
10. Age (if known) on first Attack,	cannot say, as she was not chargeable
11. When and where previously under Examination and Treatment,	Pauper only become chargeable to the Parish on leaving last mentioned office under her
12. Duration of existing Attack,	several years
13. Supposed Cause,	perhaps predisposed her mother was similar
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 Langholm
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 Veitch whereabouts not known, her only child, her mother committed suicide
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,* George J Todd Inspector of Poor

DATED this second day of August one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1500.

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 Carlyle M.D. Edin
being a (1) Member of the Royal College of Surgeons E
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Scotts Co
Langholm
in the Coun
Dumfries
separately from any other Medical Practitio
visited and personally examined (4) Margaret Bell
Pauper
and
the said Margaret Bell is a (5) Lunatic
and a proper Person to be detai
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) Fatuous demeanour & appearance: occasionally violent & noisy: talks incoherently about a wish to commit suicide — Constant incoherence.

(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. J. Carlyle M.D. Ed

Place of Abode, Langholm

DATED this Thirty first day of July One thousand e
hundred and fifty eight

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 Macgavell Surgeon L.R.C
being a (1) Licentiate of the Royal College of Surgeons Ed
and being in actual practice as a (2) in actual practice Surge
hereby certify, on soul and conscience, that I have this day, at (3) Langholm
in the Count
Dumfries
separately from any other Medical Practitio
visited and personally examined (4) Margaret Bell Widow
a Pauper
and
Margaret Bell a widow
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.:— that she is incoherent and confused in
her ideas

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6)
her aberrations of mind having reference to
imaginations and unmeaning vagaries of
kind

(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,* William Macgavell Surge
Langholm

Place of Abode,

DATED this thirty first day of July one thousand eig
hundred and fifty eight

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, ~~John Dudgeon Hamburgh~~ (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me with a Petition at the instance of (3) George Todd Inspector of Poor Langholm Marion Carlyle and Certificates under the hands of 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) Margaret Bell or Veitch a pauper and that the said Margaret Bell or Veitch is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Margaret Bell or Veitch 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 Margaret Bell or Veitch which accompanied the said Petition. Sheriff's delete

(SIGNED) ~~John Dudgeon Hamburgh~~

DATED this ~~Twenty~~ day of August one thousand eight hundred and fifty eight

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.

644

Margaret Bell or Pitch

3/8/58

6444

1034

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,—*

The Petition of William Thomas Noake Governor of Poorhouse at Thornhill

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Goldstone 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 Goldstone to the Southern Counties Asylum and to sanction his admission into the said Asylum.

William Thomas Noake

(Signed) W. T. Noake

The date of the order must be within fourteen clear days following the dates of the Medical Certificates.

Dated this fifth (3) day of August one thousand eight hundred and fifty eight

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 Hiddlestone
Sex and Age,	Male 43 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Soldier
Religious Persuasion, so far as known,	Presbyterian
Previous Place of Abode,	Durrisdeer
Place where Found and Examined,	Upper Nithsdale Combination Poorhouse
Length of time Insane,	A fortnight
Whether first Attack,	First attack
Age (if known) on first Attack,	43 years
When and where previously under Examination and Treatment,	—
Duration of existing Attack,	Fourteen days
Supposed Cause,	Not Known
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,	Durrisdeer
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
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 Thomas Noake

Dated this 5th day of August one thousand eight hundred and fifty eight

* 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, Andrew Crichton Clarke
being a (1) Doctor 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) Upper Ha
Corporation Poor house in the Co
Dumfries separately from any other Medical Practi
visited and personally examined (4) Thomas Hiddlestone
Pauper a
the said Thomas Hiddlestone is a (5) Lunat
~~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)
Refusing Meals Food Threatening La
destruction

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Facts corroborative of the above
as stated by the Governor of Work

(SIGNED) *Name and Medical Designation,* Andr. C. Clarke

Place of Abode, Thornhill

DATED this fourth day of August One thousan
hundred and fifty eight

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 Chisholm
being a (1) Doctor of 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 in the Co
Dumfries separately from any other Medical Prac
visited and personally examined (4) Thomas Hiddlestone Pa
a
the said Thomas Hiddlestone is a (5) Lunat
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)
General mental deficiency &
of Memory — belief that he
Not require food —

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Informed by Attendant
that he ~~also~~ refused a

(SIGNED) *Name and Medical Designation,* John Chisholm M

Place of Abode Buccleuch Street

DATED this fifth day of August one thousa
hundred and fifty eight

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 Thomas Heddleston is a (1) Lunatic and hereby further certify that the Case of the said Thomas Heddleston is One of Emergency, and I recommend the immediate removal of the said Thomas Heddleston to an Asylum accordingly.

Name, Andr. C. Chalmers M.D.

Place of Abode, Thornhill

DATED this fourth day of August one thousand eight hundred and fifty eight.

(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 Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Thomas Noake, Governor of Poor House, Thornhill Certificates under the hands of Andrew Crichton Chalmers M.D. and John Cholmeley 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 Heddleston a Soldier Pauper and that the said Thomas Heddleston is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Heddleston 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 Thomas Heddleston which accompanied the said Petition.

(SIGNED) A. Hannay

DATED this Sixth day of August one thousand eight hundred and fifty eight.

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.

645
Thomas Gildersleeve
4/8/58

6465

No 55

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 Thomas Forster Queen's Terrace Lochs Road London humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Sybil Forster his 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 Sybil Forster her to the Crichton Institution and to sanction his admission into the said Asylum.

(SIGNED) Thomas Forster

(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 August one thousand eight hundred and fifty eight

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,	Sybil Forster
2. Sex and Age,	Female, age 38
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Supported by her husband, no previous occupation
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Longtown
7. Place where Found and Examined,	The Crichton Royal Institution Dumfries
8. Length of time Insane,	Supposed 18 Months, certain 15 Months
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	27 years
11. When and where previously under Examination and Treatment,	Longtown 2 months ago
12. Duration of existing Attack,	15 Months certain
13. Supposed Cause,	Cause not known
14. Whether subject to Epilepsy,	no,
15. Whether Suicidal,	No attempt ever seen made although it has been spoken of by her
16. Whether Dangerous to others,	~~No never known to attempt~~ Has threatened her Mother & Husband
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	her residence
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,	Her Mother address is Mrs Ann Nicholson Graham Street Longtown None of the family has ever been 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 Forster

DATED this fifth day of August one thousand eight hundred and fifty eight

* 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.*

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) Creighton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Sybil Foster Gentlewoman 6 Queens Terrace Queens Road London and the said Sybil Foster 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) The manner of the patient, unfounded suspicion, delusions — believes another person substituted for her husband

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Responsible mother and sister and threatens them with violence as stated by her sister

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Creighton Royal Institution Dumfries

DATED this 4th day of August One thousand eight hundred and fifty eight

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.*

I, the undersigned, John Olivestone 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) Creighton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Sybil Foster Gentlewoman 6 Queens Terrace, Queens Road, London and the said Sybil Foster 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6)
Unfounded suspicions — delusions believes another person substituted for believes same with regard to mother & chi

(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,* John Olivestone

Place of Abode, Burnbank House

DATED this 5th day of August one thousand eight hundred and fifty eight

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 Sybil Forster ~~or a person~~ is a (1) a person of unsound mind hereby further certify that the Case of the said Sybil Forster is One of Emergency, and I recommend the immediate removal of the said Sybil Forster to an Asylum accordingly.

Name James Gilchrist M.D.

Place of Abode Crichton Royal Institution Dumfries

DATED this fourth day of August one thousand eight hundred and fifty eight

(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 Armstrong Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Thomas Forster of 62 Lyons Terrace, Lyons Road, London Certificates under the hands of James Gilchrist M.D. and Wm Chisholm 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) Sybil Forster, wife of said Thomas Forster and that the said Sybil Forster —— 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 Sybil Forster —— 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 Sybil Forster which accompanied the said Petition.

(SIGNED) Alex Armstrong

DATED this Sixth day of August one thousand eight hundred and fifty eight

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.

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 of Kirkcudbright *of the* (2) Stewartry *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 Mary Kirk a pauper on the Roll 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 Mary Kirk to the Southern Counties Asylum Garnegie, and to sanction her admission into the said Asylum.

(SIGNED) James Bell Inspector

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

DATED this twenty Seventh (3) day of July one thousand eight hundred and fifty Eight 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,	Mary Kirk
2. Sex and Age,	Twenty One Female
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 Belonged to the Established Church
6. Previous Place of Abode,	Parent residence
7. Place where Found and Examined,	Kirkpatrick Durham Asylum
8. Length of time Insane,	upwards of a Month
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,	brought on consequent to Epilepsy fits
14. Whether subject to Epilepsy,	subject to do
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,	Is pauper Chargeable to the parish of Kirkpatrick Durham
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,	father name Alexander Kirk Mothers name Jean Bonyer or Kirk Name of Patients Relations have been unable to give any Answer
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 Bell Insp

DATED this twenty Seventh day of July one thousand eight hundred and fifty Eight years

* 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, James Douglas Chmst being a (1) M.D. & L.R.C.S.E. and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Kirkpatrick Durham in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Mary Kirk, a Pauper and that the said Mary Kirk 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 Vacant Idiotic expression of countenance & almost complete imbecility of mind

(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,* James Douglas Chmst M.C.

Place of Abode, Castle Douglas

DATED this twenty third day of July One thousand eight hundred and fifty eight.

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 P. P. Leslie, L.F.P.S. & S. being a (1) duly qualified Surgeon. and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Kirkpatrick Durham in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Mary Kirk, a Pauper and that the said Mary Kirk 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) That during the last five years I have been in attendance upon Mary Kirk, and of late consider her a fit subject for a Lunatic Asylum.

(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,* James P. P. Leslie, L.F.P.S. & S.

Place of Abode, Kirkpatrick Durham

DATED this twenty eight day of July one thousand eight hundred and fifty eight.

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, William Ayscough Dunbar, Esquire Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) James Bell Certificates under the hands of James Douglas Clement and James P. P. Lester, 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 Kirk a pauper and that the said Mary Kirk is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Kirk as a Patient into the Dumfries & Galloway Asylum of Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Kirk which accompanied the said Petition.

(SIGNED) W A Dunbar

DATED this Second day of August one thousand eight hundred and fifty eight years.

To the Superintendent of the (6)
Dumfries & Galloway 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.

646
Henry Smith
6/8/58

1046.
1036

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 (*) Steward Substitute of the (*) Stewartry of Kirkcudbright ~~and his Substitutes~~,—

The Petition of James Thomson, Inspector of Poor Kirkcudbright humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Catherine Henry 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 Henry to the Crichton Institution, Dumfries and to sanction ~~his~~ her admission into the said Asylum.

(SIGNED) James Thomson

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

DATED this Fourth (*) day of August one thousand eight hundred and fifty Eight 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,	Catherine Henry
2. Sex and Age,	Female. 30 years
3. Married, Single, or Widowed,	Single. -
4. Condition of Life, and previous Occupation (if any),	House Servant
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Berry. near Liverpool
7. Place where Found and Examined,	Kirkcudbright
8. Length of time Insane,	Has been in this state - four days -
9. Whether first Attack,	Was affected similarly once before - some say three months ago -
10. Age (if known) on first Attack,	30 years - or nearly
11. When and where previously under Examination and Treatment,	- Kirkcudbright
12. Duration of existing Attack,	From her own statement - has been ill for about three 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,	Kirkcudbright
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,	Margaret Henry. High Street Kirkcudbright Mother, Had a Maternal Uncle similarly affected some years ago
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 Thomson

DATED this Fourth day of August one thousand eight hundred and fifty Eight Years

* To be Signed by the Party applying.

James Thomson

Lunacy Board,—Dec.—27.—1000.

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. Edin.

and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) High Stre
in the Burgh of Kirkcudbright in the County
Kirkcudbright separately from any other Medical Practitione
visited and personally examined (4) Catharine Henry a
Pauper and th
the said Catharine Henry is a (5) person o
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.:—

1. Facts indicating Insanity observed by myself: (6)
From her general appearance & con
duct.

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
The person with whom she has been lodgi
for these last few days, states, her conduct
to have been very violent last night &
ing altogether like an insane person.

(SIGNED) *Name and Medical Designation,* David Blair Surge

Place of Abode, Kirkcudbright

DATED this 4th day of August One thousand eig
hundred and fifty eight.

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 Sanders Shand
being a (1) M.C. of the University of Edin.r

and being in actual practice as a (2) Medical practitioner
hereby certify, on soul and conscience, that I have this day, at (3) High Stree
in the Burgh of Kirkcudbright in the County
Kirkcudbright separately from any other Medical Practitione
visited and personally examined (4) Catharine Henry a Pauper
the said Catharine Henry 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)
Her general behaviour — suddenly bursting into a loud
laugh, then soon after weeping bitterly, without any cause
can assign

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
by the woman in whose house she resided, that
her behaviour is that of an insane person

(SIGNED) *Name and Medical Designation,* John S. Shand M.C.

Place of Abode Royal Bank of Kirkcudbright

DATED this Fourth day of August one thousand eigh
hundred and fifty eight.

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) Esqr Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Jane Thomson

Certificates under the hands of David Blair and John Sanders Shand, 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) Catharine Henry a pauper and that the said Catharine Henry 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 Catharine Henry as a Patient into the Dumfries and Galloway Royal Asylum of 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 Catharine Henry which accompanied the said Petition.

(SIGNED) W. H. Dunbar

DATED this 5th day of August one thousand eight hundred and fifty eight years

To the Superintendent of the (6) Dumfries & Galloway Royal Asylum
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.

644

Catherine Heaney
9/8/58

644

1058

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) ~~Stewartry~~ ~~County~~ of ~~Kirkcudbright~~ Wigtown and his Substitutes,—

The Petition of Jane McGill or Gifford

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that my daughter Mary Ann Gifford 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 Gifford to the Crichton Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) Jane Gifford

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

DATED this 28th (3) day of July one thousand eight hundred and fifty eight.

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 Gifford
2. Sex and Age,	Female, – 29 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	never from home, no business
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Glasserton School house
7. Place where Found and Examined,	Portpatrick
8. Length of time Insane,	3 months
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	29
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	3 months
13. Supposed Cause,	a Fright
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. 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 McGill or Gifford, Main Street Portpatrick, mother of the patient, 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,* Jane Gifford

DATED this 28th day of July one thousand eight hundred and fifty eight.

* 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, Humphry Robertson being a (1) Graduate of the University of Glasg and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Main st Port Patrick in the County Surgeon separately from any other Medical Practitioner visited and personally examined (4) Mary Ann Gifford and th the said Mary Ann Gifford 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) On removable on the light of a stranger. She declared to me that Lousart in Port Patrick, but was away she could n where.

(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 she often says that sh a spirit & that all about her are only spirits & no person that she sees are real but all are s

(SIGNED) *Name and Medical Designation,* Humphry Robertson

Place of Abode, Port Patrick

DATED this 26 day of July One thousand eig hundred and fifty eight

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 Orpile 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) Main st Portpatrick Wigtown in the County separately from any other Medical Practitioner visited and personally examined (4) Mary Ann Gifford resi in Portpatrick and tha the said Mary Ann Gifford 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) Exceedingly a stranger, very childish in manner Speech. Says she is dead & in another hou

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) I have learnt from her mother and from Mr Cummins residing in Portpatrick that she believe herself dead, in another world, and is often gu outrageous, ungovernable actions &c &c Symptom

(SIGNED) *Name and Medical Designation,* John Orpile Surgeon

Place of Abode, Granton

DATED this 26th day of July one thousand eight hundred and fifty eight

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, Thomas Murray Esqure Sheriff Substitute of the (2) County of Wigtown having had produced to me, with a Petition at the instance of (3) Jane Mc Gill or Gifford Certificates under the hands of Mumpsley Robertson Surgeon Portpatrick and John Argill Surgeon 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) May Ann Gifford and that the said May Ann Gifford 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 May Ann Gifford as a Patient into the (6) Crichton ~~Asylum of~~ Royal Institution and I authorise Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said May Ann Gifford which accompanied the said Petition.

(SIGNED) Thr Murray

DATED this ninth day of August one thousand eight hundred and fifty eight

To the Superintendent of the (7) 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, or Private.
(7) Public, District, or Private.

649
Mary Ann Lefforge
1855

724
9/8/59

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 of the (2) Stewarty of Kirkcudbright *and his Substitutes,—*

The Petition of George Hamilton P.F. Fiscal

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Michael Davitts 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 Michael Davitts to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) George Hamilton P.F.

(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 August one thousand eight hundred and forty Eight.

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,	Michael Davitts
2. Sex and Age,	Male
3. Married, Single, or Widowed,	unknown
4. Condition of Life, and previous Occupation (if any),	unknown
5. Religious Persuasion, so far as known,	unknown
6. Previous Place of Abode,	unknown
7. Place where Found and Examined,	Found in Cropmichael parish & examined in Kirkcudbright.
8. Length of time Insane,	unknown
9. Whether first Attack,	unknown
10. Age (if known) on first Attack,	unknown
11. When and where previously under Examination and Treatment,	unknown
12. Duration of existing Attack,	unknown
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	unknown
15. Whether Suicidal,	unknown
16. Whether Dangerous to others,	Dangerous to the Liege
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	The Parish of Cropmichael
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,	unknown
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Michael Davitts apprehended as Lunatic at Large & no particulars ascertained. His case was addressed as required by the Statute

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

(SIGNED)* *Name,* George Hamilton P.F.

DATED this fourth day of August one thousand eight hundred and forty Eight years

* 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, Wm Sanders Shand being a (1) M.B. & University of Edin.r and being in actual practice as a (2) Medical practitioner hereby certify, on soul and conscience, that I have this day, at (3) the Prison of Kirkcudbright — — — — — — — — in the County of Kirkcudbright — — separately from any other Medical Practitioner visited and personally examined (4) Michael Davitts a pauper and the said Michael Davitts — — 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 appearance & behaviour & general behaviour as stated in a paper accompanying this

(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,* Wm S. Shand M.B.

Place of Abode, Royal Burgh of Kirkcudbright

DATED this Tenth day of August One thousand eight hundred and Fifty eight

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 Blair being a (1) L.R.C.S. Edinr and being in actual practice as a (2) Medical Practitioner hereby certify, on soul and conscience, that I have this day, at (3) the Prison of Kirkcudbright Kirkcudbright in the County separately from any other Medical Practitioner visited and personally examined (4) Michael Davitts a Pauper in prison here and the said Michael Davitts 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 appearance & behaviour generally

(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,* David Blair Surg.

Place of Abode, Kirkcudbright

DATED this Eleventh day of August one thousand eight hundred and fifty eight

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, Melbern Hyacinth Dunbar Esquire Steward substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) George Hamilton Certificates under the hands of John Sanders Elwood and Dana 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) Michael Davitts, a pauper and that the said Michael Davitts is a (5) lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Michael Davitts as a Patient into the Southern Counties Asylum of Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Michael Davitts which accompanied the said Petition.

(SIGNED) W H Dunbar

DATED this eleventh day of August one thousand eight hundred and fifty eight years

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.

650
Michael Dennis
12/8/58

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 Nicholas Wright

Harraby Carlisle

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Joseph Wright Labourer 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 Wright to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Nicholas Wright

(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 August one thousand eight hundred and fifty eight

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 Wright
2. Sex and Age,	Male 49
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Farmer
5. Religious Persuasion, so far as known,	Episcopal Church
6. Previous Place of Abode,	Charlton Nr Bellingham Northum.
7. Place where Found and Examined,	London Road Carlisle
8. Length of time Insane,	Three to four years
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	About 45
11. When and where previously under Examination and Treatment,	At Home
12. Duration of existing Attack,	From to four years
13. Supposed Cause,	Recovers in himself
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. 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 Wright (wife) Charlton Bellingham Northum. Sister one mane
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,* Nicholas Wright

DATED this Thirteenth day of August one thousand eight hundred and fifty eight.

* 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.*

I, the undersigned, Robert Elliot of Carlisle being a Doctor of Medicine (of Edin. 1836) and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) House in the on the London road Carlisle — in the County Cumberland separately from any other Medical Practitioner visited and personally examined (4) Mrs Joseph Wright of Cha... near Bellingham Northumberland — and th... the said Mrs Joseph Wright is a (5) person of un... mind, & in my opinion — a proper Person to be detain... under Care and Treatment, and that I have formed this opinion upon the followi... grounds, viz.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) The appearan... her manner, expression, countenance — her replies to questions & questions & her admissions to her several attempts on her own life

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Suicide by strangulation — under the influence of the Devil

(SIGNED) *Name and Medical Designation,* Robert Elliot ...

Place of Abode, Carlisle

DATED this twelfth day of August One thousand eigh... hundred and fifty eight.

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.*

I, the undersigned, Thomas Elliot, Carlisle. being a (2) member of the Royal College of Surg... of England and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) London ... in the County ... Cumberland separately from any other Medical Practitioner visited and personally examined (4) Joseph Wright, of Chares... near Bellingham, Northumberland — and tha... the said Joseph 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) great depression of mind & gloomy views of things, the idea that he is the devil's power & he determined to commit suicide as the only means of escape.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) I understand that he has tried to cut his throat when he was fortunately prevented

(SIGNED) *Name and Medical Designation,* Thomas Elliot. Sur...

Place of Abode, Carlisle - Cumberland

DATED this 13th day of August one thousand eight hundred and fifty eight.

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, Alexander Hannay Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Nicholas Wright Harrabe, Carlisle Certificates under the hands of Robert Elliot M.D. and Thomas Elliot, 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 Joseph Wright, farmer Charlton, Northumberland and that the said Joseph Wright is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Joseph Wright as a Patient into the (5) Public Asylum of Crichton Royal Institution, and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Joseph Wright which accompanied the said Petition.

(SIGNED) A Hannay

DATED this 13th day of August one thousand eight hundred and fifty eight

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.

20 & 21 *Vict., Cap.* 71, *Sect.* 84.

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 Lamb Newton of Whitecroft, Chairman of Parochial Board of Dalton

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Peter Dowlan, Labourer, present prisoner the Prison 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 Peter Dowlan to the Southern Counties asylum and to sanction his admission into the said Asylum.

(SIGNED) James L. Newton Chairman of the Parochial Board of Dalton

(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 August one thousand eight hundred and Fifty Eight

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 Dowlan
2. Sex and Age,	Male - 57 / 58 is believed
3. Married, Single, or Widowed,	Married -
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	Lanarkshire - Bothwell
7. Place where Found and Examined,	Found in Dalton - examined in Dumfries
8. Length of time Insane,	Not Known
9. Whether first Attack,	Not known
10. Age (if known) on first Attack,	Not Known
11. When and where previously under Examination and Treatment,	Not Known
12. Duration of existing Attack,	Not known
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	Not known
15. Whether Suicidal,	Not known
16. Whether Dangerous to others,	It is thought So
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dalton meantime - but Settlement not known
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,	Not Known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	a wandering Labourer found at large in Dalton Parish

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

(SIGNED)* *Name,* James L. Newton

DATED this Eighteenth day of August one thousand eight hundred and fifty eight

* 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, William Scott Graduate of the Univ
being a (1) of Edinburgh & Surgeon Edin
and being in actual practice as a (2)
hereby certify, on soul and conscience, that I have this day, at (3) The Prison
in Dumfries in the County
separately from any other Medical Practitioner
visited and personally examined (4) Peter Dowlan, a pauper
and th
the said Peter Dowlan 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) States that he
by he was married poisoned 20 years ago and he suffers now fr
last news had a wife inflammation of the veins in consequence

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
was apprehended for threatening several peo
for poisoning him by giving him for

(SIGNED) *Name and Medical Designation,* William Scott M.D

Place of Abode, Dumfries

DATED this 18th day of August One thousand eigh
hundred and 56

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 Bathgate M.D
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) the Pris
Dumfries
Dumfries in the County
separately from any other Medical Practitioner
visited and personally examined (4) Peter Dolan a pau
and this
the said Peter Dolan 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 followin
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Insane delu
Dolan Has various delusions about having be
poisoned, and having married a person who was

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
William Wylde his attendant in the Prison sta
he was taken up for threatening people for poisoning

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

Place of Abode Dumfries

DATED this 18th day of August one thousand eight
hundred and fifty six

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in case 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, Alexander Kennedy Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) James Dunn Hamilton Chairman
of Parochial Board of Dalton
Certificates under the hands of William Scott
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) Peter Doulan a pauper, presently in Dumfries and that the said
Peter Doulan is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Peter Doulan as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Peter Doulan which accompanied the said Petition.

(SIGNED) A. Kennedy

DATED this 18th day of August one thousand eight hundred and fifty eight

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.

657.
Peter Dowlan
1858

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) Shire of Wigton *and his Substitutes,—*

The Petition of Isaac M. Connell Inspector of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Gibson residing at Fulhar 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 Gibson her to the Crichton Asylum, Dumfries and to sanction ~~his~~ her admission into the said Asylum.

(SIGNED) Isaac M. Connell

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

DATED this 19th (*) day of August one thousand eight hundred and fifty eight, at Whithorn

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 Gibson
Sex and Age,	— 18 years old
Married, Single, or Widowed,	— Single
Condition of Life, and previous Occupation (if any),	Domestic Servant
Religious Persuasion, so far as known,	
Previous Place of Abode,	Glenrock (a neighbouring farm)
Place where Found and Examined,	Fulhar, where her parents live.
Length of time Insane,	About 19 weeks unwell — decided symptoms nine weeks.
Whether first Attack,	First attack.
Age (if known) on first Attack,	
When and where previously under Examination and Treatment,	
Duration of existing Attack,	About 8 days since the symptoms became decided
Supposed Cause,	Stopping of courses brought on by cold.
Whether subject to Epilepsy,	no
Whether Suicidal,	no
Whether Dangerous to others,	Threatening her mother &c.
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Whithorn parish
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 & Rachel Gibson father & mother, Fulhar, parish of Whithorn. None have 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.

(SIGNED)* Name, Isaac M. Connell, Inspector of Poor

DATED this 19th day of August one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—37.—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, Robert Broadfoot Surgeon being a (1)

and being in actual practice as a (2) Surgeon at Whithorn hereby certify, on soul and conscience, that I have this day, at (3) Fulhar, Parish of Whithorn in the County separately from any other Medical Practitione visited and personally examined (4) Mary Gibson domestic Servan and th the said Mary Gibson 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. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) A wild excite elay with other exc impressions suddenly changing either into Mere fatuous smiles with dancing, singing, whistling, &c. &c.

(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,* Robert Broadfoot Su

Place of Abode, Whithorn

Dated this 19 day of August One thousand eig hundred and fifty eight

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, Alex M Nivan being a (1) Surgeon

and being in actual practice as a (2) Surgeon in Whithor hereby certify, on soul and conscience, that I have this day, at (3) Fulhar in Parish of Whithorn in the County Wigton separately from any other Medical Practitione visited and personally examined (4) Mary Gibson Fulhar and th the said Mary Gibson 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. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Maintained an obst silence for a long time and selfwilled - now she dances sings whistles an incoherently

(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,* Alex M Millan Surg

Place of Abode Whithorn

Dated this 17th day of August One thousand eigh hundred and fifty eight

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, 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) Isaac McConnell Inspector of Poor of the Parish of Whithorn
Certificates under the hands of Robert Broadfoot Surgeon Whithorn
and Alexander McMillan Surgeon Whithorn, 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 Gibson residing at Sulkar (Pauper) and that the said
Mary Gibson is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Gibson 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 Mary Gibson which accompanied the said Petition.

(SIGNED) Thos Murray

DATED this twentieth day of August one thousand eight hundred and fifty eight

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, or Private.
(7) Public, District or Private.

Robert A. Smith Esquire
Clerk & Clerks Office
Wigtown

(urgent)

652
Mary Johnson
21/8/67

(WHITE AIRE 1867)

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 Hyslop, farmer Lochrutton

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Leckie, 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 Elizabeth Leckie or Hyslop to the Lochrutton Royal Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Hyslop.

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

DATED this 23rd (1) day of August one thousand eight hundred and fifty eight 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 Leckie or Hyslop
2. Sex and Age,	Female, 41
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,	Established Church of Scotland
6. Previous Place of Abode,	Lochrutton Parish
7. Place where Found and Examined,	Lochruttongate, Lochrutton
8. Length of time Insane,	Five or six weeks
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	41
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Five or six weeks
13. Supposed Cause,	Anxiety & lactation
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Attempted to cut out her tongue
16. Whether Dangerous to others,	Strikes & attempts to bite at times
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,	Mother, Mrs Leckie, Hills Tower Lochrutton; Brother Robert Leckie, Forside, Lochrutton, both Farmers. None of family ever 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 Hyslop

DATED this 23rd day of August one thousand eight hundred and fifty eight 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, being a (1) Graduate of the University of Edi[n]
Physician of Edinburgh &c.
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Lochrut[t]on
Parish of Lochrutton in the Coun[t]y
Kirkcudbright separately from any other Medical Practitio[n]er
visited and personally examined (4) Elizabeth Lackie or Hysl[o]p
wife of John Hyslop Lochruttongate and
the said Elizabeth Lackie is a (5) Lunatic
and a proper Person to be deta[i]ned
under Care and Treatment, and that I have formed this opinion upon the follo[w]ing
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Wild appearan[ce]
the eyes, restless & unsettled condition, says she was twe[n]ty
minutes in hell last night &c, that the house is on fire, tha[t]
was dead & buried &c.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
some & also sleepless, out of the house on the
Rondier her chemise, throwing the candles about, pulling
children out of bed in the night &c &c.

(SIGNED) *Name and Medical Designation,* James M. M'Culloch

Place of Abode, 38 Castle Street, Dumf[ries]

DATED this 22 day of August One thousand e[ight]
hundred and fifty eight 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, Licentiate of the Faculty of Physicians & [Glas]
being a (1) Licentiate Surgeon,
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Lochrutton
Parish of Lochrutton in the Count[y]
Kirkcudbright separately from any other Medical Practitio[ner]
visited and personally examined (4) Elizabeth Lackie or Hyslop
wife of John Hyslop Lochruttongate and
the said Elizabeth Lackie or Hyslop is a (5) Lunatic
and a proper Person to be detai[ned]
under Care and Treatment, and that I have formed this opinion upon the follow[ing]
grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Wild and confu[sed]
of her eyes, restless condition — incoherent & inconsistent expressions, [&]
of things as real that are quite imaginary &c

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) [I]
that the furniture of the house is all removed from it, that she and
are in a state of destitution &c &c

(SIGNED) *Name and Medical Designation,* John Cunningham, Surg[eon]

Place of Abode, Lochfoot

DATED this 22 day of August one thousand ei[ght]
hundred and fifty eight 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. 1., hereto annexed, to the effect that Elizabeth Leckie or Hyslop is a (1) lunatic, hereby further certify that the Case of the said Elizabeth Leckie or Hyslop is One of Emergency, and I recommend the immediate removal of the said Elizabeth Leckie to an Asylum accordingly.

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

Place of Abode, 38 Castle Street, Dumfries

DATED this 22d day of August one thousand eight hundred and fifty eight 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, Alexander Hannay Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Hyslop farmer Lochanhead Certificates under the hands of James Murray M'Culloch and John Cumming Cairns, 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 Leckie or Hyslop, wife of John Hyslop and that the said Elizabeth Leckie or Hyslop is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Elizabeth Leckie or Hyslop 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 Elizabeth Leckie or Hyslop which accompanied the said Petition.

(SIGNED) Alex Hannay

DATED this 22d day of August one thousand eight hundred and fifty eight years

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

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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.

~~Case~~ 809
Elizabeth Leaker
Exhibit
2/8/68

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,—*

The Petition of John Dinwoodie Inspector of Poor Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Michael Fowler 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 Michael Fowler to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Dinwoodie Insp.

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

DATED this Twenty third (*) day of August one thousand eight hundred and Fifty Eight

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,	Michael Fowler
Sex and Age,	Male – 52 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Labourer
Religious Persuasion, so far as known,	Roman Catholic
Previous Place of Abode,	Not Known
Place where Found and Examined,	Dumfries
Length of time Insane,	Not Known
Whether first Attack,	Not Known
Age (if known) on first Attack,	Do – Do
When and where previously under Examination and Treatment,	Not Known
Duration of existing Attack,	Not Known
Supposed Cause,	Not Known
Whether subject to Epilepsy,	Paralytic & Epileptic
Whether Suicidal,	No
Whether Dangerous to others,	No
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
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
Special circumstances (if any) preventing the insertion of any of the above particulars,	want of particular information

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

(SIGNED)* Name, John Dinwoodie Inspector

DATED this Twenty third day of August one thousand eight hundred and Fifty Eight

* 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.

(6) *State the facts.*

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

I, the undersigned, William Scott Goodsir
being a (1) of the University of Edin
and being in actual practice as a (2) Physician & Surge
hereby certify, on soul and conscience, that I have this day, at (3) the Ins
of Dumfries in the Count
Dumfries separately from any other Medical Practitio
visited and personally examined (4) Michael Fowler
the said Michael Fowler and 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) Incoherent
Tearing his clothes & rings and his
objection & enmity like any one

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Similar information &
Mine observed — he hopes he
Government & mine on the flo

refusing & not
an attendant for
the purpose —

(SIGNED) *Name and Medical Designation,* W Scott MD

Place of Abode, Dumfries

DATED this 23 day of August One thousand e
hundred and 56.

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 Marshall
being a (1) Member of the Faculty of Physicians
Glasgow and 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) Prison
of Dumfries in the Count
Dumfries separately from any other Medical Practitio
visited and personally examined (4) Michael Fowler
the said Michael Fowler and 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) Incoherency
and thoroughly dead as to all

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Much the same as above

(SIGNED) *Name and Medical Designation,* William Marshall

Place of Abode Buccleuch Street Dum

DATED this 23 day of August one thousand e
hundred and 56

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, Alexander Hannay Shff 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 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)
Michael Fowler a pauper and that the said
Michael Fowler is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Michael Fowler as a Patient into the (6) Public Asylum of Southern Counties 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 Michael Fowler which accompanied the said Petition.

(SIGNED) Alex Hannay

DATED this twenty third day of August one thousand eight hundred and fifty eight 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.

Michael Goodes
24/8/58

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 Catherine Currie residing in Carlisle humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Currie my 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 Alexander Currie to the The Richmond Institution and to sanction his admission into the said Asylum.

(Signed) Catherine Currie

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

Dated this 21st (3) day of Augt. one thousand eight hundred and 58

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 Currie
2. Sex and Age,	Male. 40
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Assistant Station Master.
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	Carlisle
8. Length of time Insane,	6 weeks.
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,	Disappointed hopes of advancement in life. Intense application to his duties
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Never has made any attempt or expressed any determination to commit suicide
16. Whether Dangerous to others,	Threatening
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 Currie his brother. Maybole None of his Relations 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,* Catherine Currie

Dated this 21st day of August one thousand eight hundred and fifty eight

* 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.

I, the undersigned, Robert Elliot being a (1) Doctor of Medicine

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

and being in actual practice as a (2) Physician at Carlisle

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

hereby certify, on soul and conscience, that I have this day, at (3) the Citadel of the Caledonian & Lancaster & Carlisle Companies in the County of Cumberland separately from any other Medical Practitioner

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

visited and personally examined (4) Alexander Currie Asst to Station lately or now at the said Citadel Station and that

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

the said Alexander Currie 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) Restlessness of eye & of manner unusual to him — as for some time he has been known to me — inability to keep mind for any reasonable time fixed on a subject

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His Dislike, or entire repudiation of his nearest relations — His belief in conspiracies against him & his estate — His highly and ambitious ideas of his genealogy — &c &c

(SIGNED) *Name and Medical Designation,* Robert Elliot MD Resides at the Citadel with Family

Place of Abode, Carlisle

DATED this 20th day of August One thousand eight hundred and fifty eight.

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.

I, the undersigned, Matthew John Rae being a (1) Doctor of Medicine

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

and being in actual practice as a (2) Physician at Carlisle

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

hereby certify, on soul and conscience, that I have this day, at (3) the Central Railway Station Carlisle in the County of Cumberland separately from any other Medical Practitioner,

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

visited and personally examined (4) Alexander Currie lately Assistant Station master and that

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

the said Alexander Currie 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 Change of manner & disposition, Wild restless eye. incoherent conversation. & delusions, as belief in Conspiracies against his life & Property, & evinces his wild disposition by violent Threats towards himself & others of his medical

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Dislike to his friends, denial of his relations, thinks his worst enemies are his best friends, believes himself the Lord & Regent, Imagines his wife detains him from his Estates &c &c Has made Depositions on oath against his wife

(SIGNED) *Name and Medical Designation,* Matthew John Rae MD

Place of Abode, Lowther Street Carlisle

DATED this 20th day of August one thousand eight hundred and fifty eight

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, Alexander Hannay Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Catherine Currie residing in Carlisle Certificates under the hands of Robert Elliot and Matthew Jones Rae, 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 Currie in Carlisle and that the said Alexander Currie is a (5) Person of unsound mind & Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Currie as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Currie which accompanied the said Petition.

(SIGNED) A. Hannay.

DATED this 23d day of August one thousand eight hundred and fifty eight

To the Superintendent of the (7) Public *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, or Private.
(7) Public, District, 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) County of Dumfries *and his Substitutes,*—

The Petition of John Young Farmer in Langholm

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Walter Young 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 Walter Young to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) John Young

(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 August one thousand eight hundred and fifty eight

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,	Walter Young
2. Sex and Age,	Male aged 32 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	No occupation but chiefly engaged in out door Farm Labour
5. Religious Persuasion, so far as known,	Presbyterian — Free Church
6. Previous Place of Abode,	Always resided in Langholm
7. Place where Found and Examined,	Do
8. Length of time Insane,	Apparently for some years but more decided for some Months past
9. Whether first Attack,	—
10. Age (if known) on first Attack,	Never under treatment
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	Unable to tell
13. Supposed Cause,	Subject to Tetanus in Infancy causing Contortions of the upper & Lower Extremities with much pain —
14. Whether subject to Epilepsy,	Not aware —
15. Whether Suicidal,	Yes —
16. Whether Dangerous to others,	—
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	In Nature of Langholm but not Chargeable to the Parish
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,	Fathers Name is John Young, Langholm and no other Member of the family Nor Relative 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,* John Young

DATED this twenty first day of August one thousand eight hundred and fifty eight

* 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 Traycroll Surgeon being a (1) Licentiate of the Royal College of Surgeons Edinburgh. — and being in actual practice as a (2) Surgeon in extensive practice hereby certify, on soul and conscience, that I have this day, at (3) Langholm Toll-foot Dumfries — in the County separately from any other Medical Practitioner visited and personally examined (4) Walter young residing at Langholm, not a Pauper, — and the said Walter young 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) Erratic notions. Coat. Raid Roads, acknowledged attempt to stab one of his sisters servants.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) [illegible] gone in obscene and blasphemous language, and exposure of person as narrated, and testified by the father, sister, of the said Walter young. also various attempts to [illegible]

(Signed) *Name and Medical Designation,* William Traycroll Surgeon F.R.C.S.E.

Place of Abode, Langholm Toll-foot.

Dated this twentieth day of August One thousand eight hundred and fifty eight. —

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 Johnston Bartyle M.D. Edin. being a (1) Member of the Royal College of Surgeons Ed[inburgh] and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Langholm Toll-foot Dumpries in the County separately from any other Medical Practitioner visited and personally examined (4) Walter Young - Visited at Langholm Toll-foot and the said Walter Young is a (5) person who ought to be [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) Weak intellect and strong animal passions

2. Other facts (if any) indicating Insanity communicated to me by others. (7) attempts to murder his sister, and using outrageous [illegible] language when [illegible] in his presence — communicated to me by the Revd. Charles Watson Langholm

(Signed) *Name and Medical Designation,* W. J. Bartyle M.D.

Place of Abode, Langholm

Dated this 20th day of August one thousand eight hundred and fifty eight

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, Alexander Kennedy Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Young residing in Langholm Certificates under the hands of William Maxwell and William Somerton 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) Walter Young in Langholm and that the said Walter Young is a (5) person of unsound mind & Insane and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Walter Young as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Walter Young which accompanied the said Petition.

(SIGNED) Alex Kennedy

DATED this 23. day of August one thousand eight hundred and fifty eight

To the Superintendent of the (7) Public 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, or Private.
(7) Public, District, or Private.

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Walter Young
24/8/58

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 Walter Newall of No 11 Manor Street Clapham in the County of Surrey—

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Newall his 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 Newall ~~——~~ The to the Crichton Institution, Dumfries, and to sanction ~~his~~ admission into the said Asylum.

(SIGNED) Walter Newall

DATED this ~~Twenty fifth~~ (3) ~~day of September~~ Second day of September one thousand eight hundred and fifty eight. ~~Instant~~ inst.

(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,	Mary Newall
2. Sex and Age,	Female - about 36 or 37 years
3. Married, Single, or Widowed,	My wife
4. Condition of Life, and previous Occupation (if any),	Married nearly 14 years - No occupation
5. Religious Persuasion, so far as known,	Protestant Presbyterian
6. Previous Place of Abode,	Resided most of her life in London or its suburbs
7. Place where ~~Found and~~ Examined,	Clapham, Surrey
8. Length of time Insane,	For some months has been getting more subject to delusions & excitement: not previously so affected.
9. Whether first Attack,	
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	not so.
12. Duration of existing Attack,	For some months with placid intervals
13. Supposed Cause,	Cannot assign any cause.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Not so.
16. Whether Dangerous to others,	Has threatened me often & has a delusion that I intend to poison her.
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,	Has no relatives except nephews or nieces, and nothing known regarding them for years.
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,* Walter Newall

DATED this ~~Twenty fifth day of August~~ Second day of September one thousand eight hundred and fifty Eight. ~~Instant~~ inst.

* 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* and being in actual practice as a (2) *otherwise, as the case may be.*

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

I, the undersigned, Dawton Greenwood being a (1) Surgeon & Licentiate of Apothecaries

hereby certify, on soul and conscience, that I have this day, at (3) No 11 Manor Street Clapham in the County of Surrey separately from any other Medical Practitioner visited and personally examined (4) Mary Newall of No 11 Manor Street Clapham Surrey and that the said Mary Newall 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) The delusion that her husband intends to burn her to a cinder that he has sworn her life that by her death he may receive the money from the Insurance Societies & Ladies etc etc

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) (My Newall informs me that she has frequently attempted to destroy herself with a carving knife & that he considers his life to be in great danger

(SIGNED) *Name and Medical Designation,* Dawton Greenwood Surgeon & Apothecary

Place of Abode, 1 Crescent Place Clapham

DATED this 30th day of August One thousand eight hundred and 58

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* and being in actual practice as a (2) *otherwise, as the case may be.*

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

I, the undersigned, Edward Saylac being a (1) Member of the College of Surgeons London & Licentiate of the Apothecaries Company

hereby certify, on soul and conscience, that I have this day, at (3) No 11 Manor Street Clapham Surrey in the County separately from any other Medical Practitioner visited and personally examined (4) Mary Newall of No 11 Manor Street Clapham Surrey and that the said Mary Newall 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) General incoherency that she is to be cut up into veal & burnt to death by her husband watching at the place and many other delusions

(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,* Edward Saylac Esq

Place of Abode, Clapham Common

DATED this 30th day of August one thousand eight hundred and fifty eight

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) *of the* (2)
of *and his Substitutes,*—

The Petition of

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

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

to the

and to sanction his admission into the said Asylum.

(SIGNED) _____

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

DATED this (*) day of 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, ...
2. Sex and Age, ...
3. Married, Single, or Widowed, . . .
4. Condition of Life, and previous Occupation (if any), ...
5. Religious Persuasion, so far as known, .
6. Previous Place of Abode, ...
7. Place where Found and Examined, .
8. Length of time Insane, ...
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, ...
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, ...
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*, _____

DATED this day of one thousand eight hundred and

* 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.*

I, the undersigned, James Sibbald 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) Mary Newall Gardener 11 Manor Street Clapham London and the said Mary Newall 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) General excitement activity with various delusions and delusions as to her husband others intending to injure her.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) That she is occasionally excited and at times so excited threatens injury to her husband confirms the delusion that he is insane

(SIGNED) *Name and Medical Designation,* James Sibbald M

Place of Abode, Crichton Royal Dumfries

DATED this second day of September One thousand eight hundred and fifty eight

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.*

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 of 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.:—

(4) *Insert 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.*

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)

(SIGNED) *Name and Medical Designation,* _____

Place of Abode, _____

DATED this day of one thousand eight hundred and

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, Alexander Hannay Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Walter Newall
of No 11 Manor Street Clapham Surrey
Certificates under the hands of Edward Taylor Surgeon
and James Gilchrist, 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)
Mary Newall, wife of said Walter Newall and that the said
Mary Newall is a Lunatic & 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 Newall as a Patient into the (5) 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 Newall which accompanied the said Petition.

(Signed) Alex Hannay

Dated this Second day of September one thousand eight hundred and fifty eight

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.

$10
Thos Meade
12/9/58

CRICHTON ROYAL INSTITUTION,

Private Department.

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 Smitson, Esq. of Dalswoodie.
M. C. Maxwell, Esq. of Terregles.
P. Dudgeon, Esq. of Cargen.
Thomas Steuart Gladstone, Esq. of Capenoch.
James Hotchkis, Esq., Summerville.

Officers.

James Gilchrist, M.D., Resident Physician.
John Dickson, M.D., Medical Assistant.
Mrs Sowtley, Matron.
And. Henderson, House Steward.
Mrs Ramsay, Superintendent.

R. Adamson, Esq., } Treasurers.
S. Adamson, Esq., }

Rev. G. Cowans, Chaplain.

Patients will be received on the presentation, previous to admission, to the Resident Medical Officer, Dr Gilchrist, of an application from the nearest of kin, the guardians, or local authorities; certificates of lunacy; and a warrant from the Sheriff, as required by law; also an obligation from some respectable party or parties to pay such a rate of board as may be determined upon, according to the Rules of the Institution, and to comply with all rules and regulations as to clothing, removal, and burial. These documents are annexed.

All applications for admission should be forwarded at least three days before the arrival of the Patient, that time may be given for correspondence as to whether a vacancy exists, the rate of board, &c., and that due preparation may be made for his or her reception. Patients will be admitted between 8 A.M. and 8 P.M. upon every lawful day. Patients who are pregnant, moribund, or affected with fever, contagious or incurable diseases, cannot be received; and such as do not appear to be proper objects, may be discharged on the recommendation of the Medical Officer, being approved of by the Trustees, timely notice being given to the friends or guardians.

The admissibility of Patients will be determined upon by the Medical Officer; and in the first instance the rate of Board will be fixed by him, subject, however, to be confirmed or modified by the Trustees and Directors. 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 Officer on admission or discharge, or at any other time, or upon any pretext whatever. It will be observed, from the Table annexed, that a difference will be made in the following particulars, according to the rate of board and the circumstances and conditions under which the individual is admitted, viz., in the situation, size, furniture, and number of apartments; in the diet; in the proportion of the attendants; and in the various luxuries which rank, sex, habit, or the state of the disease, may render necessary. At the same time, whenever the nature of the case may demand greater accommodation, the special services of an attendant, or a more expensive style of living than the Patient is entitled to, they will be granted.

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; but 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 the presence of the Resident Medical Officer or Matron, 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 must be supplied with clothes by their friends or guardians.

Patients when recovered, or found to be unfit, 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 individual; 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 will be doubled, or the Patient sent to his or her friends or guardians at their expense.

A fortnight's notice of the intention of friends or guardians to remove the Patient must be forwarded to the Resident Medical Officer.

The Patients will be visited by the Resident Medical Officer and Matron always once or twice a-day, and in general they will be inspected by these or other officers much more frequently, under every variety of circumstances, and under every aspect of the malady. 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.	Mary Newall, wife of Walter Newall, occupied with her own domestic Duties. Education [illegible] Generally speaking.
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	There seems to be no physical cause. Her disposition to seclude herself from Society may have aggravated the disease.
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.?	I believe not
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?	Not subject to Epilepsy. She has now & then been treated for Menstrual irregularity
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?	Unfounded jealousy & apprehension that her husband intends to murder her. Do.
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.	In all respects she is in good health
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?	This is the first attack. It began very gradually & was unaccompanied by any marked constitutional peculiarity.
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?	The delusions are referred to in answer 5. Besides these however, she thinks that an insane her husband has spoiled or has otherwise injured her. She occupies herself in household duties
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	I believe not
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thoughts excited by any particular subject or event?	Yes. She often has threatened her husband's life. The sight of the fire-grate suggests the delusion that her husband intends to [illegible]
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 prominent propensity, or tendency to crime?	I don't know
12. What treatment has been resorted to, for what length of time, and with what success?	None except occasional medical treatment
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	It is difficult to say when insanity began. Probably 6 or 9 months ago she might be called insane. No

Geo Bird M.D. [illegible]
26 Gradwell

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.*

The Petition of John Dinwoodie Inspector of Poor Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Mc Ord in the Poorhouse 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 Mary Mc Ord to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(Signed) John Dinwoodie Inspector

The date of the petition must be within fourteen clear days following the dates of the Medical Certificates.

Dated this Nineth (3) day of September one thousand eight hundred and Fifty Eight

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 Mc Ord
Sex and Age,	female - said to be 29 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Poor
Religious Persuasion, so far as known,	Not Known
Previous Place of Abode,	Dumfries
Place where Found and Examined,	Ditto
Length of time Insane,	Not Known
Whether first Attack,	Not Known
Age (if known) on first Attack,	Not Known
When and where previously under Examination and Treatment,	Poorhouse Dumfries
Duration of existing Attack,	Not Known
Supposed Cause,	Dissipation
Whether subject to Epilepsy,	Not Known
Whether Suicidal,	Yes - Attempted to drown herself
Whether Dangerous to others,	
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries in the Meantime
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
Special circumstances (if any) preventing the insertion of any of the above particulars,	Cannot be ascertained

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

(Signed)* Name, John Dinwoodie Inspector

Dated this Nineth day of September one thousand eight hundred and Fifty Eight

* 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.

(6) *State the facts.*

I, the undersigned, Graduate of the University of Edinb
being a (1) Physician &c. of that College
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Parish
Workhouse of Dumfries in the Cou
of Dumfries
separately from any other Medical Practiti
visited and personally examined (4) Mary Mc Ord, Pauper
an
the said Mary Mc Ord 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) Wild appearan
the eyes, restlessness, raving about married & single m
in & under her bed & "Devils" men meddling with m

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
same & the facts of her being sleepless for about a
of being violent very noisy & outrageous, especially o
&c. Attempted suicide by drowning.

(SIGNED) *Name and Medical Designation,* James Mc. McCulloch M.
Place of Abode, 38 Castle Street, Dumfr

DATED this 9th day of September One thousand
hundred and fifty eight 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.*

I, the undersigned, Graduate of the Faculty of
being a (1) Physicians & Surgeons Glasgow and College
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Mary Ord
Dumfries
Dumfries in the Cou
separately from any other Medical Practi
visited and personally examined (4) Mary McOrd
an
the said Mary McOrd is ~~a~~ (5) Insane
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) Violent
threatening Mrs Grieve & the other
on the Green with her arms & hands
Mrs Grieve & her daughter to go to the
have the care of her and has allem

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

2. Other Facts (if any) indicating Insanity communicated to me by others:
Mrs Grieve & Mrs Rose & mentioned

(SIGNED) *Name and Medical Designation,* Wm Mean Mary
Place of Abode Buccleuch Street Dum

DATED this 9th day of September one thousand
hundred and fifty eight 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 McOrd is a (1) Lunatic hereby further certify that the Case of the said Mary McOrd is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, James Murray McCulloch M. D. &c.

Place of Abode, 38 Castle Street, Dumfries

DATED this 9th day of September one thousand eight hundred and fifty eight 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, Alexander Kaymay (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 James Murray McCulloch 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) Mary McOrd a pauper and that the said Mary McOrd is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary McOrd 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 McOrd which accompanied the said Petition.

(SIGNED) Alexkaymay

DATED this Ninth day of September one thousand eight hundred and fifty eight 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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Mary McLeod

9/9/58

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) The Sheriff of the (2) Shiffplom of Haddington *and his Substitutes,—*

The Petition of Thomas Tedrick, Writer, Haddington humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexr Howden, Stock Broker, Edinburgh 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 Alexr Howden to the Edinburgh Royal Institution for Lunatics at Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Thomas Tedrick

(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 September One thousand eight hundred and fifty Eight

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,	Alexr Howden
2. Sex and Age,	Male - 53
3. Married, Single, or Widowed,	Widower
4. Condition of Life, and previous Occupation (if any),	Stock Share Broker
5. Religious Persuasion, so far as known,	Episcopalian
6. Previous Place of Abode,	Edinburgh
7. Place where ~~Found and~~ Examined,	W. Gateside - East Lothian
8. Length of time Insane,	Fourteen 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,	—
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. 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,	Eleanor Howden, Sister of Patient Widow 11. Falcon Ave, Edinburgh Patient Father 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, Thomas Tedrick

DATED this Twenty Seventh day of September One thousand eight hundred and Fifty Eight

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Thomas Howden Junr being a (1) Surgeon of Edinburgh and being in actual practice as a (2) Lunacy Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Haddington in the County of Haddington separately from any other Medical Practitioner, visited and personally examined (4) Mrs Olivia Howden and that the said Olivia Howden is (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.:—

1. Facts indicating Insanity observed by myself: (6) Her attempts to throw herself by night & by day. Her delusions regarding her profession. Her wild & irrational projects at her visits.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) That she is subject to the same kind of delusion in writing. That her delusions regarding her writing. That she has delusions that she is God & various other delusions that her pictures is finer than Titian

(SIGNED) Name and Medical Designation, Thomas Howden Junr M.D.

Place of Abode, Haddington

DATED this 27th day of September One thousand eight hundred and fifty eight

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

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

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

(4) Insert 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, Thomas Howden Junior being a (1) Physician & Surgeon of Edinburgh and being in actual practice as a (2) Lunacy Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Haddington in the County of Haddington separately from any other Medical Practitioner, visited and personally examined (4) Mrs Olivia Howden and that the said Olivia Howden is (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.:—

1. Facts indicating Insanity observed by myself: (6) Her attempts to throw herself by night her delusions regarding her profession her delusions regarding her writing her pictures are finer than Titian's her delusions that she is God her utter incapacity for attention to her dress & her filthy habits.

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

Same as above

(SIGNED) Name and Medical Designation, Thos Howden Junr M.D.

Place of Abode, Haddington

DATED this 27 day of September One thousand eight hundred and fifty eight

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

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

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

(4) Insert 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, Robert Riddell — (1) Sheriff Substitute
of the (2) County of Haddington having had produced to me, with a Petition at the instance of (3) Thomas Fodrick, Writer Haddington
Certificates under the hands of Thomas Howden Junior
and Thomas Howden Junior —, 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)
Oliver Howden Joseph Broker Edinburgh and that the said
Oliver Howden — is an Insane person —
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Oliver Howden as a Patient into the (5) 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 Oliver Howden — which accompanied the said Petition.

(SIGNED) Robert Riddell

DATED this 27th day of September One thousand eight hundred and forty eight.

To the Superintendent of the (6) Crichton Royal Institution and 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.

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Mr Oliver Howden

28/9/58

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 Dinwoodie Inspector of Poor Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Smith 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 Smith to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John Dinwoodie

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

DATED this 28th (3) day of September one thousand eight hundred and Fifty Eight

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 Smith
2. Sex and Age,	Female — 54 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Poor — No Occupation
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Towns Hospital
7. Place where Found and Examined,	Do. Do
8. Length of time Insane,	About two Months
9. Whether first Attack,	No
10. Age (if known) on first Attack,	No
11. When and where previously under Examination and Treatment,	Towns Hospital
12. Duration of existing Attack,	About two 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,	Dumfries
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,	Not Known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Could not be Ascertained

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

(SIGNED)* *Name,* John Dinwoodie

DATED this 28th day of September one thousand eight hundred and Fifty Eight

* 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, William Marshall being a (1) Graduate of the Faculty of Physicians & Surgeons Glasgow & Licentiate of the 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) the Hospital Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mary Smith and that the said Mary Smith 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 but speaks much upon the Gospel & her own and other families & certain plants & to be subject to [illegible]

(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

(SIGNED) *Name and Medical Designation,* William Marshall

Place of Abode, Buccleuch Street Dumfries

DATED this 28th day of September One thousand eight hundred and fifty eight 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) 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) the Hospital Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mary Smith and that the said Mary Smith 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 Imagines that she sees different animals in her room during the night - and that a soldier annoys her by watching her during the night &c

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Similar statement to those mentioned above from the Matron of the Hospital

(SIGNED) *Name and Medical Designation,* William Scott M.D.

Place of Abode, Dumfries

DATED this 28th day of September one thousand eight hundred and 58.

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, Alexander Hannay (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 Marchmont M.D. and William Scott 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) Mary Smith a pauper and that the said Mary Smith is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Smith 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 Mary Smith which accompanied the said Petition.

(SIGNED) Alex Hannay

DATED this Twenty ninth day of September one thousand eight hundred and fifty eight 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.

6556
William Smith
29/9/58

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 Carruthers Inspector of Poor of the Parish of Kirkpatrick Fleming humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Rae 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 Rae to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Carruthers

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

DATED this Twenty ninth (*) day of September one thousand eight hundred and fifty eight 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 Rae
2. Sex and Age,	Male, 69 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Hollee Village
7. Place where Found and Examined,	Poorhouse Kirkpatrick F.G.
8. Length of time Insane,	Has gradually become so for many years past
9. Whether first Attack,	
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Under none
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,	Kirkpatrick F. Leming
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,	Marjory Rae in Poorhouse Kirkpatrick F.G. and Jean Rae at Hollee Village, Kirkpatrick F.G. are her sisters and although they are not insane they are rather simple
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 Carruthers

DATED this 29 day of Sept one thousand eight hundred and Fifty eight

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1240.

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.

I, the undersigned, James Carruthers
being a (1) Licentiate of the Royal College of Surgeons,

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

and being in actual practice as a (2) Surgeon

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

hereby certify, on soul and conscience, that I have this day, at (3) the Mun Poorhouse, Kirkpatrick Fleming in the County of Dumfries separately from any other Medical Practitioner

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

visited and personally examined (4) William Rae, inmate of the Poorhouse, Kirkpatrick Fleming, a pauper and that

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

the said William Rae 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 stupidity, want of intelligence inability to take care of himself and fatuous state

(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,* James Carruthers, Surg

Place of Abode, Kirkpatrick Fleming

DATED this 29th day of September One thousand eight hundred and Fifty eight 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.

I, the undersigned, Alexander Borthwick M.D.
being a (1) Graduate of the University of Edinbr

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

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

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

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

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

visited and personally examined (4) William Rae a pauper and that

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

the said William Rae 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 unable to answer any ordinary question, and has a stupid idiotic expression

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

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

Mr Carruthers the Inspector of this Lunacy District says that he is wholly incapable in taking care of himself that he is fatuous

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

Place of Abode, Dumfries

DATED this 29th day of September one thousand eight hundred and Fifty eight

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 Stewart Gotter (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Carruthers Inspector of Poor Kirkpatrick Fleming
Certificates under the hands of James Carruthers
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) William Rae a pauper and that the said
William Rae 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 Rae as a Patient into the (6) Public Asylum of Southern Counties and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Rae which accompanied the said Petition.

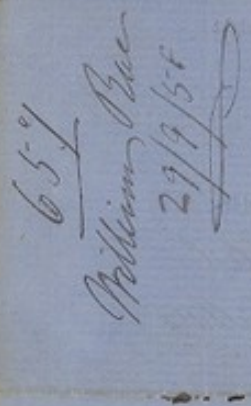
(SIGNED) John Stewart Gotter.

DATED this twenty ninth day of September one thousand eight hundred and fifty eight 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.



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 Stewartd. (2) Shire or Stewartry.

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

The Petition of Wm M'Kelvie, Inspector of Poor

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Thomson 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 Thomson to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Wm M'Kelvie Inspector Dumfries

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

DATED this Second (3) day of October one thousand eight hundred and Fifty Eight

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 Thomson
2. Sex and Age,	Female. aged 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,	Free Church of Scotland
6. Previous Place of Abode,	Crighton Institution & Dumfries Dumfries
7. Place where Found and Examined,	Parkburn Lowald Parish
8. Length of time Insane,	Since Whitsunday Last
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	45 years
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Since Whitsunday Last
13. Supposed Cause,	
14. Whether subject to Epilepsy,	never subject to Epilepsy
15. Whether Suicidal,	yes
16. Whether Dangerous to others,	not known to
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Dumfries
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 Thomson Parkburn. Brother none of the family 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,* Wm M'Kelvie Inspector of Poor Dumfries

DATED this Second day of October one thousand eight hundred and Fifty Eight

* 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.*

I, the undersigned, John Chisholm being a (1) ~~Physician~~ 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) Parkburn in the County of Dumfries separately from any other Medical Practitione visited and personally examined (4) Mary Thomson and th

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

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

the said Mary Thomson 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Delusions — fancies that she is possessed of the devil — suicidal tendencies

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) has several times attempted suicide — informed by her brother

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

Place of Abode, Burnbank House Dumfr

DATED this 1st day of October One thousand eig hundred and fifty eight

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.*

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) Park Bu Dumfries in the County separately from any other Medical Practitione visited and personally examined (4) Mary Thomson and th

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

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

the said Mary Thomson 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She stated the devil dwelt in her side and w this D. take away her own life

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Her brother blame she had Suicidal attempts several

(SIGNED) *Name and Medical Designation,* William Scott

Place of Abode, Dumfries

DATED this 1st day of Oct one thousand eigh hundred and 58

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 Thomson is a (1) Lunatic hereby further certify that the Case of the said Mary Thomson is One of Emergency, and I recommend the immediate removal of the said to an Asylum accordingly.

Name, John Chisholm M.D

Place of Abode, Buccleuch Street Dumfries

DATED this 2d day of October one thousand eight hundred and 58

(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.

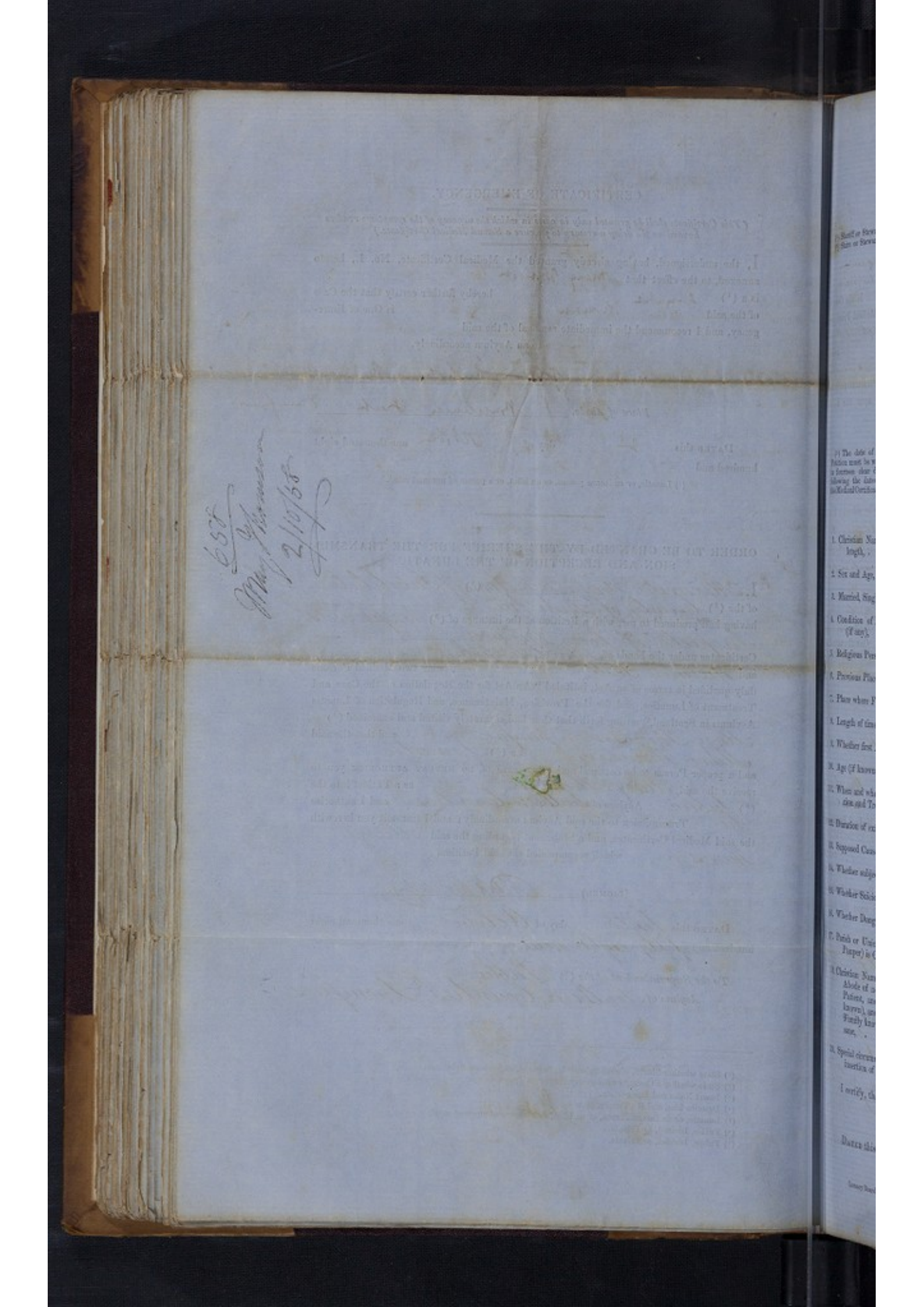
I, Alexander Kennedy Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Joseph Welsh Inspector of Poor & Inquirer Certificates under the hands of John Chisholm and William Scott, being two Medical Persons duly qualified in terms of an Act, 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) Mary Thomson, a pauper and that the said Mary Thomson is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Thomson as a Patient into the (6) Public Asylum of Southern Counties 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 Thomson which accompanied the said Petition.

(SIGNED) A Kennedy

DATED this Sixth day of October one thousand eight hundred and fifty eight 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.



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 Moffat Flesher in Annan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Moffat Flesher in Annan 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 Moffat ——— to the Royal Crichton Institution Dumfries, and to sanction his admission into the said Asylum.

(SIGNED) William Moffat

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

DATED this sixteenth (3) day of October one thousand eight hundred and fifty eight.

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 Moffat
2. Sex and Age,	Male. aged about 37.
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Lately Flesher in Annan
5. Religious Persuasion, so far as known,	Protestant (Independent)
6. Previous Place of Abode,	Annan
7. Place where Found and Examined,	Do
8. Length of time Insane,	About two years
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Never
12. Duration of existing Attack,	Two years
13. Supposed Cause,	Constitutional
14. Whether subject to Epilepsy,	Not formerly. Brothers have two epileptic fits since appearance of insanity.
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,	William Moffat his Brother resident in Annan.
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.

DATED this 16th day of October one thousand eight hundred and fifty eight

(SIGNED)* *Name,* William Moffat

* To be Signed by the Party applying.

Lunacy Board,—Dec.—67.—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, Ryan B Rojic. Member of the Roy
being a (1) of Physicians & Surgeons in Edinburgh
and being in actual practice as a (2) Physician Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) his house
High St Dumfries in the County
separately from any other Medical Practitioner
visited and personally examined (4) John Moffat High St Dum
and t
the said John Moffat 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)

Melancholy removed fatuity

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

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

a description brought distances a
middle aged his way home a singular desir
to borrow large sums of money. Information from
his brother

(SIGNED) *Name and Medical Designation,*

Place of Abode, Allen B Rojic Phy
Dinwiddie Dumfr. Scotland

DATED this sixteenth day of October One thousand ei
hundred and fifty eight.

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 Colquhoun
being a (1) Surgeon, Edinburgh Surgeon Member of the Royal C
and being in actual practice as a (2) Surgeon & Physician
hereby certify, on soul and conscience, that I have this day, at (3) 6 Bank Lane
High Street Dumfries in the County
separately from any other Medical Practitioner
visited and personally examined (4) John Moffat High Street
and th
the said John Moffat 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 followi
grounds, viz.:—

(6) *State the facts.*

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

From my notions I Believe he
Melancholy and Fatuity

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

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

an inconsolable disposition to transa
distances and not able to find his way h
a singular desire to borrow money and spent
Information, his Brother,

(SIGNED) *Name and Medical Designation,*

Place of Abode, Wm Colquhoun Surgeon
Port St Street

DATED this sixteenth day of October one thousand eigh
hundred and fifty eight

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 Fyfe (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Moffat, Flesher in Annan Certificates under the hands of Agnew Black Bogie and William Ewart, 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 Moffat, Flesher in Annan and that the said John 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 John Moffat as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Moffat which accompanied the said Petition.

(SIGNED) John P. Fyfe

DATED this Eighteenth day of October one thousand eight hundred and fifty eight years.

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.

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 of the (2) Stewartry of Kirkcudbright *and his Substitutes,—*

The Petition of James Thomson

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Burns 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 Helen Burns her to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum. Mind deleted

(Signed) James Thomson

(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 October one thousand eight hundred and fifty eight 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,	Helen Burns
2. Sex and Age,	Female - 20 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	House Servant
5. Religious Persuasion, so far as known,	Member of Free Church of Scotland
6. Previous Place of Abode,	Born in Glasgow
7. Place where Found and Examined,	Kirkcudbright
8. Length of time Insane,	Occasionally since last May - Not now stated,
9. Whether first Attack,	First so far as known
10. Age (if known) on first Attack,	20 years
11. When and where previously under Examination and Treatment,	Pt Mary Cook was seen by Dr Thomson
12. Duration of existing Attack,	Two days
13. Supposed Cause,	Mind, one day excited talk high notions in matters of Religion and on another - Con
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,	Kirkcudbright
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 Kerr. Castle Rn. Kirkcudbright Grand Uncle None Insane - as known to Informant
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 Thomson

Dated this eighteenth day of October one thousand eight hundred and fifty eight years

* 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, Arch.d K Campbell being a (1) Surgeon and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Castle gu Kirkcudbright in the Coun separately from any other Medical Practitio visited and personally examined (4) Pauper Helen Burns Cas and the said Helen Burns is a (5) perso of unsound Mind and a proper Person to be detai under Care and Treatment, and that I have formed this opinion upon the follo grounds, viz.:—

1. Facts indicating Insanity observed by myself: (6) Delusions r Religion such as She thinks her self to save also She is to Queen of England at tim

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Fits of Excitement and depression at times, by Mr Lindsay her medical

(SIGNED) *Name and Medical Designation,* Arch.d K Campbell Surgeon

Place of Abode, Kirkcudbright

DATED this 18th day of Oct.r One thousand ei hundred and 58

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 Johnstone M.D. Edinr, Fe being a (1) ~~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) Castle G Kirkcudbright in the County Kirkcudbright separately from any other Medical Practition visited and personally examined (4) Helen Burns, Paup and th the said Helen Burns is a (5) Patien 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.:—

1. Facts indicating Insanity observed by myself: (6) From her de of Melancholia at Commencement of attac And from her present hallucinations being Our Savior, and sometimes Queen Victoria.

2. Other facts (if any) indicating Insanity communicated to me by others. (7) From the radical change in her personal character as reported by Matron - Mrs Lindsay

(SIGNED) *Name and Medical Designation,* Wm Johnstone M.D.

Place of Abode, Kirkcudbright

DATED this 17th day of October one thousand eigh hundred and 58.

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, David Blair, Esquire, Steward (1) Substitute —
of the (2) Stewartry of Kirkcudbright —
having had produced to me, with a Petition at the instance of (3)
James Hamson
Certificates under the hands of J.K. Campbell —
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)
Helen Burns, a pauper — and that the said
Helen Burns — 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 Burns — as a Patient into the (6) Crichton — Asylum of 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 Helen Burns — which accompanied the said Petition.

(SIGNED) David Blair

DATED this Nineteenth day of October — one thousand eight hundred and ~~sixty~~ fifty eight years

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, *or* Private.
(7) Public, District, *or* Private.

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Helen Burns

18/10/51

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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 George M'Minn Clerk in Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Gray Lately Clerk in Liverpool Brother of Petitioner's 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 William Gray to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) George Macminn

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

DATED this 23rd (3) day of October one thousand eight hundred and 58

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 Gray
2. Sex and Age,	age 40
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Clerk
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Liverpool
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	a few days
9. Whether first Attack,	yes
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	Liverpool
12. Duration of existing Attack,	days
13. Supposed Cause,	—
14. Whether subject to Epilepsy,	Has had a convulsion
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,	Sarah M'Minn or Gray St Mary's Place Dumfries (Her wife)
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,* George Macminn

DATED this Twenty third day of October one thousand eight hundred and fifty Eight

* To be Signed by the Party applying.

Lindsey Board,—Dec.—57.—1210.

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 Tooth Graduate of the
being a (1) 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) Dumfries
in the County
separately from any other Medical Practitioner
visited and personally examined (4) William Gray Valley a Cl
and t
the said William Gray is a (5) person of
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) Two months ago
was under my care for an attack of Dementia and after
partial recovery became worse and is now incoherent and fur
says that he has died and come to life again

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
his brother in law tells me that he is an unc
God almighty and creator of all

(SIGNED) *Name and Medical Designation,* William Tooth M.D.

Place of Abode, Dumfries

DATED this 24 day of October One thousand ei
hundred and 58.

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, James Gilchrist M.D.
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) Southern
Counties Asylum Dumpries
Dumpries
in the County
separately from any other Medical Practitione
visited and personally examined (4) William Gray solicit
Valley residing in Liverpool
and th
the said William Gray is a (5) person o
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.:—

1. Facts indicating Insanity observed by myself: (6) Restlessness
excitement incoherence and delusio

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Said to have had convulsive attacks
by former Medical attendants (Dr Scott)

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D

Place of Abode, Crichton Royal Institution
Dumfries

DATED this twenty fourth day of October one thousand eigh
hundred and fifty eight

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in case 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 William Gray is a (1) a person of unsound mind hereby further certify that the Case of the said William Gray is One of Emergency, and I recommend the immediate removal of the said William Gray to an Asylum accordingly.

Name, William Scott M D

Place of Abode, Dumfries

DATED this 25th day of October one thousand eight hundred and 58

(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 Gilcrain Gillon (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me with a Petition at the instance of (3) George M'Ann, Clerk in Dumfries Certificates under the hands of William Scott 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) William Gray lately a Clerk in Liverpool and that the said William Gray 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 Gray as a Patient into the (6) Public Asylum of Southern Counties, Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Gray which accompanied the said Petition.

(SIGNED) J Thos D Gillon

DATED this twenty fifth day of October one thousand eight hundred and fifty eight years

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

K Mackenzie

(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.* 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* Wigtown *and his Substitutes.*

The Petition of Malcolm M'Farlane

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Struth.

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 Struth to the

and to sanction his admission into the said Asylum.

(SIGNED) Malcolm M'Farlane
Inspector of Poor Leswalt

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

DATED this Twentieth (*) day of October one thousand eight hundred and Fifty Eight 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,	Thomas Struth
2. Sex and Age,	About 29 Years of age
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Police Officer
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	For some time in Wigtown
7. Place where Found and Examined,	Knock Bridge Leswalt Parish
8. Length of time Insane,	About 2 Weeks
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	29 Years
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	About 14 days
13. Supposed Cause,	Had been drinking and was dismissed from his employment
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	Has attempted to drown himself
16. Whether Dangerous to others,	Threatens his Wife & Children
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	At present to Leswalt, but his settlement is understood to be Inverkeithny Parish
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,	His Wifes name is Jessy Bone. Patient has no Relations in Leswalt — none of his family are known 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,* M. M'Farlane
Inspector of Poor Leswalt

DATED this 20th day of October one thousand eight hundred and Fifty Eight 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.

(6) *State the facts.*

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

I, the undersigned, Robert Wilson
being a (1) 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) Knock in the Parish of Leswalt in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Thos Strath and that the said Thos Strath 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 appearance Manner & conversation

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

from the report of the wife & her Brother he has been very unruly and threaten to murder them

(Signed) Name and Medical Designation, Robert Wilson Surgeon

Place of Abode, Stranraer

Dated this Fourteenth day of October One thousand eight hundred and fifty Eight

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 Wallace
being a (1) Surgeon in Stranraer
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Knock in the parish of Leswalt in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Thomas Strath and that the said Thomas Strath 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)

Personal appearance and Conversation

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

that he is dangerous to his wife and has threatened him

(Signed) Name and Medical Designation, John Wallace Surgeon

Place of Abode Stranraer

Dated this fourteenth day of October one thousand eight hundred and fifty Eight

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 Bogue Advocate Sheriff Substitute (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Malcolm Wm. Farland Inspector of Poor Bawalt Certificates under the hands of Robert Wilson Surgeon Stranraer and John Wallace Surgeon 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) Thomas Struth, a pauper and that the said Thomas Struth is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE YOU to receive the said Thomas Struth as a Patient into the (6) Royal Crichton ~~Asylum of~~ Institution 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
which accompanied the said Petition.

(Signed) M. Rhind Bogue Sheriff Substitute

Dated this 22nd day of October one thousand eight hundred and fifty eight.

To the Superintendent of the (7) Royal Crichton ~~Asylum of~~ Institution 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, or Private.
(7) Public, District, or Private.

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Thomas Stratton

26/10/58

Dues of order 2/6

T. Lowman Pett

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 Davidson

Balgray Parkburn Lochmaben

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Catherine Johnston or Davidson 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 Johnston or Davidson to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) Thomas Davidson

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

DATED this twenty seventh (3) day of October one thousand eight hundred and fifty eight

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 Johnston or Davidson
2. Sex and Age,	Female age 47
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Farmers wife
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Balgray Lochmaben
7. Place where Found and Examined,	Lochmaben
8. Length of time Insane,	~~six months~~ Three years
9. Whether first Attack,	Third attack
10. Age (if known) on first Attack,	44
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
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,	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 Davidson husband Balgray Lochmaben
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 Davidson

DATED this twenty seventh day of October one thousand eight hundred and fifty eight

* 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.*

I, the undersigned, James Thomson Wilson being a (1) Licentiate of the Royal College of Surgeon of Edinburgh and being in actual practice as a (2) Surgeon Main Street Lockerbie 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,

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

visited and personally examined (4) Catherine Johnstone or Davidson Farmer's wife Balgray Lockerbie and not

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

the said Catherine Johnstone or Davidson 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) Morbid alteration in temper, opinions and conduct, so pronounced as to require previous admission into Institution; though slightly elevated she was dismissed; have recently and are daily becoming more so

(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,* Jas T Wilson Surgeon

Place of Abode, Lockerbie

DATED this 26th day of October One thousand eight hundred and Seventy eight

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.*

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) Scotstoun Cowden Aspinn Dumfries in the County of separately from any other Medical Practitioner,

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

visited and personally examined (4) Mrs Catherine Johnstone or Davidson Farmer's wife Balgray Lockerbie and not

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

the said Catherine Johnstone or Davidson 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 general excitement delusions as to property

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Disposition to wander from home and to give away money as stated by the husband

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Scotstoun Royal Postal Duty Stranraer

DATED this twenty second day of October one thousand eight hundred and Seventy Eight

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 Catherine Johnstone or Davidson is a (1) Person of unsound mind hereby further certify that the Case of the said Catherine Johnstone or Davidson is One of Emergency, and I recommend the immediate removal of the said Catherine Johnstone or Davidson to an Asylum accordingly.

Name, Jas Anderson Surgeon

Place of Abode, Lockerbie.

DATED this 26th day of October one thousand eight hundred and fifty eight

(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, Wm Peterkin Keller Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Thomas Davidson Baljray, Lochmabie Certificates under the hands of James Thomson Anderson 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) Catherine Johnstone or Davidson wife of Petitioner and that the said Catherine Johnstone 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 Catherine Johnstone or Davidson 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 Catherine Johnstone or Davidson which accompanied the said Petition.

(SIGNED) Wm P Keller

DATED this 28th day of November one thousand eight hundred and fifty eight

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.

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Catherine Johnston or Boyle
27/10/65

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

[FORM 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 James McIntyre 16 Belgrave Avenue Rathmines Dublin

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ann Amelia McIntyre at present a Patient in the Asylum of Farnham House Finglas Dublin 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 Ann Amelia McIntyre to the Asylum of Crichton Royal Institution at Dumfries. May it therefore please your Lordship to authorize the Transfer of the said Ann Amelia McIntyre ~~her~~ unto the Crichton Royal Institution and to sanction ~~his~~ admission into the said Asylum accordingly.

(SIGNED)* J McIntyre

Designation, Retd Adjutant Kilkenny Militia

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

DATED this 19th (3) day of October one thousand eight hundred and fifty eight

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 Amelia McIntyre
2. Sex and Age,	Female — Forty Seven
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	a Lady — no occupation
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Edinburgh
7. Place where Found and Examined,	Dublin
8. Length of time Insane,	From Eighteen hundred and fifty
9. Whether First Attack,	apparently first attack
10. Age (if known) on First Attack,	Forty nine years
11. When and where previously under Examination and Treatment,	At home in Edinburgh and for the last fifteen months at Dr Duncans private asylum Farnham House Finglas Dublin
12. Duration of Existing Attack,	continued from Eighteen hundred and fifty
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	Not
15. Whether Suicidal,	Not
16. Whether Dangerous to others,	Not
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 McIntyre 16 Belgrave Avenue Rathmines Dublin — Brother None
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,* J McIntyre

DATED this 19th day of October one thousand eight hundred and fifty eight

* 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.

I, the undersigned, John K. Barton, Graduate in Medicine
being a (1) Licentiate of the Royal College of Surgeons in Dublin
and being in actual practice as a (2) Physician and Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Farnham House Parish of Finglas
in the county of Dublin separately from any other
Medical Practitioner, personally examined (4) Miss Amelia Mc Intyre
and that the said Emelie Mc Intyre is a (5) 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) *Here state the facts.*

1. Facts indicating Insanity observed by myself: (6) Her looks — Her Conversation and deportment and the Stories related by her Sister related that a dead body was concealed in a piano. The whole manner was so translation is just

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

2. Facts indicating Insanity communicated to me by others: (7)
She imagines. Her Sister related this to me by Mr. Surgeon Smith of 6 Farnham House Finglas

(Signed) Name and Medical Designation, John K. Barton Physician and Surgeon

Place of Abode, 16 Upper Pembroke St. Dublin

Dated this 18th day of October One thousand eight hundred and Fifty Eight

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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.

I, the undersigned, Nugent B Duncan M.D. M
being a (1) Graduate in Medicine of Trinity College
& Fellow of the Royal College of Surgeons in
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Farnham
Finglas
in the county of Dublin separately from any other
Medical Practitioner, personally examined (4) Miss Amelia Mc In
a Lady at 16 Belgrave Square Rathmines Co Dublin
and that the said Amelia Mc Intyre 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) *Here state the facts.*

1. Facts indicating Insanity observed by myself: (6) her suspicion
every circumstance around her & even
=thing made of her — her unwillingness
=side & her generally perverted tone, manner
conduct

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

2. Facts indicating Insanity communicated to me by others: (7)
She drops & windrops several times.
believing she has received some pollution
as I have been informed by the Matron Mrs Kenedy

(Signed) Name and Medical Designation, Nugent B Duncan M.B. F.R.C.

Place of Abode, Farnham House F

Dated this 15 day of October One thousand eight hundred and fifty eight

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

I, Wm S. Potter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition for Transfer at the instance of (3) James McEntyre of 16 Belgrave Avenue Dublin Certificates under the hands of John M Barton and Augustus B. Duncan, 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 Amelia McEntyre, a Lunatic at present a patient in the Asylum of Farnham House, Finglas, Dublin and that the said Ann Amelia McEntyre is a (5) Lunatic and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE the Transfer of the said Ann Amelia McEntyre from the Asylum of Farnham House to the Asylum of Crichton Royal Institution and I authorize her Transmission to the Asylum of Crichton Institution accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Ann Amelia McEntyre which accompanied the said Petition.

(SIGNED) Wm S. Potter

DATED this Twenty Sixth day of October one thousand eight hundred and fifty eight

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

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Registrar General's Office

30/10/57

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 Wilson, Parent,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Wilson Whitehill 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 to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Wilson

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

DATED this 6th (3) day of November one thousand eight hundred and 58 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 Wilson
2. Sex and Age,	thirty nine years old .. male sex
3. Married, Single, or Widowed,	unmarried
4. Condition of Life, and previous Occupation (if any),	Captain of a vessel
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	as sailor had no abode but whitehill
7. Place where Found and Examined,	at whitehill
8. Length of time Insane,	six months
9. Whether first Attack,	first
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	at Liverpool when first attacked subsequently at home at whitehill
12. Duration of existing Attack,	
13. Supposed Cause,	supposed to be bad times with the shipping interest
14. Whether subject to Epilepsy,	never
15. Whether Suicidal,	never
16. Whether Dangerous to others,	never
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,	John Wilson his father - a sister has been wrong
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 Wilson

DATED this 6th day of November one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

London: Eyre and Spottiswoode, — 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, John Copland 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) Whitehill in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) William Wilson, a seaman residing at Whitehill and the said William 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) I found him wakeful tremulous, and with every sign of extreme debility. He seemed sunk in a profound melancholy. He imagines that he is deeply in debt and that he has done some thing very wrong that cannot be set right. All which with, I am told, are the creatures of his imagination.

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

(Signed) *Name and Medical Designation,* John Copland Physician

Place of Abode, Dalbeattie

Dated this 6 day of November One thousand eight hundred and fifty eight 58

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 Macknight being a (1) Doctor of Medicine Edinr. Bo[illegible] and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Whitehill in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) William Wilson, a man residing at Whitehill and the said William Wilson 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) That he has refused his evacuations in bed. That he imagines some one is coming to put him in prison. Having committed some grievous sin against God. Refusing food & will not speak.

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

That he does not think he is at home. Does not know where he is.

(Signed) *Name and Medical Designation,* Thomas Macknight M.D.

Place of Abode, Dalbeattie

Dated this 6th day of Nov[emb]r one thousand eight hundred and 58

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. Potter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Wilson residing in Annand Certificates under the hands of John Copland and Thomas Macknight, 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, a Seaman, Whitehill and that the said William Wilson is a (5) Lunatic & of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Wilson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Wilson which accompanied the said Petition.

(SIGNED) John P. Potter.

DATED this ninth day of November one thousand eight hundred and fifty eight.

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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William Wilson

10/10/85

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 Gideon Sandeman

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Letitia Catherine Sandeman at present a Patient in the Asylum of Morningside 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 Letitia C. Sandeman to the Asylum of Crichton Institution Dumfries. May it therefore please your Lordship to authorize the Transfer of the said Letitia Catherine Sandeman and to sanction her admission into the said Asylum accordingly.

(Signed)* W. Sandeman Brother

Designation, Gentleman

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

Dated this 25th (*) day of October one thousand eight hundred and fifty eight.

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,	Letitia Catherine Sandeman
2. Sex and Age,	Thirty four
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	a Lady
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Edin^{r}
7. Place where Found and Examined,	Edin^{r}.
8. Length of time Insane,	14 Years
9. Whether First Attack,	First
10. Age (if known) on First Attack,	14
11. When and where previously under Examination and Treatment,	Morningside & for a short time at St. Chapman's private Asylum Leith before going to Morningside
12. Duration of Existing Attack,	
13. Supposed Cause,	Family misfortunes
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. 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,	L. M. Sandeman Brother Eastfield Leith.
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,* W. Sandeman Brother

Dated this 25th day of October one thousand eight hundred and fifty eight.

* 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, Andrew H. Balfour
being a (1) Licentiate of the Royal College of Surgeons Ed
and being in actual practice as a (2) general practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Morningside
Royal Lunatic Asylum
in the county of Edinburgh separately from any other
Medical Practitioner, personally examined (4) Letitia C. Sandeman
and that the said L. C. Sandeman 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)

Fatuous.

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

Very unclean in her habits but was not so
W. Is occasionally excited but usually ta

(SIGNED) *Name and Medical Designation,* Andrew H. Balfour

Place of Abode, Brighton Place Portobello

DATED this 29th day of October One thousand eight
hundred and fifty eight

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, Thomas A. G. Balfour
being a (1) an M.D. of Edinburgh University
and being in actual practice as a (2) General practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Morningside
Royal Lunatic Asylum
in the county of Edinburgh separately from any other
Medical Practitioner, personally examined (4) Letitia C. Sandeman
and that the said Letitia C. Sandeman 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) Loss of Imag
Taciturnity

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

Has unclean habits - occasional excite

(SIGNED) *Name and Medical Designation,* Thomas A. G. Balfour

Place of Abode, 5 George Square

DATED this 29th day of October One thousand eight
hundred and fifty eight

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

I, Mr Duncan Trotter (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition for Transfer at the instance of (3)
Gordon Sandeman residing in Edinburgh
Certificates under the hands of Andrew H. Balfour
and Thomas A. G. Balfour, 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)
Letitia C. Sandeman at present
a patient in the Asylum of Morningside, Edinburgh
and that the said Letitia C. Sandeman 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 Letitia C. Sandeman from the Asylum of Morningside to the Asylum of Crichton Royal Institution and I authorize her Transmission to the Asylum of Crichton Royal Institution accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Letitia C. Sandeman which accompanied the said Petition.

(SIGNED) J. Mn. D. Trotter.

DATED this Third day of November one thousand eight hundred and fifty eight

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.

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 Duncan Malcolm Macfarlane Inspector of Poor, for the parish of Mochrum humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Narin, Pauper, Elrig, village, parish of Mochrum 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 Narin to the Southern Counties Asylum, Dumfries and to sanction her admission into the said Asylum.

(SIGNED) D. M. Macfarlane

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

DATED this First (3) day of November one thousand eight hundred and fifty eight

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 Narin
2. Sex and Age,	Female, 33 years.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Pauper, Going Errands
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Elrig Village.
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	Always of weak intellect
9. Whether first Attack,	
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	July 1858. Elrig Village.
12. Duration of existing Attack,	
13. Supposed Cause,	
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,	Mochrum Wigtown shire
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 Narin or McGurvah Mother
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	5, 8, 9, 12, 13, Always imbecile

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

(SIGNED)* *Name,* D. M. Macfarlane, Insp.r

DATED this First day of November one thousand eight hundred and fifty eight,

* 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, James Mc Cormick being a (1) Graduate of the Glasgow University and Magister chirurgiae and being in actual practice as a (2) hereby certify, on soul and conscience, that I have this day, at (3) Elrig Village in the Parish of Mochrum and in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Agnes Nairn a Pauper residing in Elrig Village aforesaid and that the said Agnes Nairn 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) 1st I have observed that she has a thorough want of a due train of thought.— 2nd I have witnessed her in many habits, and indeed I have observed that all the faculties of her mind are impaired.—

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) I learned from her neighbours that she has a great tendency to wander from home - and that in the spring she was lost for 13 weeks.— and that on her return she was very much neglected and incoherent in her speech

(Signed) Name and Medical Designation, James Mc Cormick M.D.

Place of Abode, Portwilliam, Wigtownshire

Dated this twenty-sixth day of October One thousand eight hundred and fifty-eight.—

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 of the University of Edinr and Licentiate of the College of Surgeons, 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) Elrig Village Parish of Mochrum Wigtown in the County of separately from any other Medical Practitioner, visited and personally examined (4) Agnes Nairn, a pauper residing in the said village and that the said Agnes Nairn 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) The mind is very much deranged, but not so far gone as to be incapable of entertaining delusions. She believes that she has been in America, Australia, Underground - that she has been married & has had children - that she wanders from home &c.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) She seems to have been congenitally defective in mind - was past old before she could either speak or walk. was early observed to be weak intelligent - was incapable of education or of being trained to useful employment. She is constantly quiet, but is passionate when provoked, & uses obscene language - would be dangerous if left to wander from home &c.

(Signed) Name and Medical Designation, D. White. M.D.

Place of Abode, Whithorn, Wigtownshire

Dated this first day of November one thousand eight hundred and fifty eight

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 Esq Advocate Sheriff Substitute (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Duncan Malcolm Macfarlane Inspector of Poor of the parish of Mochrum Certificates under the hands of James M'Cormick Surgeon Port William and Lindsay White M.D. Whithorn, 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 Nairn (pauper) and that the said
Agnes Nairn 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 Nairn as a Patient into the (6) Crichton Royal (~~Asylum of~~) Institution at 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
which accompanied the said Petition.

(SIGNED) M. Rhind

DATED this fourth day of November one thousand eight hundred and fifty eight

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

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Eliza Ann Adams
12/11/56

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 Edward Atchison residing at Merkland Cottages humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Atchison his 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 Helen Atchison to the Southern Counties asylum and to sanction his admission into the said Asylum.

(SIGNED) Edward Atchison

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

DATED this 5th (3) day of November one thousand eight hundred and fifty eight

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 Atchison
2. Sex and Age,	Thirty one
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Carpetteer
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Several Years in the Asylum at Musselburgh
7. Place where Found and Examined,	Lord Hillwood
8. Length of time Insane,	8½ years
9. Whether first Attack,	No
10. Age (if known) on first Attack,	Continuous More or less
11. When and where previously under Examination and Treatment,	Musselburgh
12. Duration of existing Attack,	—
13. Supposed Cause,	Disappointed in expectation of Marriage
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 chargeable to any Parish
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,	Edward Atchison, Merkland Cottages — Father — no other Member of 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,* Edward Atchison

DATED this 5th day of November one thousand eight hundred and fifty Eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1200.

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, Amos Macaulay M.D.
being a (1) M. R. C. S. Edinb
and being in actual practice as a (2) Surgeon Lanark
hereby certify, on soul and conscience, that I have this day, at (3) in the Parish of Canonbie in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Helen Aitchison and at the said Helen Aitchison is a (5) proper 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) Vague general appearance; Great restlessness & excitement

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Information derived from Relatives who constantly in company with the patient from her landlady Mrs. Carruthers

(SIGNED) *Name and Medical Designation,* Amos Macaulay

Place of Abode, Eskdale, Canonbie

DATED this 2nd day of November One thousand eight hundred and Sixty Eight

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, William Johnston Carlyle M.D. Ed
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) Todshillwood in the Parish of Canonbie in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Todshillwood Helen Aitchison and at the said Helen Aitchison 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) From the conversation I have had with Her Physician that Her Intellect is deranged at present. There is considerable excitement & restlessness in her manner & appearance & she is not capable of leaving the house and managing herself to a considerable distance without having any person near her. She is quite unable to look after herself.

2. Other facts (if any) indicating Insanity communicated to me by others. (7) The above mentioned facts have also been communicated to me by Mrs Carruthers (who has at present the charge of Helen Aitchison) as well as by her father

(SIGNED) *Name and Medical Designation,* W. J. Carlyle M.D. & Surg.

Place of Abode, Langholm

DATED this 2nd day of November one thousand eight hundred and Sixty Eight

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, Mr Ritchie Trotter Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Board Aitchison residing at Mouthanter Estate
Certificates under the hands of Angus Macaulay
and William Mustard 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) Helen Aitchison residing at Mouthanter and that the said Helen Aitchison is a (5) Lunatic & unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Helen Aitchison as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Helen Aitchison which accompanied the said Petition.

(SIGNED) J Ritchie Trotter

DATED this Twelfth day of November one thousand eight hundred and Fifty eight.

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.

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CRICHTON ROYAL INSTITUTION,

Paupers Department.

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 Terreglos.
P. Duncan, Esq. of Cargen.
Thomas Steuart 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., } Treasurers.
S. Adamson, Esq., }

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.	Helen Aitcheson - age 31 - Dress Maker education moderate - quiet —
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	Disappointed in Marriage about 8 years ago
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.?	No.
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.
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?	She frequently runs out of the house half dressed across the Country without object great restlessness and a disposition to run away — Nothing unusual
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.	Natural — Great irregularities in the Menstrual discharge
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?	First attack. She suddenly ran away No. From her employment in Hamilton with the hills and was lost for a week
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?	She has delusions as to wealth desires her father to set a carriage that she may ride about with her. Restless at night as well as during the day
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	No
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thought excited by any particular subject or event?	No.
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 prominent propensity, or tendency to crime?	No.
12. What treatment has been resorted to, for what length of time, and with what success?	Nil Known
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	8 1/2 years — In no Asylum at Montrose

about 8 years — which she left at last Wednesday.

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 John Muir Inspector of Poor Parish of Kells humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Hetherington Gamekeeper 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 Hetherington to the Crichton Lunatic asylum and to sanction his admission into the said Asylum.

(SIGNED) John Muir
Inspector of Poor Kells

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

DATED this 13th (*) day of November One thousand eight hundred and fifty eight

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 Hetherington
2. Sex and Age,	male aged 32
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	Gamekeeper
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Curate & Dumfries
7. Place where Found and Examined,	Barcock
8. Length of time Insane,	about 6 months since first symp. in. of first attack
9. Whether first attack,	Second first attack
10. Age (if known) on first Attack,	32
11. When and where previously under Examination and Treatment,	By medical man in his own house
12. Duration of existing Attack,	about a week
13. Supposed Cause,	none known
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	In first attack no
16. Whether Dangerous to others,	no
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	supposed to be Kells 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,	a Brother in Melbourne Australia of [illegible] name of Nathan who has also been attacked with 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.

(SIGNED)* Name, John Muir

DATED this 13th day of November One thousand eight hundred and fifty eight

* 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, Alfred McKinley Millman being a (1) Member of the Royal College of Surgeons of England or London and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Garnock in the parish of Kilbirnie, ~~county of~~ in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) John Hetherington, James Keiper to Mr McConnell, residing at Gatehead and that the said John Hetherington 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 attempted suicide by cutting his throat. Has been suffering since from Religious Melancholia considering his case is bad, and there is no hope of his recovery. At present is morose and taciturn, refusing to speak to any one.

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

His wife reports him to have been subject to depressed spirits for a considerable time; his wife and James Keiper informed me a few days since, that they feared he would cut his throat.

(SIGNED) Name and Medical Designation, Alfred McKinley Millman Surgeon R.N.R.

Place of Abode, Near Galloway.

DATED this 13th day of November One thousand eight hundred and fifty eight 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, Andrew Jackson Surgeon 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) Garnock in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) John Hetherington Sunkeeper Garnock and that the said John Hetherington 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)

Will not answer any Questions, but sits a wild, rather Insane look.

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

His wife states that he has for some time been low in Spirits, & fancies that his food is lost.

(SIGNED) Name and Medical Designation, Andrew Jackson R.N.

Place of Abode, Galston

DATED this 13th day of November One thousand eight hundred and Fifty Eight 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 John Hetherington is a (1) Lunatic hereby further certify that the Case of the said John Hetherington is One of Emergency, and I recommend the immediate removal of the said John Hetherington to an Asylum accordingly.

Name, Alfred McKinley Millman M.R.C.V.S.

Place of Abode, New Galloway

DATED this 13th day of November One thousand eight hundred and fifty-eight 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 Gilmour Rotter (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Muir Inspector of Poor Kells Certificates under the hands of Alfred McKinley Millman and Andrew Jackson, 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 Hetherington a Pauper and that the said John Hetherington is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Hetherington 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 Hetherington which accompanied the said Petition.

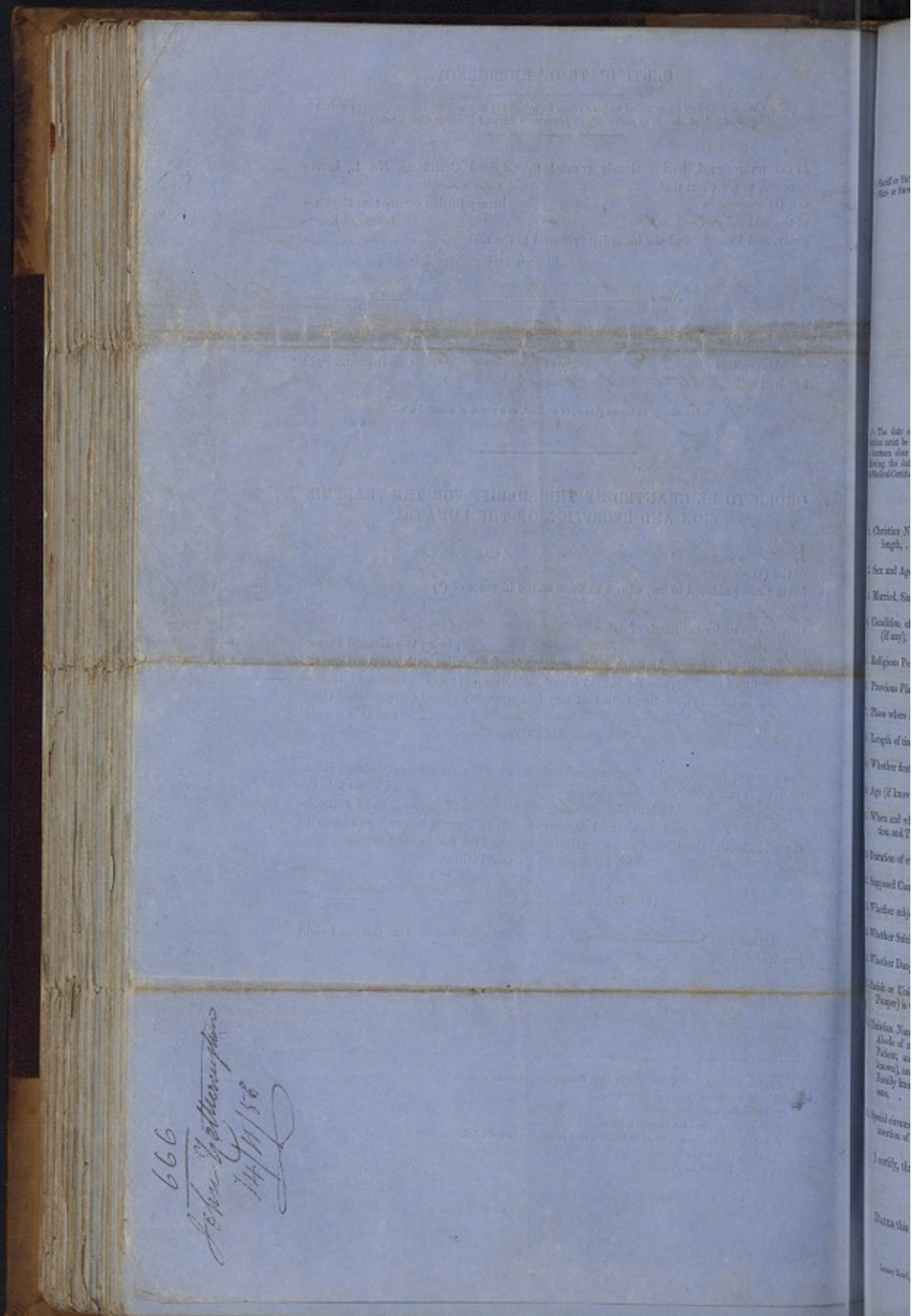
(SIGNED) John P. Rotter

DATED this ~~Fifteenth~~ 15th day of November One thousand eight hundred and fifty eight years

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.



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 Dumbries *and his Substitutes,*—

The Petition of John Murray Hastings Manufacturer in Birmingham humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Mary Murray or Hastings residing in Dumbries Relict of the late Robert Hastings residing at Dumbries 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 Murray or Hastings to the Southern Counties Asylum Dumbries and to sanction her admission into the said Asylum.

(SIGNED) John M. Hastings

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

DATED this Sixteenth (3) day of November one thousand eight hundred and fifty eight.

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 Mary Murray or Hastings
2. Sex and Age,	Female – Sixty Six next Birthday.
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Annuitant
5. Religious Persuasion, so far as known,	Presbyterian (Free Church)
6. Previous Place of Abode,	Dumbries for 13 years
7. Place where Found and Examined,	Dumbries 57. High Street
8. Length of time Insane,	Three Weeks
9. Whether first Attack,	First Attack
10. Age (if known) on first Attack,	Answered in Query two.
11. When and where previously under Examination and Treatment,	at 57 High Street in October or Nov 1858.
12. Duration of existing Attack,	For the last Three Weeks
13. Supposed Cause,	Misfortunes in business of a Relative
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. 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,	Nearest Relative. John Murray Hastings. Manufacturer in Birmingham her only surviving Child. Some Relatives of the Patient have been 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 M. Hastings

DATED this Sixteenth day of November one thousand eight hundred and fifty eight.

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1260.

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 Gilchrist 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) 57 High Street Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mrs Mary Murray or Hastings Widow residing at 57 High Street and the said Mrs Mary Murray or Hastings 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 mental depression fear and incoherence

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Labours under delusions as to property and personal character as stated by her attendant

(SIGNED) *Name and Medical Designation,* James Gilchrist MD

Place of Abode, Creighton Royal Institution Dumfries

DATED this sixteenth day of November One thousand eight hundred and fifty eight.

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 Mercer Adam. M.D. being a (1) Graduate of the University of Edinburgh, and Member 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) 57 High Str Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mrs Mary Murray or Hastings Widow residing at 57 High Street. Dumfries and the said Mrs Mary Murray or Hastings 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). Great excitability alternating with great mental depression. (b). Delusions of various kinds (1) fancies her annuity has become exhausted; (2) that she has been a person of bad conduct; (3) That absent friends appear to her and converse with her by night. (c) Melancholia – fancies she is a lost sinner &c She has had a presentiment of death

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Sleeps very little – Appetite capricious – sometimes refuses food at other times eats voraciously.

(SIGNED) *Name and Medical Designation,* A Mercer Adam M

Place of Abode, 72 Buccleuch Street. Dum

DATED this sixteenth day of November one thousand eight hundred and fifty eight.

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 D. Cowan Trotter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Mrs Murray Hastings manufacturer Birmingham Certificates under the hands of James Gilchrist and Andrew Mercer Adam, 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 Mary Murray or Hastings residing in Dumfries and that the said Mrs Mary Murray or Hastings 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 Mary Murray or Hastings 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 Mrs Mary Murray or Hastings which accompanied the said Petition.

(SIGNED) John D. Trotter

DATED this Seventeenth day of November one thousand eight hundred and fifty Eight

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.

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Miss Murray of Hastings

12/11/67

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 Matthew Septimus Finch Esqr Solicitor Wigan Lancashire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Finch his 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 Finch Dumfries to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Matthew Septimus Finch

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

DATED this Fourteenth (*) day of November one thousand eight hundred and Fifty eight

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 Finch
2. Sex and Age,	Male, 28 years of age last 4th of September
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Chemist and Druggist
5. Religious Persuasion, so far as known,	Church of England
6. Previous Place of Abode,	Wigan, Lancashire
7. Place where Found and Examined,	do. do.
8. Length of time Insane,	Uncertain, but supposed about four years.
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	Uncertain about 24 years
11. When and where previously under Examination and Treatment,	Not been under previous examination and treatment
12. Duration of existing Attack,	Uncertain
13. Supposed Cause, ~~Frightending in~~ Epilepsy, afterwards intoxicating liquors	
14. Whether subject to Epilepsy,	Yes
15. Whether Suicidal,	He has threatened but we have no reason to suppose he has ever attempted it.
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	She is not a pauper
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,	He has several brothers and sisters and Uncles. His eldest Brother named is Gerard Brown Finch. His Uncle Matthew Septimus Finch is an Inmate under the Care of William Finch's Father. No other members of the Family 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,* Matthew Septimus Finch

DATED this 22nd day of November one thousand eight hundred and 58

* 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, John Latham, Surgeon, being a (1) Member of the London Royal College of Surgeons, & Licentiate of the London Society of Apothecaries and being in actual practice as a (2) Surgeon, in Wigan, hereby certify, on soul and conscience, that I have this day, at (3) No. 33, Millgate, Wigan, in the County of Lancaster separately from any other Medical Practitioner visited and personally examined (4) Mr. Wm. Finch, Draper, formerly of 33 Chapel Street, Wigan, Lancashire, and the said Mr. William Finch 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) Want of control in his sensations & in his imagination, & with an irritable & highly disordered state of the nervous system.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Imaginary injuries inflicted by & upon some of his friends & worthy & worthy citizens.

(SIGNED) *Name and Medical Designation,* John Latham

Place of Abode, Millgate, Wigan

DATED this 20th day of Nov. One thousand eight hundred and 58.

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 Mahrid 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) Mr William Finch formerly resident at 33 Chapel Street Wigan Lancashire and the said Mr William Finch 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) Patient is very restless and depressed has a great facility - answers questions doubtfully & if speaks to Colonel himself has suspicions of the intentions of his relations towards him

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Total unsuitableness for work - occasionally has a strong desire for stimulants and drinks intemperately

(SIGNED) *Name and Medical Designation,* James Mahrid M.D.

Place of Abode, Crichton Royal Institution Dumfries

DATED this twenty fourth day of November one thousand eight hundred and fifty eight

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 Blewitt Potter (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Matthew Holmes Finch, Keeper Fitz House, Wigan Lancashire Certificates under the hands of John Pelham and Innes Gelchrist, 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 Finch Druggist, Wigan, Lancashire and that the said William Finch 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 Finch as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Finch which accompanied the said Petition.

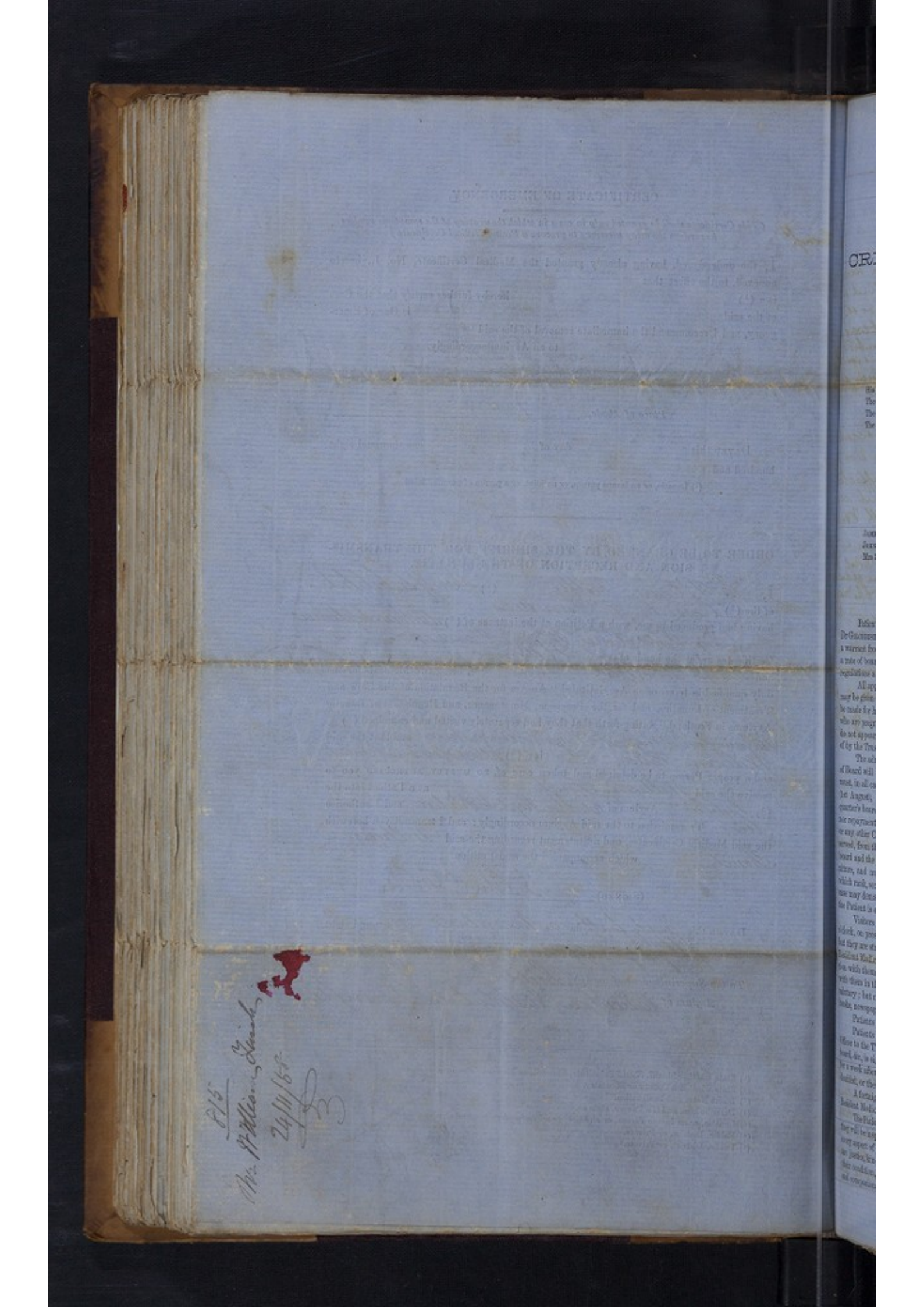
(Signed) John B. Potter

Dated this twenty fourth day of November one thousand eight hundred and fifty eight years

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.



CRICHTON ROYAL INSTITUTION,

Private Department.

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.
John Dickson, M.D., Medical Assistant.
Mrs Sottley, Matron.
And. Henderson, House Steward.
Mrs Ramsay, Superintendent.

R. Adamson, Esq.,
S. Adamson, Esq., } Treasurers.

Rev. G. Cowans, Chaplain.

Patients will be received on the presentation, previous to admission, to the Resident Medical Officer, Dr Gilchrist, of an application from the nearest of kin, the guardians, or local authorities; certificates of lunacy; and a warrant from the Sheriff, as required by law; also an obligation from some respectable party or parties to pay such a rate of board as may be determined upon, according to the Rules of the Institution, and to comply with all rules and regulations as to clothing, removal, and burial. These documents are annexed.

All applications for admission should be forwarded at least three days before the arrival of the Patient, that time may be given for correspondence as to whether a vacancy exists, the rate of board, &c., and that due preparation may be made for his or her reception. Patients will be admitted between 8 A.M. and 8 P.M. upon every lawful day. Patients who are pregnant, moribund, or affected with fever, contagious or incurable diseases, cannot be received; and such as do not appear to be proper objects, may be discharged on the recommendation of the Medical Officer, being approved of by the Trustees, timely notice being given to the friends or guardians.

The admissibility of Patients will be determined upon by the Medical Officer; and in the first instance the rate of Board will be fixed by him, subject, however, to be confirmed or modified by the Trustees and Directors. 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 Officer on admission or discharge, or at any other time, or upon any pretext whatever. It will be observed, from the Table annexed, that a difference will be made in the following particulars, according to the rate of board and the circumstances and conditions under which the individual is admitted, viz., in the situation, size, furniture, and number of apartments; in the diet; in the proportion of the attendants; and in the various luxuries which rank, sex, habit, or the state of the disease, may render necessary. At the same time, whenever the nature of the case may demand greater accommodation, the special services of an attendant, or a more expensive style of living than the Patient is entitled to, they will be granted.

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; but 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 the presence of the Resident Medical Officer or Matron, 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 must be supplied with clothes by their friends or guardians.

Patients when recovered, or found to be unfit, 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 individual; 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 will be doubled, or the Patient sent to his or her friends or guardians at their expense.

A fortnight's notice of the intention of friends or guardians to remove the Patient must be forwarded to the Resident Medical Officer.

The Patients will be visited by the Resident Medical Officer and Matron always once or twice a-day, and in general they will be inspected by these or other officers much more frequently, under every variety of circumstances, and under every aspect of the malady. 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.	William Finch 30 years of age, Chemist and Druggist of a mild and good natured disposition, good educa...
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	Excited & irritable state of the nervous system — Shock in the first ... individual committing suicide ... had sold. He saw the person & was ... Epileptic kind & has been troubled ... irritable state of the nervous system ... ever since. This has been ... by the use of intoxicating drinks ...
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.?	No —
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?	He has had Epileptic fits occasion... but not often. I think only 2 or ... Five years ago he was affected ... irregular action of the heart ... with Hypertrophy of the Left Ven...
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?	Want of stability of conduct ... At times his case resembles ... in religious mania. That is fine ... seems to have no settled purpose & the ...
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.	The appetite & digestion are good, he ... eat very sluggishly, the respiration is ... the heart is disordered as stated ...
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?	This is a continuous attack ... on the shock to his nervous system ... stated above when he had his first ...
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?	He very often speaks of the disgrace that he has brought upon his relations and the contempt that he has ... the means of bringing upon them. He ... He wishes to be alone. He has no ...
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	He once swallowed some Arsenic ... for me & told me he had taken it ... a mistake for starch —
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thoughts excited by any particular subject or event?	He does not cherish any malicious design. ... do not know whether the morbid train of thoughts ... excited by any particular subject or event.
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 prominent propensity, or tendency to crime?	No
12. What treatment has been resorted to, for what length of time, and with what success?	He has not for a long time ... subjected to any medical treatment ... to his peculiarities & eccentricities ...
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	He may be said to have been of ... mind 4 or 5 years but has not ... in any public or private house ...

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 Agnes Hope residing at Lowthertown Dornock humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Hope, residing there her 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 Mary Hope to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(Signed) A Hope

(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 November one thousand eight hundred and fifty Eight

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 Hope
2. Sex and Age,	female – 34 years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Weaver
5. Religious Persuasion, so far as known,	W. Presbyterian
6. Previous Place of Abode,	Southerton
7. Place where Found and Examined,	Lowtherton
8. Length of time Insane,	upwards of three 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,	three weeks
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	no
16. Whether Dangerous to others,	doubtful
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dornock
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 Hope Lowthertown her mother, no other member of family has 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, A Hope

Dated this twenty first day of November one thousand eight hundred and fifty Eight

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1260.

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 Williamson being a (1) Licentiate of the Royal Co of Surgeons of Edinr and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Southfi in the Parish of Dornock in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mary Hope residing at Lowthertown and that the said Mary Hope 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) delusions about property she fancies she has been deprived of, religious delusions, and violent resistance to medical assistance

2. Other facts (if any) indicating Insanity communicated to me by others: (7) I have been told by Mr Purdie that several of the neighbours have had to put with personal violence & ill usage during her illness

(SIGNED) *Name and Medical Designation,* Thomas Williamson

Place of Abode, Church St Annan

DATED this twenty first day of November One thousand eight hundred and fifty eight

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 Edward being a (1) Licentiate of the Royal College of Surgeons in Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Lowthertown in the Parish of Dornock in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mary Hope residing at Lowthertown and that the said Mary Hope 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 general appearance, and unconnected sayings and property and religious.

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Her mother says she has been most of her life of an irritable and nervous habit.

(SIGNED) *Name and Medical Designation,* William Edward Surgeon

Place of Abode, Edward Street Annan

DATED this twenty first day of November one thousand eight hundred and fifty eight

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 Hope is a (1) Lunatic hereby further certify that the Case of the said Mary Hope is One of Emergency, and I recommend the immediate removal of the said Mary Hope to an Asylum accordingly.

Name, Thomas Williamson Surgeon

Place of Abode, Church Street Annan

DATED this twenty first day of November one thousand eight hundred and fifty eight

(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 Littlejohn Gaoler (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Agnes Hope residing at Lowtherhouse Dornock Certificates under the hands of Thomas Williamson and William Ewart, 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 Hope residing at Lowtherhouse and that the said Mary Hope is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Hope as a Patient into the (6) Public Asylum of Southern Counties and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Hope which accompanied the said Petition.

(SIGNED) John Littlejohn

DATED this twenty second day of November one thousand eight hundred and fifty eight years

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.

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Mary Hope

24/12/58

3

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~~ Kircudbright and his Substitutes,—

The Petition of Thomas Kennedy Inspector of Poor Stonykirk Wigtownshire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Dickson within designed 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 Dickson to the Crichton Royal Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Thomas Kennedy

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

DATED this twenty fourth (3) day of November one thousand eight hundred and fifty eight

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 Dickson
Sex and Age,	male . about 27
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	a Labourer
Religious Persuasion, so far as known,	Roman Catholic
Previous Place of Abode,	Stony Kirk
Place where Found and Examined,	Glasgow Royal Infirmary
Length of time Insane,	Since May last
Whether first Attack,	no
Age (if known) on first Attack,	not known
When and where previously under Examination and Treatment,	at Stonykirk in May last about a fortnight
Duration of existing Attack,	— not known
Supposed Cause,	Is subject to Epilepsy
Whether subject to Epilepsy,	not known
Whether Suicidal,	decidedly
Whether Dangerous to others,	In the first instance chargeable to Stonykirk
Parish or Union to which the Lunatic (if a Pauper) is 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,	Ann Carruthers or Dickson, Stony-Kirk the mother — 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.

(SIGNED)* Name, Thomas Kennedy

DATED this 24th day of Nov. one thousand eight hundred and fifty eight

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1000.

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 McGhie M.D. Glasgow
being a (1) Fellow of the Faculty of Physicians & Surgeons 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 Glasgow Royal Infirmary Lanark in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (4) James Dickson of the Lanark Poorhouse, a pauper and the said James Dickson 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) While in the house many attacks of Epilepsy he imagines that the men are speaking about him and threatening him and uses threatening and bad language and is highly dangerous. There is also manifest decay of his mental faculties

(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 prison and confined on two occasions on account of violence after fits of Epilepsy. Communicated to me by Thomas Kennedy

(SIGNED) *Name and Medical Designation,* James McGhie M.D. and F.F.P.S.G.

Place of Abode, Royal Infirmary Lanark

DATED this 24th day of November One thousand eight hundred and fifty eight

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 Robertson M.R. Glasgow
being a (1) Physician 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) the Glasgow Royal Infirmary Lanark in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (4) James Dickson, of the Lunatic Asylum of Stonyhirst, a pauper and the said James Dickson 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 confused mentally cannot remember what I was talking to him a minute ago thinks that his body sometimes rises from seat into the air does not know whether or not he was in this house half an hour since Medical Officer

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Wm Patrick the nurse of the ward informs that the boy and the patients are talking about him and threatening to knock them down

(SIGNED) *Name and Medical Designation,* Alexander Robertson M.R. Glasgow

Place of Abode Towns Hospital, Glasgow

DATED this 24th day of November one thousand eight hundred and 58

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 Pilcayrn Potter (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me with a Petition at the instance of (3) Thomas Kennedy
Inspector of Poor, Stoneyburn, Wiglownshire
Certificates under the hands of James McGhee
and Alexander Robertson, 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 Dickson, Labourer, Stoneyburn and that the said
James Dickson is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Dickson as a Patient into the (6) Public Asylum of Crichton 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 James Dickson which accompanied the said Petition.

(SIGNED) John P Potter

DATED this twenty-ninth day of November one thousand eight hundred and fifty-eight years.

To the Superintendent of the (7) Public
Asylum of Crichton Royal 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.

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James Dickson

25/12/58

20 & 21 *Vict., Cap.* 71, *Sect.* 54.

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 Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Betty Bell residing at the 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 Betty Bell to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John Dinwoodie, Inspector

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

DATED this Second (3) day of December one thousand eight hundred and Fifty Eight

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,	Betty Bell
2. Sex and Age,	Female – 65 years
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Charwoman
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	Do
8. Length of time Insane,	About two Months since a difference was observed
9. Whether first Attack,	Third Attack
10. Age (if known) on first Attack,	Not Known
11. When and where previously under Examination and Treatment,	Dumfries & Southern Counties Asylum
12. Duration of existing Attack,	About two 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,	Dumfries
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,	No –
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	can not be ascertained

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

(SIGNED)* *Name*, John Dinwoodie Inspector

DATED this Second day of December one thousand eight hundred and Fifty Eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1500.

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 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 Poor House in Dumfries in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Betty Bell and the said Betty 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Has not been in the habit of attending Church for the last two years. She has been twice in the Asylum — She states her feelings are the same as formerly — the fancies the bad are following her — and that an enemy is constantly with her — Has almost total want of sleep during night —

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) (Charlotte Douglas residing in the same ward with Betty Bell) says that she holds conversation with imaginary people stands by the side of the bed &c.

(SIGNED) *Name and Medical Designation,* William Scott M.D.

Place of Abode, Dumfries

DATED this 16 day of December One thousand hundred and 58

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 Marshall being a (1) Graduate of the Faculty of Physicians & Surgeons 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) the Poor House in Dumfries in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Betty Bell and the said Betty Bell 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 seems to be melancholic within a short time back She has the same symptoms as on former occasions before when confined in the Asylum She is talkative, conversation with the Chaplain &c.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Much the same as above

(SIGNED) *Name and Medical Designation,* William Marshall

Place of Abode, Buccleuch Street Dumfries

DATED this 17th day of December one thousand hundred and fifty eight 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, John Peterkin Potter (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 Wigham 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)
Betty Bell residing at the Hospital Dumfries and that the said
Betty 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 Betty Bell as a Patient into the
(6) Public Asylum of Southern Counties 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 Betty
Bell which accompanied the said Petition.

(SIGNED) John P Potter

DATED this Second day of December one thousand eight hundred and fifty eight years

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.

6 90

Betty Bell

3/12/58

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 Robt Garmory Insp^r. of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Beck—Kelhead 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 Beck to the Crichton Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Robt Garmory Insp^r

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

DATED this third (3) day of December, one thousand eight hundred and fifty eight.

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 Beck
Sex and Age,	Man—aged 35
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Travelling Merchant in England for about seven years
Religious Persuasion, so far as known,	Reformed Presbyterian Church
Previous Place of Abode,	Sandy Knowe Toll House
Place where Found and Examined,	Kelhead Toll House
Length of time Insane,	Nearly two years
Whether first Attack,	No
Age (if known) on first Attack,	33 years
When and where previously under Examination and Treatment,	Sandy Knowe
Duration of existing Attack,	Never fairly free these 2 years
Supposed Cause,	Not known
Whether subject to Epilepsy,	No
Whether Suicidal,	No Symtoms observed
Whether Dangerous to others,	Doubtfull but subject to violent Impulses
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Born in parish of Keir. Mother Tollbarr
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 Beck Kelhead Toll Bar Father
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,* Robt Garmory

DATED this third day of Dec^r one thousand eight hundred and fifty eight

* 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, Agnew Black Reid, Annan,
being a (1) Member of the Royal College of Physicians Edin
and being in actual practice as a (2) General Practitioner of Physic
hereby certify, on soul and conscience, that I have this day, at (3) Kelhead Fo
in the Parish of Cummertrees, in the County
of Dumfries, separately from any other Medical Practitione
visited and personally examined (4) James Beck at Kelhead
Toll Bar, parish of Cummertrees, Pauper, and t
the said James Beck, Pauper, is a (5) lunatic
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 under the De
that his food is poisoned that he is the object of perse
attributes his ailments to the effects of Freemasonry & Medi
medicine upon him against his will. Morbid state of
mind unquestion

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
frequently threatens violence; wanders
at late hours. Reputed Drunk & othe

(Signed) *Name and Medical Designation,* Agnew A. Reid, M.

Place of Abode, Kirk Brae Annan

Dated this Second day of December One thousand ei
hundred and fifty eight.

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 Everett
being a (1) Licentiate of the Royal College of Surgeons Edi
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Kelhead Toll
Parish of Cummertrees in the County
of Dumfries separately from any other Medical Practitione
visited and personally examined (4) James Beck, at Kelhead
Toll Bar, parish of Cummertrees, Pauper, and th
the said James Beck, Pauper, is a (5) Lunatic
person 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) Has the Delusion
that his Food is poisoned, and that he is persecu
by that he has been medicined against his
and the Mental Functions generally much
impaired. His General excited appearance -

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
His Father says he threatens violence, his
parents are unable to keep him at home
and he wanders away with any one that pass

(Signed) *Name and Medical Designation,* William Everett, Surgeon

Place of Abode Edward Street Annan

Dated this Second day of December one thousand ei
hundred and fifty eight

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, Mr Peter Trotter Esqr (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Robert Lennox
Inspector of Poor Cummertrees
Certificates under the hands of Agnew Black Boyle
and William Ewart, 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 Beck of Nethanock a pauper and that the said
James Beck is a (5) Insane person
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Beck 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 James Beck which accompanied the said Petition.

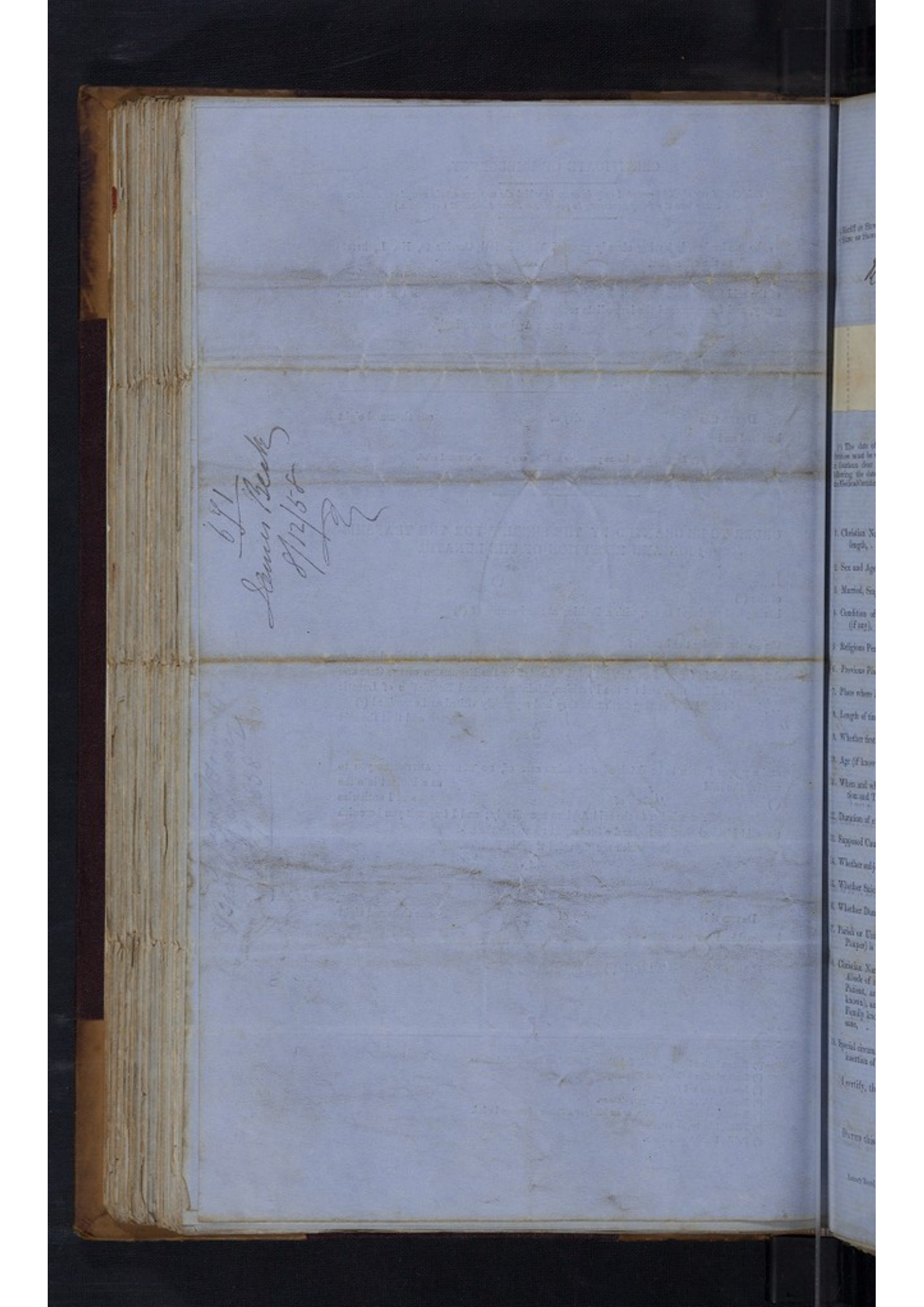
(SIGNED) John P Trotter.

DATED this Sixth day of December one thousand eight hundred and fifty eight

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.



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 Ponsonby Hill Brigg Cumberland humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that his Brother Isaac Ponsonby 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 Ponsonby to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) John Ponsonby

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

DATED this 30th (3) day of November one thousand eight hundred and fifty eight

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 Ponsonby
2. Sex and Age,	Male 52
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Yeoman
5. Religious Persuasion, so far as known,	Church
6. Previous Place of Abode,	Hill & Holm Rook Brigg Cumberland
7. Place where Found and Examined,	At home
8. Length of time Insane,	five months
9. Whether first Attack,	yes
10. Age (if known) on first Attack,	51
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	5 months
13. Supposed Cause,	Loss of occupation & Interference
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Doubtful - Dangerous
16. Whether Dangerous to others,	Doubtful
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not 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,	John Ponsonby Hill Brigg Brother — None afflicted
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 Ponsonby

DATED this 30th day of November one thousand eight hundred and fifty eight

* 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, John Dixon Fidler Asst Surgn and Surgn
being a (1) ~~X~~ Doctor of Medicine
M.R.C.S. London & Lat. C. London
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Mill
in the parish of Dryg in the County of
Cumberland
separately from any other Medical Practitioner visited and personally examined (4) Isaac Ponsonby
of the Mill Dryg and that
the said Isaac Ponsonby 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) wild, rambling
and incoherent talk. with expressions
fear from imaginary causes

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
same as above with the expression
of fear lest he should do himself
some mischief

(Signed) *Name and Medical Designation,* John Dixon Fidler M.D. &c

Place of Abode, Whitehaven, Cumberland

Dated this thirtieth day of November One thousand eight
hundred and fifty eight

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 Churchill
being a (1) Member of the College of Surgeons for
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the Mill
in the parish of Dryg in the County of
Cumberland
separately from any other Medical Practitioner visited and personally examined (4) ~~the said~~ Isaac Ponsonby
a gentleman residing at the Mill Dryg and that
the said Isaac Ponsonby 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) ~~and from~~
the general incoherence — ground
from occasional dislike to relatives, &
rambling conversation —

2. Other facts (if any) indicating Insanity communicated to me by others. (7) ~~X~~
Immediate relatives & attendants.
been told by the Patient he must destroy himself
Wife a Brother, Sister & a neighbour —

(Signed) *Name and Medical Designation,* John Churchill
for

Place of Abode, Gosforth — Cumberland

Dated this 30th day of November one thousand eight
hundred and fifty eight —

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, Mr Pitcairn Trotter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Mr Ponsonby, Hill Dress Cumbernauld Certificates under the hands of Mr Dixon M.D. & Surgeon and Mr Churchill 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) Isaac Ponsonby of the Hill, Dress Cumberland and that the said Isaac Ponsonby 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 Isaac Ponsonby as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Isaac Ponsonby which accompanied the said Petition.

(SIGNED) I. Pitcairn Trotter.

DATED this Sixth day of December one thousand eight hundred and fifty Eight

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.

8/1

Mr. Isaac Greenleaf

8/12/58

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 Robert Welsh Inspector of Poor Wamphray

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Dickman or King, 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 Isabella Dickman or King to the Southern Counties asylum and to sanction his admission into the said Asylum.

(SIGNED) Robert Welsh Insp. for Wamphray

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

DATED this Twelfth (3) day of December one thousand eight hundred and Fifty Eight 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,	Isabella Dickman or King
2. Sex and Age,	Female 38
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Penpont
7. Place where Found and Examined,	Penpont
8. Length of time Insane,	Six weeks
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	38 years
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	
13. Supposed Cause,	Thought Love Neglected & Desertion of Her Husband
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries Stewartry of Kirkcudbright
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,	Not known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Not living Resident in the District information cannot be obtained

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

(SIGNED)* *Name,* Robert Welsh Insp. for Wamphray

DATED this Tenth day of December one thousand eight hundred and Fifty eight.

* 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, Alexander Kirkhead M. D.
being a (1) Graduate 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) Whitwell
in the Kirkandbright separately from any other Medical Practitioner,
visited and personally examined (4) Isabella McLennan or King
a pauper from Young Sterlingshire and
the said Isabella McLennan or King 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 dejected
in Spirits, unwilling to answer questions
and peculiar in her deportment

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Mrs Welsh the proprietor of Newlaw where she formerly
resided has been under restraint for a month
(SIGNED) *Name and Medical Designation,* Alex Kirkhead

Place of Abode, Whitwell

DATED this 6th day of December One thousand eight
hundred and fifty eight

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 Chisholm 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) Maxwell
Kirkandbright in the County
separately from any other Medical Practitioner,
visited and personally examined (4) Isabella Dickman or King
a pauper from Young Sterlingshire and
the said Isabella Dickman or King 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)
Lowness of Spirits — Delusions —
peculiarity of deportment — Suspicions —

(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 a Month past
is unwilling to go to bed in fear for
as informed by Mrs Welsh
(SIGNED) *Name and Medical Designation,* John Chisholm

Place of Abode, Maxwell Street - Dumfries

DATED this ninth day of December one thousand eight
hundred and fifty eight

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.

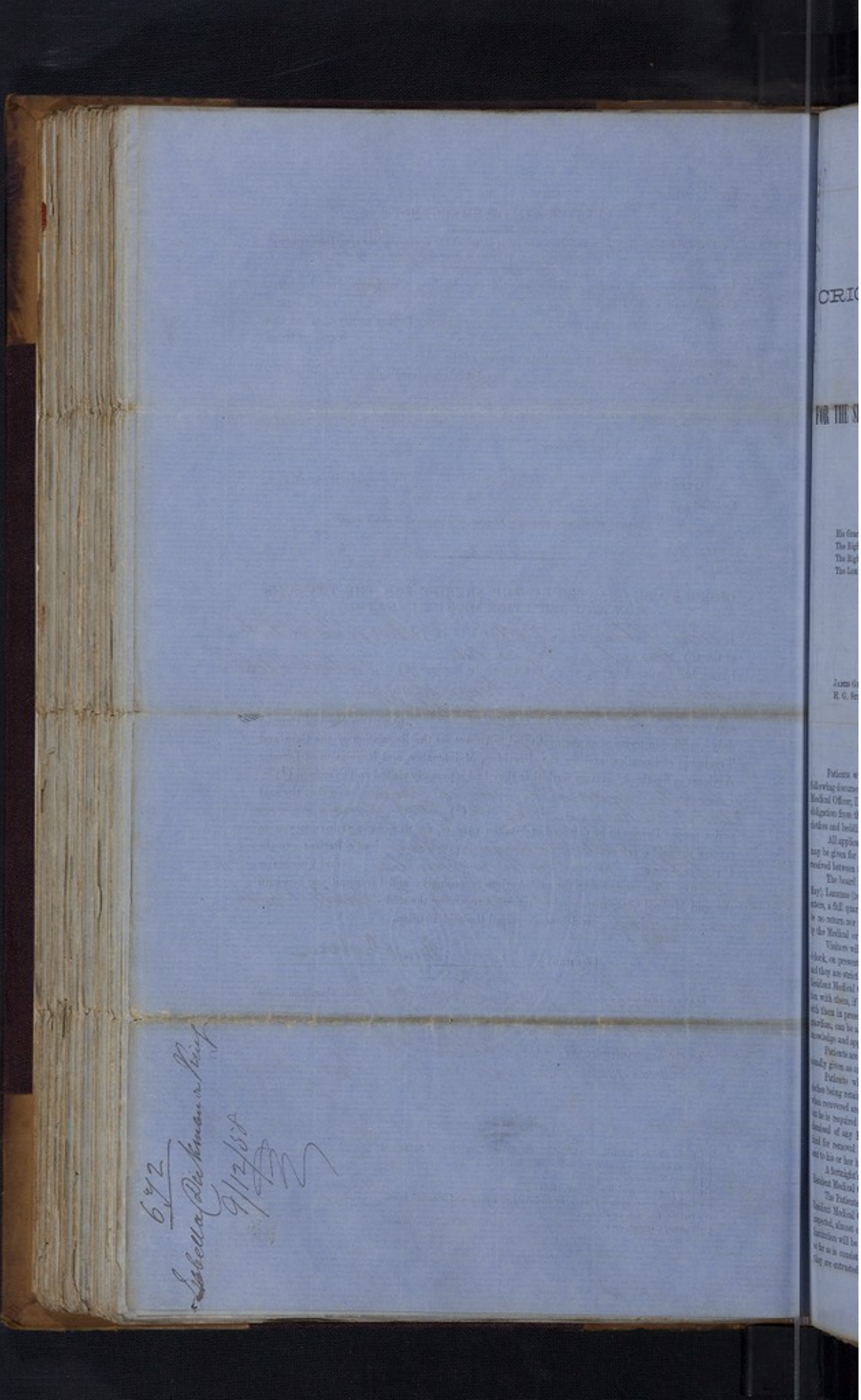
I, John Delavin Potter (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Welsh Inspector of Poor Newabbey Certificates under the hands of Alexander Boothwick and John Chisholm, being two Medical Persons duly qualified in terms 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 Dickman or King a pauper and that the said Isabella Dickman or King 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 Dickman or King as a Patient into the (6) Public Asylum of Southern Counties 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 Isabella Dickman or King which accompanied the said Petition.

(SIGNED) Jno D Potter

DATED this Ninth day of December one thousand eight hundred and fifty eight 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.



CRICHTON ROYAL INSTITUTION,

Lunacy Department.

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 Members 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 Dalawoodie.
M. C. Maxwell, Esq. of Terregles.
P. Dudgeon, Esq. of Cargen.
Thomas Steuart 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., } Treasurers.
S. Adamson, Esq., }

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.	Isabella King Laborers wife 38.
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	Left by husband Had a child 11 months ago
3. Before the invasion 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.?	Abt 7 weeks ago her mother had to have her watch after her & in 3 weeks after she left her —
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?	Not Epileptic
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?	Discontented melancholy restless 3 weeks ago she left her children wandered about — after time found her children & at other times pushed
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.	Eat little Slept little
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?	First time she has been insane
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?	She believes her son poisoned and that her children is poisoned
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	Not suicidal
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thought excited by any particular subject or event?	Occasionally to injure her children
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 prominent propensity, or tendency to crime?	Relation not known
12. What treatment has been resorted to, for what length of time, and with what success?	Treated by Dr Coghill
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	4 months — Confined in County Workhouse —

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 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 Coltart 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 Robert Coultart to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Dinwoodie

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

DATED this Seventh (2) day of December one thousand eight hundred and Fifty Eight

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 Coultart
2. Sex and Age,	Male – 25 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Workingman
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	About 6 years
9. Whether first Attack,	No
10. Age (if known) on first Attack,	about 15 years
11. When and where previously under Examination and Treatment,	Dumfries
12. Duration of existing Attack,	about 5 or 6 years
13. Supposed Cause,	Can assign no cause
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	For the first twelve months he was
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries in the meantime
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 Coltart his father & Henrietta Gordon his mother residing in Dumfries A Maternal Aunt of his mother was insane & was under treatment in the S. C. Asylum about 5 or 6 years ago –
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 Dinwoodie

DATED this Seventh day of December one thousand eight hundred and Fifty Eight

* 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.

(6) *State the facts.*

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

I, the undersigned, William [illegible] Graduate of the Faculty of Physicians Glasgow and College of Surgeons
being a (1) [illegible]
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) King St
Dumfries in the County
visited and personally examined (4) Robert Boutlart separately from any other Medical Practitioner
the said Robert Boutlart and
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) Says he is [illegible]
going about to forget different persons about
he has letters from Kings of
America [illegible] to work as he is Paper to
write [illegible] but on the all the day

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

(SIGNED) *Name and Medical Designation,* William Marshall

Place of Abode, Buchanan Street Dumfries

DATED this 6th day of December One thousand
hundred and fifty eight 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, James Murray McCulloch M.D
being a (1) Graduate of the University of Edinburgh & Licentiate
of the Royal College of Surgeons 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) Kings Street
Dumfries in the County
Dumfries separately from any other Medical Practitioner
visited and personally examined (4) Robert Boutlart, Pauper, residing
in King's Street, Dumfries and
the said Robert Boutlart is a (5) Person of
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 he is residing
does not require to work, though the fact is that he
lies mostly in bed, is moping & melancholy, since
that he eats things different from reality &c &c

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
the same, & that he has been melancholy & [illegible]
delusions for a long time, the delusions now
about principally as above

(SIGNED) *Name and Medical Designation,* James Mc McCulloch M.D

Place of Abode 38 Castle Street, Dumfries

DATED this 30th day of November one thousand
hundred and fifty eight 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, John Ritchie Trotter, ~~Esquire~~ Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Dunwoodie Inspector of Poor Dumfries Certificates under the hands of William Marshall 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 (4) Robert Coultart, a pauper and that the said Robert Coultart 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 Coultart 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 Coultart which accompanied the said Petition.

(SIGNED) John R. Trotter

DATED this Ninth day of December one thousand eight hundred and fifty eight

To the Superintendent of the (7) Public
Asylum of Southern Counties
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.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, or Private.
(7) Public, District, or Private.

6.73
Medical Gazette
9/12/52

CRICHTON ROYAL INSTITUTION,

Happy Department.

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 Dalswinton.
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., } Treasurers.
S. Adamson, Esq., }

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.	Robert Coulthart Aet 25 Labourer good education quiet behaviour
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	Cause unknown Rambling
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.?	Became gradually of low spirits changed in his behaviour to his father.
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?	Not Epileptic Has been generally 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?	Low depressed Spirits would work occasionally apparently forgot what he was about seems to be much in the same condition. Childish in his ways
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 healthy.
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?	When 18 years he had an attack of mania similar to that under which he now labours which lasted 6 months.
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?	He believes he is a wealthy man. Sleeps well
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	Not suicidal
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thought excited by any particular subject or event?	No except at the outset of his disease when he manifested a great dislike to his father
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 prominent propensity, or tendency to crime?	An Aunt of his Mother's Catherine of the name of Hannah one epileptick in the C.R.I. on the Mother side
12. What treatment has been resorted to, for what length of time, and with what success?	Dr Marshall No treatment
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	6 years insane Never before confined

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 Stewart. (2) Shire or Stewartry.

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

The Petition of John Rae, Dalton,

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Rae his 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 Mary Rae to the Southern Counties' Asylum and to sanction ~~his~~ her admission into the said Asylum.

(SIGNED) John Rae

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

DATED this Tenth (3) day of December one thousand eight hundred and Fifty Eight

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 Rae
2. Sex and Age,	Female 37 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Spinster, House Keeper
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Has resided all her life at Dalton
7. Place where Found and Examined,	Dalton Schoolhouse
8. Length of time Insane,	Six months
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	36½ years
11. When and where previously under Examination and Treatment,	Never under Medical treatment for insanity
12. Duration of existing Attack,	Six months
13. Supposed Cause,	Grief and solitude
14. Whether subject to Epilepsy,	Not subject to Epilepsy
15. Whether Suicidal,	Not Suicidal
16. Whether Dangerous to others,	Not dangerous to others
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Not chargeable to any Parish or Union
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 Rae Dalton father of the Patient None else of his family 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,* J Rae

DATED this tenth day of December one thousand eight hundred and fifty eight

* 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, John H. Crowthers Licentiate of the Royal College of Surgeons in the Royal Navy being a (1) and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Dalton School House Dumfries in the County separately from any other Medical Practitioner visited and personally examined (4) Mary Rae and the said Mary Rae, a Child 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)

She labours under the delusion of being pursued by Serpents, and that the house is in danger

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

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

Has on several occasions during the last few days escaped from the Windows during the night time attempting to set all on fire to prevent her.

(SIGNED) *Name and Medical Designation,* John H. Crowthers Surgeon &c

Place of Abode, Dalton Bridge Dalton Dumfries

DATED this 8th day of December One thousand hundred and Fifty Eight

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 Young 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) Dalton Toll Parish of Dalton Dumfries in the County separately from any other Medical Practitioner visited and personally examined (4) Mary Rae Dalton School house and the said Mary Rae 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 delirium

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

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

Sleeplessness and an inclination to escape from the house during the night (communicated by her Father)

(SIGNED) *Name and Medical Designation,* William Young Surgeon

Place of Abode, Gretchfield

DATED this Eight day of December one thousand hundred and Fifty Eight

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 Foster (1) Sheriff Substitute
of the (2) county of Dumfries
having had produced to me, with a Petition at the instance of (3) John Rae
residing at Dalton
Certificates under the hands of John M. Carruthers
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)
Mary Rae daughter of Petitioner and that the said
Mary Rae 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 Rae as a Patient into the (6) Public Asylum of Southern Counties and I authorise you Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Rae which accompanied the said Petition.

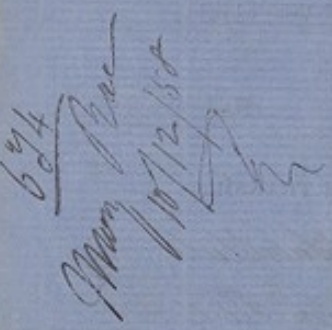
(SIGNED) John P. Foster

DATED this Sixth day of December one thousand eight hundred and fifty eight 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.



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 Clark Insp. of Poor, Johnstone

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Rebecca Brydges, 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 Rebecca Brydges, pauper to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(Signed) John Clark, Insp. of Poor

(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 December one thousand eight hundred and fifty eight

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,	Rebecca Brydges
2. Sex and Age,	Female – 64 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,	Attends the Established Church
6. Previous Place of Abode,	City Parish, Glasgow
7. Place where Found and Examined,	Kirkbank Smithy – Johnstone
8. Length of time Insane,	About 7 months previously
9. Whether first Attack,	Not the first
10. Age (if known) on first Attack,	48 years
11. When and where previously under Examination and Treatment,	Insane department of the City Parish Poor House Glasgow
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,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Johnstone
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,	Lucy Drummond, Aunt Now
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 Clark Insp. of Poor

Dated this 26th day of Dec. one thousand eight hundred and fifty eight

* 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, Edward Gustavus Polpry
being a (1) M.D. of Edinburgh
and being in actual practice as a (2) Physician & Surg.
hereby certify, on soul and conscience, that I have this day, at (3) Hubbo
in the Coun
separately from any other Medical Practiti
visited and personally examined (4) Rebecca Brydges
and a
the said Rebecca Brydges is a (5) Pauper
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) Loss of memory, excitable
and violent

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Rebecca has only been 4 or 5
months in the asylum

(SIGNED) *Name and Medical Designation,* Edward Gustavus Polpry

Place of Abode, Lochmaben

DATED this fourteenth day of December One thousand e
hundred and fifty eight

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 Alderin 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) Southern
Counties Asylum Dumfries in the Count
separately from any other Medical Practitio
visited and personally examined (4) Rebecca Brydges Hou
servant and Pauper and
the said Rebecca Brydges 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) Restlessness
and excitability - Loss of memory and
delusions - has lucid intervals which she de-
scribes rapidly and difficultly

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Said by the attendant & Nurse in
Asylum to be occasionally excited - to have attempted
injury to others &c

(SIGNED) *Name and Medical Designation,* James Alderin M.D.

Place of Abode, Southern Royal Asylum Dumfries

DATED this fifteenth day of December one thousand e
hundred and fifty eight.

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, Wm Peterson Proctor Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Wm Starke
Inspector of Poor of Tinwald
Certificates under the hands of William Edward Griffith Colthorp Aitken
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)
Rebecca Bryges at Kirkbank, a pauper and that the said
Rebecca Bryges 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 Rebecca Bryges 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 Rebecca Bryges which accompanied the said Petition.

(SIGNED) Wm P. Proctor

DATED this Twenty first day of December one thousand eight hundred and fifty eight

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.

6 ft 5
Rebecca Brightfoot
15/12/1838

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 George Marshbank 108 Castlemilk Place Hospital Street Glasgow humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Sarah Smith or Marshbank 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 Sarah Smith or Marshbank to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(SIGNED) George Marshbank

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

DATED this fifteenth (*) day of December one thousand eight hundred and fifty eight

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 Smith or Marshbank
2. Sex and Age,	Female 41
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Gentlewoman
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	108 Castlemilk Place Hospital Street Glasgow
7. Place where Found and Examined,	Crichton Royal Institution Dumfries
8. Length of time Insane,	a few 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,	
13. Supposed Cause,	Hereditary &c
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. 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 Marshbank 108 Castlemilk Place Hospital Place Glasgow Several sisters in same condition
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,* George Marshbank

DATED this fifteenth day of December one thousand eight hundred and fifty eight

* 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, James Fitchett 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 Dumfries separately from any other Medical Practitioner visited and personally examined (4) Sarah Smith or Murchland Resident at 108 Castlemilk Place Govanhill and the said Sarah Smith or Murchland 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 and entire loss of self control with an strong and irrepressible desire for Stimulants

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Has had an Illness for some Nights as stated by her husband

(SIGNED) *Name and Medical Designation,* James Fitchett M.D

Place of Abode, Crichton Royal Institution Dumfries

DATED this Fifteenth day of December One thousand eight hundred and Forty eight.

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 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 Dumfries separately from any other Medical Practitioner visited and personally examined (4) Sarah Smith or Murchland resident in the Crichton Institution and the said Sarah Murchland 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 own statement that she has no control over her actions and a most inordinate desire for Stimulants whenever the least opportunity is offered

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

(SIGNED) *Name and Medical Designation,* William Scott M.D.

Place of Abode, Dumfries

DATED this 16th day of December one thousand eight hundred and 48

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 Sarah Smith or Marchbank is a (1) Lunatic & proper Person to be detained hereby further certify that the Case of the said Sarah Smith or Marchbank is One of Emergency, and I recommend the immediate removal of the said Sarah Smith or Marchbank to an Asylum accordingly.

Name, James Gilchrist M.D.

Place of Abode, Crichton Royal Institution Dumfries

DATED this 1st & 4th day of December one thousand eight hundred and fifty eight.

(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 Nolles (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) George Marchbank 108 Castlemilk Place Hospital Govt. Glasgow Certificates under the hands of James Gilchrist 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) Sarah Smith or Marchbank wife of Petitioner and that the said Sarah Smith or Marchbank 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 Smith or Marchbank 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 Sarah Smith or Marchbank which accompanied the said Petition.

(SIGNED) Wm P Nolles

DATED this Seventeenth day of December one thousand eight hundred and fifty eight years.

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.

8/8

Wm Smith or Marshall

15/12/68

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 Rae Inspector of Poor Dalton humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that George Kerr Slaper Birgit, Dalton 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 Kerr to the ~~Crichton~~ Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) J Rae

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

DATED this Thirtieth (1) day of December one thousand eight hundred and Fifty Eight

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 Kerr
2. Sex and Age,	Male – In the 50th year of his age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Never capable of following any occupation
5. Religious Persuasion, so far as known,	Never capable of any
6. Previous Place of Abode,	In Birgit for 35 years, before resided in Hollywood
7. Place where Found and Examined,	Birgit
8. Length of time Insane,	Ever since 8 years of age
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	8 years
11. When and where previously under Examination and Treatment,	Is under treatment by Medical Officer for the Poor at Birgit
12. Duration of existing Attack,	46 years
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,	Parish of Dalton
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 Kerr or Johnstone Birgit, Patients Sister No Member of his family known to be 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,* J Rae Inspector of Poor

DATED this Thirtieth day of December one thousand eight hundred and Fifty Eight

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1260.

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 and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Birrgt in the Parish of Dalton in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) George Kerr pauper at Birrgt and that the said George Kerr is an (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.:—

(6) *State the facts.*

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

His general appearance gives the indication of his being an Idiot and he is incapable of speech

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

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

He requires to be fed by his attendant and to be confined to prevent doing injury to himself

(SIGNED) *Name and Medical Designation,* William Young, Surgeon

Place of Abode, Eaglesham

DATED this 23rd day of December One thousand eight hundred and Fifty Eight

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 Broatch being a (1) Licentiate of the Royal Colle 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) Birgett in the Parish of Dalton in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) George Kerr at Birgett a Pauper and that the said George Kerr is a (5) Fatuous 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) by his countenance and general appearance

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

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

His attendant is obliged to feed him and lead him out for exercise &c.

(SIGNED) *Name and Medical Designation,* John Broatch Surgeon

Place of Abode, Ruthwell

DATED this twenty fifth day of December one thousand eight hundred and fifty eight

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, Alexander Kannay (1) Sheriff-Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) John Rae Inspector of Poor, Dalton Certificates under the hands of William Young and John Braidley, 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 Kerr, Burgh, Dalton a pauper and that the said George Kerr is a (5) Idiot and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said George Kerr as a Patient into the (6) Public Asylum of Southern Counties and I authorise this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said George Kerr which accompanied the said Petition.

(Signed) A. Kannay

Dated this Third day of January one thousand eight hundred and fifty nine 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.

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 David Morrine Inspector of Lunacy

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Mc Intyre 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 Mc Intyre to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) David Morrine

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

DATED this Fourth (*) day of January one thousand eight hundred and fifty nine 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,	John Mc Intyre
2. Sex and Age,	Male — 29 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
6. Previous Place of Abode,	Kirkmichael Glencairn
7. Place where Found and Examined,	Kirkmichael
8. Length of time Insane,	Ten Months
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	About 19 years
11. When and where previously under Examination and Treatment,	Crichton Royal Institution Dumfries
12. Duration of existing Attack,	Unknown about ten years ago
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,	Glencairn
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,	Sir Matthew Charles Lamont Mc Intyre resides as a Domestic Servant in the Parish of Langholm — the Grandfather of the Family is known 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, David Morrine Inspector of Poor Glencairn

DATED this Fourth day of January one thousand eight hundred and fifty nine years

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1000.

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, Andrew Sommer
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) Monnyhive in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) John McIntyre a Pauper residing in Monnyhive and the said John McIntyre 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. :—

1. Facts indicating Insanity observed by myself: (6)
When I examined him he seemed in a state of great mental depression crying his face with the bed clothes but refused any complaint. His insanity appeared more from his appearance and general deportment, than from answers to questions put to him

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
He is in the habit of wandering about the greater part of the night and also during the night Keeping people awake by his noise.

(SIGNED) *Name and Medical Designation,* Jno. Sommer M.D.

Place of Abode, Lamington, Glencairn

DATED this twenty fourth day of December One thousand eight hundred and fifty eight 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, Wm 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) Minnyhive in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) John McIntyre a Pauper residing in Minnyhive and the said John McIntyre 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. :—

1. Facts indicating Insanity observed by myself: (6)
He inclines to keep his bed all day & during the nocturnal ramblings I attended answered questions correctly when put to him & seems all considerations

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
Have heard no complaint on the part of the neighbours about him

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

Place of Abode Minnyhive

DATED this twenty ninth day of December one thousand eight hundred and fifty eight 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, Henry de Hamray, (1) Sheriff-Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) David Morrine Inspector of Poor Glencaple Certificates under the hands of Andrew Sommerville and William Tatlow, 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 McIntyre, Annandale, a pauper and that the said John McIntyre 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 McIntyre 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 John McIntyre which accompanied the said Petition.

(SIGNED) H. de Hamray

DATED this Fifth day of January one thousand eight hundred and fifty nine 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.

6.4.9

John McIntyre

4/1/69

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 Dumfries *of the* (2) Shire *and his Substitutes,—*

The Petition of Alex Ferguson

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jean Creighton 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 Jean Creighton to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) Alex Ferguson, Insp. of Drysdale.

(1) 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 fifty-nine.

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,	Jean Creighton.
2. Sex and Age,	Female about 60 years of age.
3. Married, Single, or Widowed,	Single.
4. Condition of Life, and previous Occupation (if any),	Agricultural Labourer
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Lochmaben
7. Place where Found and Examined,	Broadchapel near Lochmaben
8. Length of time Insane,	About 30 years.
9. Whether first Attack,	—
10. Age (if known) on first Attack,	Between 20 and 30 years of age.
11. When and where previously under Examination and Treatment,	—
12. Duration of existing Attack,	—
13. Supposed Cause,	Supposed to have been caused by cold
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	No. except when highly excited
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Drysdale, County of Dumfries.
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 Creighton, farm servant, Brother. None of the family known 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*, Alex Ferguson, Insp.

DATED this Twenty-second day of January one thousand eight hundred and fifty-nine

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1240.

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 C Wilson being a (1) Lic of the Fac of Phy and Surgeons of Gl and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Broadchapel in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Jean Creighton and that the said Jean Creighton 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) Having visited her occasionally for the last five years. – from her general manner and appearance do have no reason to doubt that she is of unsound mind

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Although to day and for the last fortnight she has been very quiet she gets at times very violent. I have been informed by her sister

(SIGNED) *Name and Medical Designation,* Geo C Wilson, Surg

Place of Abode, Langholm

DATED this twenty first day of January One thousand eight hundred and fifty nine

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 Edward Griffith Colthorpe being a (1) Member of the Royal College of Ph Edinburgh & Licentiate of Roy: Coll: Surgeons E and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Broadchapel in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Jean Creighton and that the said Jean Creighton 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 speech & peculiarly expressive eye the restless manner all indicate an unsound state of mind

2. Other facts (if any) indicating Insanity communicated to me by others. (7) at times violent, expected & inclined to duty, habits

(SIGNED) *Name and Medical Designation,* Edward Gil Duke Phys

Place of Abode, Lochmaben

DATED this twenty first day of January one thousand eight hundred and fifty nine

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, Alexander Kennedy, (1) Sheriff-Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Alexander Fergusson, Inspector of Poor, Drysdale Certificates under the hands of George G. Wilson and William G. 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) Jean Creighton, Gracefield; a pauper and that the said Jean Creighton 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 Jean Creighton as a Patient into the (6) Public Asylum of Southern Counties and I authorise for Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jean Creighton which accompanied the said Petition.

(Signed) Alex Kennedy

Dated this Twenty fourth day of January one thousand eight hundred and fifty nine 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.]

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 of the (2) Stewartry of Kirkcudbright *and his Substitutes,—*

The Petition of John Muir Inspector of Poor Parish of Kells

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates that Thomas Butter a Pauper at present Chargeable on the Parish of Kells 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 Butter to the Dumfries Southern Counties Asylum, and to sanction his admission into the said Asylum.

(SIGNED) John Muir

(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 fifty nine

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 Butter
2. Sex and Age,	Male, aged about 35
3. Married, Single, or Widowed,	Not known,
4. Condition of Life, and previous Occupation (if any),	Railway Labourer.
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	Supposed to be Musselburgh
7. Place where Found and Examined,	Musswell Railway Huts
8. Length of time Insane,	Two days
9. Whether first attack,	Not known
10. Age (if known) on first Attack,	Do
11. When and where previously under Examination and Treatment,	"
12. Duration of existing Attack,	Two days
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	Do
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Yes.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kells
18. Date of becoming Chargeable,	31st Jan 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,	Not known, supposed to have friends in Musselburgh.
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Is a stranger.

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

(SIGNED)* Name John Muir

DATED this 31st day of January One thousand eight hundred and fifty nine

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Alfred Mc Kinley Mullman being a (1) Member 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) Mossdale Railway Huts in the Parish of Kells in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Thomas Butler a pauper Labourer residing there, & non chargeable to the Parish of Kells, and that the said Thomas Butler 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 stated he saw the Devil, & was going to consign h[im] to the flames of Hell. Thought a person in the room w[as] like the devil. Frequently muttering to himself, & on being asked [what] he was saying, replied that he was talking to God. He seemed irritable & excitable, has a wild expression of the eyes & his ideas disordered.
2. Other facts (if any) indicating Insanity communicated to me by others: (7)
He was extremely boisterous last night, & on some of the [men] being in the room troubled him; has assaulted fellow-[patients] towards others; particularly towards a man on his first [night] & whom he had never before seen; has seized his bed-fellow's [throat] & would have strangled him had not assistance been at hand. He is very weak, apparently in a state of great terror, has refused food by mouth since Tuesday last & feeds only when spoon-fed apparently by way of penance.

(7) State the facts.

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

Information derives from Thomas McFadyen, Wm McKay & others whose names I do not know. A. McK. M.

(SIGNED) Name and Medical Designation, Alfred Mc Kinley Mullman Surgeon.

Place of Abode, New Galloway

DATED this 31st day of January One thousand eight hundred and fifty nine 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.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, David Blair being a (1) L. R. C. S. Edin[r] and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Kirkcudbright Police Office Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Thos Butler a Railway Labourer a pauper from Kells parish and that the said Thomas Butler 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 stating that he is haunted by a Black man, who he fancies to be the Devil & further upon personal by a number of little ones, that the said Black man once followed him for Kirkcudbright to inspect the bridge & also from the wild & unusual appearance of his eyes.
2. Other Facts (if any) indicating Insanity communicated to me by others: (7)

(6) State the facts.

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

(SIGNED) Name and Medical Designation, David Blair Surgeon

Place of Abode, Kirkcudbright

DATED this 1st day of February One thousand eight hundred and fifty nine.

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 Thomas Butler is a (1) Lunatic hereby further certify that the Case of the said Thomas Butler is One of Emergency, and I recommend the immediate removal of the said Thomas Butler to an Asylum accordingly.

Name, Alfred McKinley Millman, Surgeon.

Place of Abode, New Galloway

DATED this 31st day of January One thousand eight hundred and fifty nine 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, William Ayaemth Dunbar, Esquo, Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) John Muir, Inspector of Poor for the Parish of Kells Certificates under the hands of Alfred McKinley Millman and Dana 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) Thomas Butler, a pauper and that the said Thomas Butler 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 Butler 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 Thomas Butler which accompanied the said Petition.

(SIGNED) W A Dunbar

DATED this second day of February One thousand eight hundred and fifty nine years.

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.

Petition

Against

Thomas Butler

659

Thomas Butler

2/2/65

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 James Peacock Farmer Barnhanny Kirkcemple

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Milroy Farmer Barnhanny Kirkcemple 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 Milroy to the Crichton Institution Dumfries and to sanction his admission into the said Asylum.

(SIGNED) James Peacock

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

DATED this Third (*) day of February one thousand eight hundred and fifty nine

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 Milroy.
2. Sex and Age,	Male - 30
3. Married, Single, or Widowed,	Unmarried.
4. Condition of Life, and previous Occupation (if any),	Farmer
5. Religious Persuasion, so far as known,	Free Church of Scotland
6. Previous Place of Abode,	Barnhanny - Wigtonshire
7. Place where Found and Examined,	Do
8. Length of time Insane,	9 Months
9. Whether first Attack,	Third
10. Age (if known) on first Attack,	29
11. When and where previously under Examination and Treatment,	Crichton Institution Dumfries a week.
12. Duration of existing Attack,	Intemperance & other irregularities
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,	Jane Milroy - Mother - Barnhanny
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,	None of family 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,* James Peacock

DATED this Third day of February one thousand eight hundred and fifty nine.

* 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, William Scott MD.
being a (1) Graduate 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 Institution
in the County of Dumfries
separately from any other Medical Practitioner, visited and personally examined (4) John Milroy Farmer
from Barhaven
and that the said John Milroy
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) Intense melancholy and great mental prostration

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His Cousin tells me that he left the Crichton Institution a few days ago and has been much worse with great tendency to commit suicide

(SIGNED) Name and Medical Designation, William Scott MD.

Place of Abode, Dumfries.

DATED this 2 day of February One thousand eight hundred and 59

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 Berthwick Gr.
being a (1) Graduate of the University of Edinb
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
separately from any other Medical Practitioner, visited and personally examined (4) John Milroy, Farmer
Barhaven
and that the said John Milroy
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) Intense Melancholy. Complete mental prostration

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Dr Dickson informs me that he has observed symptoms of suicidal tendencies

(SIGNED) Name and Medical Designation, Alex. Berthwick Gr.

Place of Abode, Dumfries

DATED this 2 day of February one thousand eight hundred and fifty nine 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 John Milroy is a (1) person of unsound mind hereby further certify that the Case of the said John Milroy is One of Emergency, and I recommend the immediate removal of the said John Milroy to an Asylum accordingly.

Name, William Scott M.D. Edin

Place of Abode, Dumfries

DATED this Second day of February one thousand eight hundred and 57

(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 Stamp Weller (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Peacock residing at Milnegavie Certificates under the hands of William Scott and Alexander Bathgate, 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 Milroy Farmer Waterbeaming Wigtonshire and that the said John Milroy 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 Milroy as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Milroy which accompanied the said Petition.

(SIGNED) Wm Stamp Weller

DATED this Third day of February one thousand eight hundred and fifty nine years

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.

819
Mr Hen Shilton
2/2/59

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 M'Lellan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David Yeoman

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 Yeoman — to the Southern Counties Asylum — and to sanction his admission into the said Asylum.

(SIGNED) John M'Lellan Inspector of Poor parish of Dumfries

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

DATED this Second — (3) day of March — one thousand eight hundred and fifty nine

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 Yeoman
2. Sex and Age,	Male aged 19
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Idiotic from Birth
5. Religious Persuasion, so far as known,	Mother belongs to Established Church
6. Previous Place of Abode,	Port Street Annan with their Mother
7. Place where Found and Examined,	Port Street
8. Length of time Insane,	From Birth
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	Born Idiotic
11. When and where previously under Examination and Treatment,	Dr Ewart visited once every month
12. Duration of existing Attack,	
13. Supposed Cause,	Hereditary
14. Whether subject to Epilepsy,	Not Epileptic
15. Whether Suicidal,	Not Suicidal
16. Whether Dangerous to others,	Occasionally
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Annan Parish
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,	Widow Jane Ferguson or Yeoman Brother to Annan Patients Mother, who is cousin by Father side of Mr D.M. Ferguson Inmate of Asylum and connected with Dr Sharburn also an Inmate
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 M'Lellan Insp. of Poor

DATED this Second — day of March — one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board, — Dec.—57.—1250.

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 Ewart being a (1) Licentiate of the Royal College of Surgeons in Edinburgh and being in actual practice as a (2) Surgeon 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) David Gorman a pauper from Annan and at the said David Gorman is a (5) Idiotic 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 General appearance, feeble mental development & peculiarity of habits & actions

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Hereditary predisposition on Mother's side is sometimes mischievous & disturbed and is thus deficient to manage

(SIGNED) *Name and Medical Designation,* William Ewart. Surgeon

Place of Abode, Edinburgh Medical Club

DATED this second day of March One thousand eight hundred and fifty nine

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 Gilchrist 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) Southern Counties Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) David Gorman a pauper son and Parish Annan and the said David Gorman 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 Imbecility Great difficulty in speech His Patient is excited & irritable Has little control his actions

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) occasionally irritable and obstinate as stated by his attendants

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Brighton House

DATED this second day of March One thousand eight hundred and fifty nine

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 Pilcairn Trotter (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John McLellan, Inspector of Poor, Annan
Certificates under the hands of William Ewart
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)
David Yeoman, Annan, a pauper and that the said
David Yeoman is a (5) Lunatic & of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said David Yeoman as a Patient into the (6) Public Asylum of Southern Counties and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said David Yeoman which accompanied the said Petition.

(SIGNED) John P Trotter

DATED this 23rd day of March one thousand eight hundred and fifty nine 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.

CRICHTON ROYAL INSTITUTION.

Paupers Department.

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. Duncan, 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., } Treasurers.
S. Adamson, Esq., }

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. Feb. 14th 1859.
1. Name age, condition, occupation, disposition, amount of education, and general deportment of the Patient.	David ~~and Ellen~~ German Oct 19. pauper math to work Quiet never been able to learn any thing at school not even letters
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	Hereditary predisposition heredity having manifested itself both in the mothers and fathers family —
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.?	
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?	Not Epileptic. Has good health never had any severe disease.
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?	Idiotic from birth cannot put on his own clothes or wash his face before like a child when that is done cannot speak so as to be understood
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.	Senses normal General health 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?	at the rise and fall of the moon the patient becomes more irritable & cannot be so easily managed
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?	Sleeps well at night clean not destructive
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	Not suicidal
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thought excited by any particular subject or event?	very quiet
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 prominent propensity, or tendency to crime?	Insanity has appeared in both his Mother and fathers family — at present there is an uncle and second cousin in the Asylum on the female side, and much on the male side but nothing further than the appetite of the mind,
12. What treatment has been resorted to, for what length of time, and with what success?	
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	From birth always lived at home

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 McLellan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Yeoman

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 Yeoman to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John McLellan Inspector of Poor for Annan

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

DATED this Second (3) day of March one thousand eight hundred and fifty nine

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 Yeoman
2. Sex and Age,	Female aged 12
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Idiotic from Birth
5. Religious Persuasion, so far as known,	Mother belongs to Established Church
6. Previous Place of Abode,	Port Street Annan with their Mother
7. Place where Found and Examined,	Southern Counties Asylum
8. Length of time Insane,	From Birth
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	Born Idiotic
11. When and where previously under Examination and Treatment,	Dr Stuart visited once every month
12. Duration of existing Attack,	
13. Supposed Cause,	Hereditary
14. Whether subject to Epilepsy,	Not Epileptic
15. Whether Suicidal,	Not suicidal
16. Whether Dangerous to others,	Occasionally
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Annan Parish
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,	Widow Jane Ferguson or Yeoman Port Street Annan Parents Mother, who is Cousin by Father side of Mrs D.M. Ferguson Inmate of Asylum & connected with Dr Charlton also an Inmate
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 McLellan Insp. of Poor

DATED this Second day of March one thousand eight hundred and fifty nine

* 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.*

I, the undersigned, William Ewart
being a (1) Licentiate of the Royal [illegible] 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) Southern
Counties Asylum, Dumfries in the County of
Dumfries
separately from any other Medical Practitioner

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

visited and personally examined (4) Ellen Gorman
a Pauper from Annan
and the

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

said Ellen Gorman 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 General appearance, feeble mental development, Peculiarity of looks and actions.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Hereditary predisposition on Mother's side; is sometimes Mischievous and irritable, and is then difficult to manage.

(SIGNED) *Name and Medical Designation,* William Ewart L.R.C.P. Edin.

Place of Abode, Edinburgh Asylum, Morningside

DATED this Second day of March 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.*

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 Dumfries in the County of
Dumfries.
separately from any other Medical Practitioner

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

visited and personally examined (4) Ellen Gorman domestic
daughter of a pauper from Annan and the

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

said Ellen Gorman is a (5) Woman
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 deficiency from which Patient is unable to regulate and control her actions

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) occasionally irritable as stated by the Attendants

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crighton Royal Dumfries

DATED this second day of March one thousand eight
hundred and Eighty 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 Peterson Grotter, (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John M^c^
Lellan, Inspector of Poor, Annan
Certificates under the hands of William Ewart
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)
Helen Yeoman, Annan, a Pauper and that the said
Helen Yeoman (5) Idiotic & Imbecile
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Helen Yeoman as a Patient into the
(6) Public Asylum of Southern Counties and I authorise
you Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Helen
Yeoman which accompanied the said Petition.

(SIGNED) John P Grotter

DATED this 9th day of March one thousand eight hundred and fifty nine years

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.

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Helen Seaman
1/4/2/69

CRICHTON ROYAL INSTITUTION,

Payer Department.

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 STEUART 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. Feb. 16th 1836
1. Name age, condition, occupation, disposition, amount of education, and general deportment of the Patient.	Ellen Helen Yeamans Ad 12 Scotch by birth. Was at school but never could learn any thing. Of a restless disposition
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	Hereditary predisposition.
3. Before the invasion 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.?	
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?	Not Epileptic generally health no Convulsions of any kind
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?	She is of an extremely restless and irritable disposition. No obvious change has occurred in the disease except that she has become more unmanageable of late
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.	General Health, improved
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?	
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?	Does not know any thing of religious duties quiet at night but destructive unless looked after. Clean in her habits
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thought excited by any particular subject or event?	Sometimes threatens to strike and to destroy her clothes
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 prominent propensity, or tendency to crime?	Hereditary taint in both father and mothers family
12. What treatment has been resorted to, for what length of time, and with what success?	Visits of Dr York once every month
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	Since birth never before in any Asylum

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 Mrs Elizabeth Charteris humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Charteris Her 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 Charteris to the Dumfries Counties Asylum and to sanction his admission into the said Asylum.

John Drinnsdale, Keeper

(SIGNED) Elizabeth Charteris

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

DATED this 21st (3) day of February one thousand eight hundred and fifty nine

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 Charteris
2. Sex and Age,	Male – 53 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Poor – Servant
5. Religious Persuasion, so far as known,	Free Church of Scotland
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	Do
8. Length of time Insane,	Since Wednesday
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	53 years
11. When and where previously under Examination and Treatment,	Was never under treatment before
12. Duration of existing Attack,	6 days
13. Supposed Cause,	agitated about a Child
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. 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 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.

John Drinnsdale Keeper

(SIGNED)* *Name,* Elizabeth Charteris

DATED this 21st day of February one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board.—Dec.—37.—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.*

I, the undersigned, Wm Rogerfield being a (1) Graduate of the Faculty of Physicians Surgeons Glasgow and Fellow of the Royal Coll and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) St David Dumfries Dumfries in the Coun separately from any other Medical Practitio visited and personally examined (4) John Charteris and

(4) *Insert Designation and Residence, and if a Pauper, state so.*
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

the said John Charteris 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) Speaks incoh impression that he has become Heir to a gr which he intends disposing in public works in making Comfortable, aged and Broken down

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) and Merchant His wife tells me that she for his entrance on Wednesday last or there was Castle douglas When he left he had just entered

(SIGNED) *Name and Medical Designation,* William Rogerfield M.D.

Place of Abode, Buccleuch Street Dumfr

DATED this 25th day of February One thousand ei hundred and fifty nine 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.*

I, the undersigned, James Murray McCulloch M.D. Edi being a (1) Graduate of the University of Edinburgh & Lice of the Edinburgh Royal College of Surgeons &c. and being in actual practice as a (2) Physician &c! hereby certify, on soul and conscience, that I have this day, at (3) St David Dumfries Dumfries in the County separately from any other Medical Practition

(4) *Insert Designation and Residence, and if a Pauper, state so.*
(5) Lunatic, or an insane person, or an idiot, or a person of unsound mind.

visited and personally examined (4) John Charteris, pauper and t the said John Charteris 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) Very much excit = a time & incoherent, declares he can speak & write about mil but knows that he has six acres of houses in Liverpool worth £334, pounds sterling, that he has given £100,000 to beautify Dumfries &c.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Same & other having noticed

(SIGNED) *Name and Medical Designation,* James Mc. McCulloch

Place of Abode, 38 Castle Street Dumfr

DATED this 21st day of February one thousand eig hundred and fifty nine 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, John Delavoye Roller (1) Sheriff Substitute of the (2) county of Dumfries having had produced to me, with a Petition at the instance of (3) Mrs Elizabeth Charteris residing in Saint Quivox Parish Dumfries Certificates under the hands of William Murdoch and James Murray M'Culloch, 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 Charteris residing in Dumfries and that the said John Charteris is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Charteris as a Patient into the (6) Public Asylum of Southern Counties and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Charteris which accompanied the said Petition.

(SIGNED) John D. Roller.

DATED this Twenty first day of February one thousand eight hundred and fifty nine 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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John Charteris

21/2/59

20 & 21 *Vict.*, *Cap.* 71, *Sect.* 84.

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 Christopher Bell
Innkeeper in Lockerbie
humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Johnstone, Surgeon, Lockerbie
the Petitioner's Brother-in-law
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 Johnstone to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Christopher Bell

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

DATED this Twenty first (2) day of February one thousand eight hundred and Fifty Nine

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 Johnstone
2. Sex and Age,	Male : 30 years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Surgeon
5. Religious Persuasion, so far as known,	Protestant (Presbyterian)
6. Previous Place of Abode,	Australia
7. Place where Found and Examined,	Lockerbie
8. Length of time Insane,	Three months
9. Whether first Attack,	Second attack according to his own statement
10. Age (if known) on first Attack,	Not known
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Three months
13. Supposed Cause,	Past irregularities
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. 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 Johnstone or Bell residing in Lockerbie sister of Patient None of family known to have ever been so afflicted
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,* Christopher Bell

DATED this Twenty first day of February one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1240.

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.*

I, the undersigned, James Johnson 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) High Street Lockerbie in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Robert Johnstone, Surgeon, residing and

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

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

the said Robert 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) A strong and unreasonable delusion as totally overlooking ruin of his soul, that he is altogether given over to the devil, and must not remain any longer

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) These facts are corroborated by the statements of his wife and other relations

(SIGNED) *Name and Medical Designation,* Jas. Wilson Surgeon

Place of Abode, Lockerbie

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

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.*

I, the undersigned, George Wilson Licentiate of the Royal College of Physicians, and Surgeons Glasgow being a (1) Surgeon and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) High Street Lockerbie in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Robert Johnston Surgeon

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

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

the said Robert Johnston, Surgeon 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 has such a delusion as that Satan the Devil is with him, that he is

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) As well as Relations as Knowledge he is of unsound mind,

(SIGNED) *Name and Medical Designation,* Geo. Wilson Surgeon

Place of Abode, Lockerbie

DATED this 21 day of February one thousand eight hundred and 59

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 Pelham Boller (1) Sheriff-Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Christopher Bell, Inspector, Lochmaben Certificates under the hands of Jane Thomson Wilson and George C. 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) Robert Johnstone, Surgeon, Lochmaben and that the said Robert 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 Robert Johnstone as a Patient into the (6) Public Asylum of Southern Counties and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Johnstone which accompanied the said Petition.

(SIGNED) _____

DATED this Twenty-second day of February one thousand eight hundred and fifty-nine 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.

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 Dewpster

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Wilson Dewpster 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 Jane Wilson Dewpster her to the Christian Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Robert Dewpster

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

DATED this 22nd (3) day of February one thousand eight hundred and 59

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 Wilson or Dewpster
2. Sex and Age,	Female 42
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Minister's wife
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	New Galloway
7. Place where Found and Examined,	Crichton Royal Institution
8. Length of time Insane,	About two months
9. Whether first Attack,	Second
10. Age (if known) on first Attack,	Twelve months ago
11. When and where previously under Examination and Treatment,	Treated at home
12. Duration of existing Attack,	Two months
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Not threatened
16. Whether Dangerous to others,	Not threatened
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 her Family known to be or to have been Insane,	Robert Dewpster brother Whithorn none of the family 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,* Robert Dewpster

DATED this 22nd day of February one thousand eight hundred and fifty nine

* 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, James Fleckseir 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) Jane Wilson or Dempster Newfellowray
and that the said Jane Wilson or Dempster 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 and restlessness

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Has threatened injury to herself and others as stated by her attendants.

(SIGNED) *Name and Medical Designation,* James Fleckseir M.D.

Place of Abode, Crichton Royal Institution Dumfries

DATED this twenty-seventh day of February one thousand eight hundred and fifty nine

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 Greene 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) Jane Wilson or Dempster residing at Newfellowray
and that the said Jane Wilson or Dempster 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.:— uncontrollable temper and extravagant

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) and perverted feelings towards her relatives

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Threatened destruction to herself, and to others.

(SIGNED) *Name and Medical Designation,* James Greene M.D. Surg.

Place of Abode, Buccleuch Street Dumfries

DATED this 28th day of February one thousand eight hundred and fifty nine.

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 Wilson or Dempster is a (1) person of unsound mind, hereby further certify that the Case of the said Jane Wilson or Dempster is One of Emergency, and I recommend the immediate removal of the said Jane Wilson or Dempster to an Asylum accordingly.

Name James Gilchrist M.D

Place of Abode Crichton Royal Institution Dumfries

DATED this twenty second day of February one thousand eight hundred and fifty nine

(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 Ogilvy Fyfe (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Dempster at Waterhouse Certificates under the hands of James Gilchrist and James Greve, 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 Wilson or Dempster Sister of Petitioner and that the said Jane Wilson or Dempster is a (5) person of unsound mind and a proper Person to be detained and taken care of, no HEREBY AUTHORIZE you to receive the said Jane Wilson or Dempster 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 Jane Wilson or Dempster which accompanied the said Petition.

(SIGNED) John P. Fyfe

DATED this twenty third day of February one thousand eight hundred and fifty nine years

To the Superintendent of the (7) Public *Asylum of* Crichton Royal 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.

821

Mrs Wilson vs Ogemfulin

22/2/69

20 & 21 *Vict., Cap.* 71, *Sect.* 84.

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 Le Blanc Redford Colinton Edinburgh

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Harriet Septimia Le Blanc 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 Mrs Le Blanc to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Geo. Le Blanc

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

DATED this twenty fourth (3) day of February one thousand eight hundred and fifty nine —

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,	Harriet Septimia Le Blanc
2. Sex and Age,	Femal – 50 –
3. Married, Single, or Widowed,	married –
4. Condition of Life, and previous Occupation (if any),	a Lady,
5. Religious Persuasion, so far as known,	Episcopalian —
6. Previous Place of Abode,	Redford, Colinton near Edinburgh —
7. Place where Found and Examined,	Crichton House Dumfries
8. Length of time Insane,	Three years & about Six months —
9. Whether first Attack,	yes.
10. Age (if known) on first Attack,	47
11. When and where previously under Examination and Treatment,	Sanghton Hall, & Redford —
12. Duration of existing Attack,	
13. Supposed Cause,	none known
14. Whether subject to Epilepsy,	no.
15. Whether Suicidal,	no
16. Whether Dangerous to others,	suspected of being so to some persons.
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,	George Le Blanc, husband, Edr. 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,* Geo. Le Blanc

DATED this 24th ~~July~~ ~~1859~~ February one thousand eight hundred and fifty nine

* 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, James Greive 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) Crichton Royal Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mrs Harriet Septimia Le Blanc a Lady recently resident in Edinburgh and that the said Harriet Septimia Le Blanc 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) great mental excitement, and incoherence

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) destructive and violent when resisted as communicated by her attendants

(SIGNED) *Name and Medical Designation,* James Greive M.D. Lic

Place of Abode, Crichton Royal Dumfries

DATED this 28 day of February One thousand eight hundred and fifty nine.

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 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 Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mrs Harriet Septimia Le Blanc late Woman Resident in Edinburgh and that the said Mrs Harriet Septimia Le Blanc 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 incoherence loss of self-control tendency to violence and destructiveness when her wishes are opposed.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Tears the clothes of her attendants when opposed by them

(SIGNED) *Name and Medical Designation,* James Aitchison M.D.

Place of Abode, Crichton Royal Dumfries

DATED this twenty third day of February one thousand eight hundred and fifty nine

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 Mrs Harriet Sophimia Le Blanc is a (1) Lunatic hereby further certify that the Case of the said Mrs Harriet Sophimia Le Blanc is One of Emergency, and I recommend the immediate removal of the said Mrs Harriet Sophimia Le Blanc to an Asylum accordingly.

Name, James Greive M.D. Surgeon

Place of Abode, Merchant St. Dumfries

Dated this 23 day of February one thousand eight hundred and fifty nine

(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 Kennedy (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) George Le Blanc residing in Edinburgh Certificates under the hands of James Greive and James Gulchrist, 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 Harriet Sophimia Le Blanc wife of Publician and that the said Mrs Harriet Sophimia Le Blanc 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 Harriet Sophimia Le Blanc as a Patient into the (6) Public Asylum of Crichton 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 Mrs Harriet Sophimia Le Blanc which accompanied the said Petition.

(SIGNED) Alex Kennedy

Dated this twenty sixth day of February one thousand eight hundred and fifty nine years.

To the Superintendent of the (7) Public *Asylum of* Crichton Royal 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.

822

Chas E. L. & R. Plans

23/3/57

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 Samuel Parish
Kirkland Parkmichael
humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Peter Dow My brother in Law 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 Dow to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Saml Parish

(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 February one thousand eight hundred and fifty nine

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,	Mr Peter Dow
2. Sex and Age,	Male 42
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Schoolmaster
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Lochmaben
7. Place where Found and Examined,	Crichton Royal Institution
8. Length of time Insane,	About two or 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,	(As 8)
13. Supposed Cause,	Not known
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. 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,	Father John Dow Lochmaben 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,* Saml Parish

DATED this twenty fifth day of February one thousand eight hundred and fifty nine

* 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 Edward Griffith Colpoys Du
being a (1) Physician Licentiate Edinb
Graduate 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) Crichton
Royal Institution Dumfries in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Mr Peter Dow
Schoolmaster Cockmaben and at
the said Peter Dow 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)
Depression of Spirits, & wound
of throat inflicted by razor attempt
Suicide

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Nothing further than above

(SIGNED) *Name and Medical Designation,* Edward G. Colpoys Du

Place of Abode, Cockmaben

DATED this twenty fourth day of February One thousand eight
hundred and fifty nine.

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 Aitchison 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) Creighton
Royal Institution Dumfries in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Mr Peter Dow
Schoolmaster Cockmaben and at
the said Peter Dow 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) Depression
Abstraction, taciturnity.

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Was observed from depression of
Spirits for two or three months — that
he attempted his life this morning with a razor
As related by his Brother (SIGNED) *Name and Medical Designation,* James Aitchison M.D.

Place of Abode, Creighton House

DATED this day of one thousand eight
hundred and

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 Mr Peter Dow is a (1) person of unsound mind, hereby further certify that the Case of the said Peter Dow is One of Emergency, and I recommend the immediate removal of the said Peter Dow to an Asylum accordingly.

Name, Edward H. Dickson M.D.

Place of Abode, Lochmaben

DATED this twenty fifth day of February one thousand eight hundred and fifty nine

(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 Kennedy (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Samuel Parish Certificates under the hands of Wm. E. G. C. Dickson and Jane [illegible] Tweedie, 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 Dow Shoemaker Lochmaben and that the said Peter Dow 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 Peter Dow as a Patient into the (6) Public Asylum of Crichton Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Peter Dow which accompanied the said Petition.

(SIGNED) A. Kennedy

DATED this twenty sixth day of February one thousand eight hundred and fifty nine years

To the Superintendent of the (7) Public

Asylum of Crichton Royal 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.

f 23
Wm. Peter Dow
25/2/59

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) Stewart of the (2) Stewarbry of Kirkcudbright *and his Substitutes,*—

The Petition of Robert Geddes Senior Kelton Mill

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Geddes Junior 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 Geddes Junior to the Lunatic Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Robert Geddes

(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 February one thousand eight hundred and fifty nine 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 Geddes
2. Sex and Age,	male—thirty one Years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	a travelling Boyd in England
5. Religious Persuasion, so far as known,	a Protestant
6. Previous Place of Abode,	of Portobello Liverpool in Rhonehouse near Castletonglas
7. Place where Found and Examined,	about 3 weeks
8. Length of time Insane,	the first Attack
9. Whether first Attack,	Eight months
10. Age (if known) on first Attack,	31 years
11. When and where previously under Examination and Treatment,	Dr Anderson Castledouglas & Dudley about 2 weeks
12. Duration of existing Attack,	Drinking was doubtless the occasion
13. Supposed Cause,	Several of them
14. Whether subject to Epilepsy,	never but run away twice
15. Whether Suicidal,	not at all
16. Whether Dangerous to others,	~~the Parish of Kelton~~
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Robt Geddes Father Kelton Mill Castledouglas
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,	none but Elizabeth Copland as a Cousin
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	that You have under your Charge he has been a very Irregular Lad all his 3 or 4 years

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

(SIGNED)* *Name,* Robert Geddes

DATED this 25 day of February one thousand eight hundred and 59

* 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.*

I, the undersigned, Patrick Anderson 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) Rhonehouse in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Robert Geddes, Gate a Trades Labourer, at present residing at Rhonehouse and that the said Robert Geddes 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself; (6) He labours under various delusions, and is totally incapable of giving a rational or connected answer to any question put to 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,* Patk. Anderson L.R.C.S.

Place of Abode, Castle Douglas

DATED this Twenty fourth day of February One thousand eight hundred and fifty nine.

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.*

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) Rhonehouse in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Robert Geddes, at present residing at Rhonehouse and that the said Robert Geddes 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Labours under delusions, quite incoherent in his statements, incapable of answering any question whatever; talks incessantly in a manner perfectly absurd & unintelligible

(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,* James Laidlaw, L.R.C.S.

Place of Abode, Castle Douglas

DATED this Twenty fourth day of February one thousand eight hundred and fifty nine.

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 Robert Geddes Junior is a (1) a person of unsound mind, hereby further certify that the Case of the said Robert Geddes Junior is One of Emergency, and I recommend the immediate removal of the said Robert Geddes Junior to an Asylum accordingly.

Name, Robert Geddes Anderson L.R.C.S.Edin.

Place of Abode, Rhonehouse

DATED this 25 day of February one thousand eight ~~hundred and 59~~ hundred and fifty nine

(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 Agnew Dinwiddie (1) Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Robert Geddes Senior, Rhone house Robert Anderson and James Anderson Certificates under the hands of ~~two~~ Surgeons, 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 Geddes Junior and that the said Robert Geddes 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 Robert Geddes Junior as a Patient into the ~~Southern~~ Counties Asylum of Dumfries and I authorise ~~his~~ Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Robert Geddes Junior which accompanied the said Petition.

(SIGNED) W R Dinwiddie Steward Substitute

DATED this Twenty fifth day of February one thousand eight hundred and Sixty Nine

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

MEDICAL CERTIFICATE, No. II.

cian or Surgeon

I, the undersigned, being a (1) Physician and Surgeon, and being in actual practice as such, do hereby certify, on soul and conscience, that I have this day visited and personally examined Joseph Turnbull Lunatic Pauper at present a patient in Rhins of Galloway Poor House, and that, for the reasons subjoined, I consider the Poor House an unsuitable place for the Care and Treatment of the said Joseph Turnbull

Reasons. He is generally speaking quiet and docile but at times he is unruly and occasionally even outrageous. and there being no regular arrangements for treating such Lunatic Patients in the Poor House

(SIGNED) Robt Wilson Surgeon

DATED at Stranraer this Twelfth day of February One thousand eight hundred and fifty nine.

CERTIFICATE OF INTIMATION.

erator-fiscal or Com- e in Lunacy. eriff or Steward.

I, (5) ——— hereby certify that intimation of an intended application to the (2) Sheriff of Wigtownshire for the transfer of Joseph Turnbull from the (3) Rhins of Galloway Poor House to the (4) Asylum at Dumfries (Royal Institution)

ylum or House. ylum or House.

erty by whom or at was given to (5) Malcolm M. Farlane Inspector of Poor for Lunacy

instance the patient was nder Treatment, or (if ety be dead or cannot If nearest known rela- Patient.

on the Fourth day of February 1859 Joseph Turnbull was sent to the Rhins Poor House at my instance As the Procurator Fiscal thinks it unnecessary to Dispatch this Intimation

(SIGNED) Mr M Farlane Inspector of Poor

DATED at Stranraer this Fourth day of February One thousand eight hundred and Fifty Nine.

ORDER FOR REMOVAL.

COUNTY HALL. Wigtown

THE Sheriff Substitute of the County of Wigtown having considered the foregoing Petition and relative Certificates, grants order for the removal of the said Joseph Turnbull from the Rhins of Galloway Poor House to the Crichton Royal Institution at Dumfries

(SIGNED)

DATED this twenty second day of February One thousand eight hundred and fifty nine

Thos H Murray

20 & 21 *Vict., Cap.* 71, *Sec.* 91.

PETITION TO THE SHERIFF FOR THE TRANSFER OF A PATIENT.

Unto the Honourable the (1) Sheriff of the (2) County of Wigtown

(1) Sheriff or Steward, Sheriff or Steward-substitute, or Clerk or Stewartry.

The Petition of Malcolm M'Farlane Inspector of Poor for the

humbly sheweth, that it appears from the following Medical Certificates by Mr. Wilson Senior and Junior formerly Surgeon, R.N. Stranraer

and [illegible] that (2) the Rhins Poor House is an unsuitable place for the Care and Treatment of Joseph Turnbull

(2) Name of Asylum or House.

and that it further appears from the accompanying Certificate by that intimation of this application has been given to (3) Mr. M'Farlane Inspector of Poor

(3) Party by whom or whose instance the Lunatic was confined, or (if such Party be dead or cannot be found) the nearest known relative.

May it therefore please your Lordship to grant an Order for the Removal of the said Joseph Turnbull from the Rhins Poor House to Dumfries Asylume (The Crichton Royal Institution)

(SIGNED) Mr. M'Farlane Inspector of Poor for Leswalt

DATED at Stranraer this Twelfth day of February One thousand eight hundred and Fifty Nine.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, being a (1) Surgeon and being in actual practice as such, do hereby certify, on soul and conscience, that I have this day visited and personally examined Joseph Turnbull at present a patient in Rhins Poor House, and that, for the reasons subjoined, I consider ~~[illegible]~~ the Poor House an unsuitable place for the Care and Treatment of the said Joseph Turnbull a Lunatic Pauper.

(1) Physician or Surgeon.

Reasons. There is no proper attendance for patient in his state of mind

(SIGNED) Robert Wilson Sen. Surgn.

DATED at Stranraer this Twelfth day of February One thousand eight hundred and Fifty Nine

20 & 21 *Vict., Cap.* 71, *Sect.* 84.

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 Mary Ann Wilson Spouse of John Hunt Riswick Cumberland humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mr Joseph Wilson 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 Mr Joseph Wilson to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Mary Anne Wilson

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

DATED this 4th (3) day of March one thousand 859.

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 Wilson
2. Sex and Age,	Male 41
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Draper
5. Religious Persuasion, so far as known,	Episcopal
6. Previous Place of Abode,	Riswick Cumberland
7. Place where Found and Examined,	Asylum Cumberland
8. Length of time Insane,	twelve months
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	40
11. When and where previously under Examination and Treatment,	Crichton Royal Institution
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	yes
16. Whether Dangerous to others,	Destructive
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,	Mrs Wilson Riswick wife of Patient. Father committed Suicide
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,* Mary Anne Wilson

DATED this 4th day of March one thousand eight hundred and 59.

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1260.

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 Eliot being a (1) Member of the Royal College Surgeons England and being in actual practice as a (2) Surgeon at Aspatria hereby certify, on soul and conscience, that I have this day, at (3) Aspatria Main Street Keswick, the house not numbered in the County of Cumberland separately from any other Medical Practitioner visited and personally examined (4) Mr Joseph Wilson Draper, Main Street Keswick and that the said Mr Joseph Wilson is of (5) 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) Imbecility, from the slow & defective state of mind indicated in his indifferent way in appreciating the bearing of questions, and in giving answers thereto; together with the general demeanor.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) He has fancied Mutton & be dogs flesh, & wants not to that the House was on fire; that some one was going murder his Mother. & Poison his Children also. Similar delusions & others which need not be specified

(SIGNED) *Name and Medical Designation,* Geo Eliot Surgeon

Place of Abode, Aspatria

DATED this second day of March One thousand eight hundred and Fifty Nine

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, Edward Wilkinson being a (1) Member of the Royal College of Surgeons & Member of the Apothecaries' Hall London and being in actual practice as a (2) a General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) Aspatria in the County of Cumberland separately from any other Medical Practitioner visited and personally examined (4) Mr Joseph Wilson Keswick and that the said Joseph Wilson is a (5) Pauper 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 Imbecility of mind; no disposition to answer any questions put to him by myself; & general imbecility of demeanour.

2. Other facts (if any) indicating Insanity communicated to me by others. (7) He eat dinner the day I saw him; he has fancied mutton to be dogs flesh & would not eat it; that the house was on fire; that some one was going to murder & poison his children & many similar delusions

(SIGNED) *Name and Medical Designation,* Ed Wilkinson

Place of Abode, Aspatria

DATED this 2nd day of March one thousand eight hundred and fifty nine

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 Falconer Yolter (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Mary Anne Wilson St. John Street, Keswick, Cumberland Certificates under the hands of George Elliot and Edward Wilkinson, 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 Wilson, Draper, Keswick and that the said Joseph 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 Joseph Wilson as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Joseph Wilson which accompanied the said Petition.

(SIGNED) John F Yolter

DATED this Sixth day of March one thousand eight hundred and fifty nine years

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.

824

Pa Joseph Wilson

2/3/59

20 & 21 *Vict., Cap.* 71, *Sect.* 84.

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 Gibson Muirhead Old Cumnock

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Elizabeth Murdoch or Gibson 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 Elizabeth Murdoch or Gibson to the Dumfries & Galloway Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Gibson

(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 March one thousand eight hundred and 59.

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 Murdoch or Gibson
2. Sex and Age,	Female; 28 years. Age
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	Miners wife; farm servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	
7. Place where Found and Examined,	
8. Length of time Insane,	Nine days
9. Whether first Attack,	Had an attack Six years ago
10. Age (if known) on first Attack,	22 years
11. When and where previously under Examination and Treatment,	Cumnock.
12. Duration of existing Attack,	Nine ~~months~~ days
13. Supposed Cause,	Mr Moore
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. 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 Gibson Mines Cumnock Husband Uncle nervous and 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 Gibson

DATED this 1st day of March one thousand eight hundred and 59.

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1250.

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.*

I, the undersigned, Licentiate of the Roy... being a (1) 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) Townhead of Cumm... Elizabeth Murdoch or Gibson in the Coun... Aged. separately from any other Medical Practitio...

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

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

visited and personally examined (4) Elizabeth Gibson Poor... Old Cummock. Murdoch's wife and the said Elizabeth Gibson is a (5) Lunati... 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) Her conversa... 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) Attempted to destroy her husba... and family

(SIGNED) *Name and Medical Designation,* James Lawrence ...

Place of Abode, Cummock

DATED this 1st day of March One thousand ... hundred and 59

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.*

I, the undersigned, James Aitchison M... 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) Dr Mitchi... Lunatic Asylum Dumfries in the Count... Dumfries separately from any other Medical Practitio...

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

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

visited and personally examined (4) Mrs Elizabeth Murdoch or Gibson Pauper wife and the said Elizabeth Murdoch or Gibson 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 follo... grounds, viz.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Excitement incoherence and delusions

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Attempted to murder her husband and family as stated by her attendant

(SIGNED) *Name and Medical Designation,* James Aitchison M...

Place of Abode, Crichton House

DATED this Second day of March one thousand ... hundred and fifty nine.

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 Elizabeth Murdoch or Gibson is a (1) Lunatic hereby further certify that the Case of the said Elizabeth Gibson is One of Emergency, and I recommend the immediate removal of the said ~~Person~~ Elizabeth Gibson to an Asylum accordingly.

Name, James Lawrence

Place of Abode, Cummock

Dated this 1st day of March one thousand eight hundred and 59.

(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) John Gibson Townhead Old Cummock Certificates under the hands of James Lawrence 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) Elizabeth Murdoch or Gibson wife of Robert and that the said Elizabeth Murdoch or 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 Elizabeth Murdoch or Gibson as a Patient into the (6) Public Asylum of Southern Counties 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 Elizabeth Murdoch or Gibson which accompanied the said Petition.

(SIGNED) John P Trotter

Dated this Second day of March one thousand eight hundred and fifty nine 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.

686

Elizabeth Murdock
to Jackson

1/3/69

685

Rachel Hyslop or Murray

4/3/69

Mar. 1918.

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 or Shire *of* Roxburgh *and his Substitutes,—*

The Petition of Robert Murray

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Rachel Hislop or Murray 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 Rachel Hislop or Murray to the Public Southern Counties' Asylum, Dumfries and to sanction her admission into the said Asylum.

(SIGNED) Robert Murray

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

DATED this second (3) day of March one thousand eight hundred and fifty nine.

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,	Rachel Hislop or Murray.
2. Sex and Age,	Female. 39 years of age
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Wife of a Shepherd
5. Religious Persuasion, so far as known,	Member of Church of Scotland
6. Previous Place of Abode,	Farm of Castleton Roxburghshire
7. Place where Found and Examined,	Do Do Do
8. Length of time Insane,	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,	Three months
13. Supposed Cause,	Irregularity of Menstruation & Spinal Complaint.
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,	
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,	Robert Murray Shepherd, Husband. Castleton. 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,* Robert Murray

DATED this second day of March one thousand eight hundred and fifty nine.

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1250.

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.*

I, the undersigned, ~~Jm Murray~~ being a (1) Member of the Royal Coll[ege] of Surgeons in Edinburgh and being in actual practice as a (2) Surgeon Hawick hereby certify, on soul and conscience, that I have this day, at (3) Roxburgh in the County separately from any other Medical Practitioner

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

visited and personally examined (4) Rachel Murray and

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

the said Rachel Murray 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) by her refusing home and complaints of starvation by her friends

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) she conceals dangerous weapons about her person.

(SIGNED) *Name and Medical Designation,* ~~Jm Murray~~ Surgeon

Place of Abode, Hawick

DATED this Second day of March One thousand eight hundred and ~~Fifty~~ Fifty nine

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.*

I, the undersigned, Thomas C Taylor being a (1) Member of the Royal College of Surgeons Edinburgh Qualified by Medical Registration Act 18[illegible] and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Castleton Parish of Castleton in the County of Roxburgh separately from any other Medical Practitioner

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

visited and personally examined (4) Rachel Hyslop or Murray and

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

the said Rachel Murray 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 her conversation & hurried manner in answering questions. Constantly moving of her eyes when strangers are present. & complaints of her being very wicked and unfit to live.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) By her attempting to take away her life & concealing dangerous weapons about her to take away her life

(SIGNED) *Name and Medical Designation,* Thomas C Taylor Surgeon

Place of Abode, Castleton

DATED this Second day of March One thousand eight hundred and Fifty nine

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 Oliver Rutherfurd Esq (1) Sheriff

of the (2) County of Roxburgh

having had produced to me, with a Petition at the instance of (3) Robert Murray Shepherd Casbolme

Certificates under the hands of William Murray Surgeon

and Thomas C. Taylor 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) Rachel Hyslop or Murray Wife of the said Robert Murray and that the said Rachel Hyslop or Murray is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Rachel Hyslop or Murray as a Patient into the (6) Public Southern ~~England~~ Counties Asylum Dumfries and I authorise for Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Rachel Hyslop or Murray which accompanied the said Petition. two words delete

(SIGNED) Wm Oliver Rutherfurd

DATED this third day of March one thousand eight hundred and fifty nine

To the Superintendent of the (7)

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, or Private.
(7) Public, District, 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) County of Dumfries, and his Substitutes,

The Petition of William Culbertson, Inkeeper, Annan

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Joseph Oliver, his stepson,

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 Oliver to the Southern Counties Lunatic Asylum, Dumfries, and to sanction his admission into the said Asylum.

(SIGNED) Wm Culbertson

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

DATED this seventh (3) day of March one thousand eight hundred and fifty nine.

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 Oliver
2. Sex and Age,	Male, and is twenty nine years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	a discharged Artillerayman, & a printing office.
5. Religious Persuasion, so far as known,	United Presbyterian
6. ~~Previous~~ Place of Abode,	Annan
7. Place where ~~Found and~~ Examined,	Do
8. Length of time Insane,	Ten or twelve years
9. Whether first Attack,	First attack
10. Age (if known) on first Attack,	16 years
11. When and where previously under Examination and Treatment,	At home
12. Duration of existing Attack,	13 years
13. Supposed Cause,	
14. Whether subject to Epilepsy,	yes.
15. Whether Suicidal,	yes.
16. Whether Dangerous to others,	Of a mild and amiable disposition except when under the influence of drink.
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,	Jane M. Culbertson Sister Annan
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	

He has lately been occasionally occupied He was discharged with a pension for nine months for "general debility." He was six years in the army during which time he was stationed at Corfu

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

(SIGNED)* *Name*, Wm Culbertson

DATED this seventh day of March one thousand eight hundred and fifty nine.

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1200.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, Wm Macfarlane, Surgeon
being a (1)
and being in actual practice as a (2) Surgeon at Annan
hereby certify, on soul and conscience, that I have this day, at (3) High Street
of Annan, House not numbered, in the County of Dumfries
separately from any other Medical Practitioner
visited and personally examined (4) Joseph Oliver, High Street, Painter, not a Pauper
and that the said Joseph Oliver 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.:—

1. Facts indicating Insanity observed by myself: (6) Suffering from Delirium and Mental Illusions, and a tempting to commit suicide by strangling in which he had nearly succeeded

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Has made four attempts to commit suicide and has frequently hinted that he would try the attempt the last time on Sunday last

(SIGNED) Name and Medical Designation, Wm Macfarlane Surgeon

Place of Abode, Wellington Street, Annan

DATED this twenty second day of February one thousand eight hundred and fifty nine

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

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

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

(4) *Insert 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 Ewart
being a (1) Licentiate of the Royal College of Surgeons in Edinburgh
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) High Street, Annan
in the County of Dumfries
separately from any other Medical Practitioner
visited and personally examined (4) Joseph Oliver
and that the said Joseph Oliver 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.:—

1. Facts indicating Insanity observed by myself: (6) His general appearance, improper talk and actions, and his out of the way behaviour.

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Stepfather & Mother state that he has made different attempts to destroy himself, has frequently disposed of his effects to evade creditors

(SIGNED) Name and Medical Designation, Wm Ewart Surgeon

Place of Abode, Edward Street, Annan

DATED this twenty second day of February one thousand eight hundred and fifty nine

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

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

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

(4) *Insert 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. 1., hereto annexed, to the effect that Joseph Oliver is a (1) of unsound Mind hereby further certify that the Case of the said Joseph Oliver is One of Emergency, and I recommend the immediate removal of the said Joseph Oliver to an Asylum accordingly.

Name. Henry Macfarlane

Place of Abode, Inman

DATED this 22d day of February one thousand eight hundred and 59

(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 Stevenson Cotter (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Cuthbertson bookseller Annan Certificates under the hands of Henry Macfarlane, Surgeon R.N. and William Ewart, Surgeon Annan, 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 Joseph Oliver in Annan, stepson of the petitioner and that the said Joseph Oliver is (5) of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Joseph Oliver as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Joseph Oliver which accompanied the said Petition.

(SIGNED) J Stevenson Cotter

DATED this Seventh day of March one thousand eight hundred and fifty nine

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.

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. Isle or Stewartry.

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

The Petition of Alexander Newrison, Inspector of Poor Norton humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Joseph McCaig in Thornhill 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 McCaig to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Alex. Newrison

The date of the ion must be within teen clear days ing the dates of dical Certifi-

DATED this Ninth (3) day of March one thousand eight hundred and Fifty Nine 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,	Joseph McCaig
Sex and Age,	Male 48 — M
Married, Single, or Widowed,	married
Condition of Life, and previous Occupation (if any),	Hosier & labourer, well behaved
Religious Persuasion, so far as known,	Presbyterian
Previous Place of Abode,	Thornhill
Place where Found and Examined,	Do
Length of time Insane,	About 10 days
Whether first Attack,	First
Age (if known) on first Attack,	48
When and where previously under Examination and Treatment,	not
Duration of existing Attack,	about 10 days
Supposed Cause,	Disease of Brain
Whether subject to Epilepsy,	not
Whether Suicidal,	not
Whether Dangerous to others,	Has no homicidal or Amaurosis
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Morton
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,	1st wife — Mrs Joseph McCaig 80 Drumlanrig Street Thornhill 2nd None — father living a hale old man
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)[6] *Name,* Alex. Newrison

DATED this 9 day of March one thousand eight hundred and 59

* 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, Andrew Brechin Cheyne being a (1) Doctor of Medicine of the University Edinb. & a Licentiate of the Royal College of Physicians Edinb. 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 of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Joseph M'Cairy and the said Joseph M'Cairy 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 cannot say that Mr Cairy has any day by day forgot his Surname as he is always pleasant before me — Mrs Cairy informed him today & mentioned friendly & courteous singing, that he would not in the habit of doing when he makes previous attacks — He is a Labourer, for two years has been [illegible] arising from disease of Brain.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Both wife & Mrs Cairy confirm statements of the above. Mrs Cairy tells me he is also talking about an enormous fortune he has but life, as also that he has been previously attended by a Mental Surgeon in Glasgow — She also says that he talked [illegible] about [illegible] & [illegible] in the [illegible]

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

Place of Abode, Thornhill

DATED this twenty day of March One thousand eight hundred and fifty nine.

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 Boyle Emerson being a (1) Licentiate of the Royal College of Edinburgh and being in actual practice as a (2) Surgeon Thornhill Dumfries hereby certify, on soul and conscience, that I have this day, at (3) in the County of separately from any other Medical Practitioner, visited and personally examined (4) Joseph M'Cairy and the said Joseph M'Cairy 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) He labours under delusions of greatness, thus he supposes a Castle, has a thousand pounds, has numerous [illegible] of money, he has relieved every case of distress and has bestowed on his friends vast sums of money, he offers to give five hundred pounds a present, and tells his wife to pay the money when it does not pay, with his present delusions which have always the prevailing he is undoubtedly in both eyes, quite blind, and has presented for the last eight months symptoms of progressive disease of the brain. He speaks about his delusions freely when spoken to, and has no reserve, he speaks also about his dreams but distinguishes them from his delusions.

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) His wife, father and other relatives speaks to his delusions, and as to the difficulty of controuling him when acting under impulse.

(SIGNED) *Name and Medical Designation,* T. B. Emerson L.R.C.P.

Place of Abode Thornhill

DATED this eighth day of March one thousand eight hundred and fifty nine.

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 Stevenson Rotter (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Alexander Stevenson, Inspector of Poor, Moffat
Certificates under the hands of Andrew C. Robertson
and Thomas B. 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)
Joseph McCaig, a pauper and that the said
Joseph McCaig is a (5) Lunatic and of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Joseph McCaig as a Patient into the (6) Public Asylum of Southern Counties 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 Joseph McCaig which accompanied the said Petition.

(SIGNED) John S. Rotter

DATED this Ninth day of March one thousand eight hundred and fifty nine.

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.

689

South Del Cons

Jan. 10th 1859.

10/3/59

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) Shire of Dumfries *and his Substitutes,—*

The Petition of Alexander Newsom Inspector of Poor Morton humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Catherine Duncan 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 Duncan to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Alex Newsom

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

DATED this Ninth (2) day of March one thousand eight hundred and Fifty Nine 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,	Catherine Duncan
Sex and Age,	Female — 29 years
Married, Single, or Widowed,	Single
Condition of Life, and previous Occupation (if any),	Farm servant
Religious Persuasion, so far as known,	Presbyterian
Previous Place of Abode,	Thornhill.
Place where Found and Examined,	Upper Nithsdale Poor House
Length of time Insane,	Reported to me on 4th inst.
Whether first Attack,	see Med Certs No 1
Age (if known) on first Attack,	—
When and where previously under Examination and Treatment,	none
Duration of existing Attack,	some weeks
Supposed Cause,	said to have received a hurt on Crown
Whether subject to Epilepsy,	No
Whether Suicidal,	Has threatened so —
Whether Dangerous to others,	Dangerous see Cert No II
Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Morton
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 Duncan Blacksmith Thornhill is her 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.

(SIGNED)* *Name,* Alex Newsom

DATED this Ninth day of March one thousand eight hundred and Fifty Nine

* 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 B Grierson being a (1) 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) the Kithead Poor House near Thornhill in the County of Dumfriesshire separately from any other Medical Practitioner visited and personally examined (4) Cathern Duncan a Pauper residing in said Poorhouse and the said Cathern Duncan is an (5) unsound of 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 although she answered all the questions I put to her and conversed with me correctly, yet she said when she was angry she could not control the violence of her temper, she said she knew that to give way to passion was wrong, but that she could not help it, she said that at times she felt her head confused and painful, that she was subject to fits of crying & that she was frequently awake until far into the morning, and that then she was troubled with dreams, I have known her for a number of years & believe that she was of unsound mind.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The Matron & Attendants of the Poor House agree stating that at times she is subject to great violence of temper, her Mother told me that about ten years ago she had a bad ailment, that she then "got clean out of Sense" and since then she has never been what she was in mind, she also said that "every body considered a fool" her Mother further told me that she could not trust her to go to Church for fear that she might misbehave, her mother further told me that she was fond of her Children, but had no discretion, that in person she was very neat & that she was simple and that she was a cousin to the Lairds of Logan & Williams.

(SIGNED) Name and Medical Designation, W Grierson L.R.C.

Place of Abode, Thornhill

DATED this Fifth day of March One thousand hundred and fifty nine,

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, Andrew Fletcher Chalmers being a (1) Doctor of medicine of the University of & 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) Upper Poor House Conversation Dumfriesshire in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Catherine Duncan a Pauper in said Poorhouse and the said Catherine Duncan 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 has been under my care for about two years & during that period I always considered her a weak minded person but latterly she has become so violent & outrageous & ungovernable that she was got removed to this Asylum for treatment as a Lunatic accordingly

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

2. Other Facts (if any) indicating Insanity communicated to me by others: Corroboration of the above —

(SIGNED) Name and Medical Designation, Andr. F. Chalmers M.D.

Place of Abode Thornhill

DATED this Seventh day of March one thousand hundred and Fifty Nine —

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 Grotter (2) Sheriff Substitute
of the (3) County of Dumfries
having had produced to me, with a Petition at the instance of (4) Alexander Stevenson Inspector of Poor Wigtown
Certificates under the hands of Thomas B. Gillison
and Andrew C. 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 (5)
Catherine Duncan, a pauper and that the said
Catherine Duncan is a (6) Lunatic and of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Catherine Duncan as a Patient into the (7) 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 Catherine Duncan which accompanied the said Petition.

(SIGNED) John P Grotter

DATED this Ninth day of March one thousand eight hundred and fifty nine years.

To the Superintendent of the (7) Public
Asylum of Southern Counties, 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.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, or Private.
(7) Public, District, or Private.

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Catherine Dimeen

Jan. 12th 1859.

12/3/59

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,*—Kirkmichael

The Petition of Alexander Wylie Superintendent of Poor

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Black 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 Thomas Black to the Southern Counties asylum and to sanction his admission into the said Asylum.

(SIGNED) Alexander Wylie Superintendent of Poor

(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 March one thousand eight hundred and fifty nine.

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 Black
2. Sex and Age,	40 years, Male
3. Married, Single, or Widowed,	Single —
4. Condition of Life, and previous Occupation (if any),	None —
5. Religious Persuasion, so far as known,	None
6. Previous Place of Abode,	Never out of parish.
7. Place where Found and Examined,	Lochhouse. Kirkmichael
8. Length of time Insane,	Since his Birth —
9. Whether first Attack,	— —
10. Age (if known) on first Attack,	Such seems stated since birth
11. When and where previously under Examination and Treatment,	Under Parochial Surgeon
12. Duration of existing Attack,	— —
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,	Parish of Kirkmichael
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 Black, Lochhouse Father — Not known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None that is known

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

(SIGNED)* *Name,* Alexander Wylie Superintendent of Poor

DATED this twenty second day of March one thousand eight hundred and fifty nine years.

* 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.

I, the undersigned, William Scott, being a (1) Graduate of the University of Edin

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

and being in actual practice as a (2) Physician

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

hereby certify, on soul and conscience, that I have this day, at (3) Leith Hos Kirkmichael Dumfries in the Coun of separately from any other Medical Practitio

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

visited and personally examined (4) Thomas Black a Pauper and

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

the said Thomas Black of unsound mind 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Have known him as an Idiot for several years. - Delusions Incoherency

(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 is now becoming violent

(SIGNED) *Name and Medical Designation,* William Scott M.D

Place of Abode, Dumfries

DATED this 21st day of March One thousand eight hundred and 59

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.

I, the undersigned, John Chisholm being a (1) Graduate of the University of Edinburgh

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

and being in actual practice as a (2) Physician

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

hereby certify, on soul and conscience, that I have this day, at (3) Leith Hos Kirkmichael Dumfries in the County of separately from any other Medical Practitio

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

visited and personally examined (4) Thomas Black and

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

the said Thomas Black of unsound mind is a (5) 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)

Delusions — Incoherence — & Want of mental capacity —

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

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

Mother informs me that she has no Control over him —

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

Place of Abode, Burnbank Head - Dumf

DATED this 21st day of March one thousand eight hundred and 59

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, Alexander Hannay (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) James Kyle,
Inspector of Poor, Kirkmichael
Certificates under the hands of William Scott
and John Chisholm, 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 Black, a pauper and that the said
Thomas Black 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 Black as a Patient into the (6) Public Asylum of Southern Counties and I authorise this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Thomas Black which accompanied the said Petition.

(SIGNED) A. Hannay

DATED this twenty second day of March one thousand eight hundred and fifty nine 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.

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 of the (2) Stew: artry of Kirkcudbright *and his Substitutes,—*

The Petition of Richard Nevat

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Beattie or Shaw wife of William Shaw 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 Beattie or Shaw to the Southern counties Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) Rich. Nevat, Inspector of Poor Kelton

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

DATED this Nineteenth (3) day of March one thousand eight hundred and fifty nine 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,	Janet Beattie or Shaw
2. Sex and Age,	Female - 60
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	A Tailors Wife, no occupation
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Castledouglas
7. Place where Found and Examined,	Castledouglas
8. Length of time Insane,	Unknown
9. Whether first Attack,	Not Known
10. Age (if known) on first Attack,	Unknown
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Unknown
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No so far as known
16. Whether Dangerous to others,	No so far as known
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kelton in the meantime
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 Shaw husband - Deserted patient about 4 weeks ago and it is not known where he is or whether any Member of family been ever 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,* Rich Nevat

DATED this Nineteenth day of March one thousand eight hundred and fifty nine years -

* 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, James Laidlaw 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) Carling Hill, Castle Douglas in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Mrs Shaw a Pauper, residing at Carling Wark Hill, Castle Douglas and that the said Mrs Shaw 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) The labours under delusions – a leading one being, that certain persons have stolen from her a piece of money & deposited it in the foundation-stone of a place of Worship. She also believes that strange beings are continually rising out of the earth & conversing

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She considers herself to be one of the brightest scholars of the age, that she converses familiarly with the Supreme Being. He speaks to her in an audible voice – She believes she has exchanged words with his Satanic majesty & that

(SIGNED) Name and Medical Designation, James Laidlaw, L.R.C.S.

Place of Abode, Castle Douglas

DATED this fourteenth day of March One thousand eight hundred and fifty nine.

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 Emerson 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) Carlinwark Hill Castle Douglas in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Mrs Shaw a Pauper residing at Carlinwark Hill and that the said Mrs 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) She informed me that her mother had given her a piece of money, called a South sea shilling, with a cross on one side, & that the Bank might give it away in charity for a penance that it got into the possession of a gentleman who put it in the foundation stone of the New Chapel, and that the Devil has followed her ever since. She continues to be of the opinion that she lost the piece of money by a certain person, who she says loved her, and with much gesticulation, using very obscene & offensive language, which she calls talking the truth. She entertains a most unjust opinion against the people about her – that they are in a conspiracy against her – the neighbours form constantly the subjects of her conversation

(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, Patk. Emerson L.R.C.S.E.

Place of Abode, Castle Douglas

DATED this fourteenth day of March one thousand eight hundred and fifty nine

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 Macneill Dunbar (1) Esquire, Steward Substitute of the (2) Stewartry of Kirkcudbright, having had produced to me, with a Petition at the instance of (3) Richard Howat, Inspector of Poor, of the Parish of Kelton, Certificates under the hands of James Paddlaw, and Patrick 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) Janet Beattie or Shaw, a pauper, and that the said Janet Beattie or Shaw 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 Beattie or Shaw as a Patient into the (6) Southern Counties Asylum of 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 Beattie or Shaw which accompanied the said Petition.

(SIGNED) W. M. Dunbar Steward Substitute

DATED this twenty first day of March one thousand eight hundred and fifty nine years.

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.

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Sarah Beattie or Shaw

24/8/69

Petition

to

The Inspectors of Poor

Relief

for

Removal of a Pauper

Sarah Beattie or Shaw from the

Asylum.

1869

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 Catherine Watson Moffat Langholm

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Kerr 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 Jane Kerr to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Catherine Watt

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

DATED this twenty eighth (*) day of March one thousand eight hundred and fifty nine

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 57
3. Married, Single, or Widowed,	Unmarried
4. Condition of Life, and previous Occupation (if any),	Dressmaker
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	
7. Place where Found and Examined,	Langholm
8. Length of time Insane,	About a fortnight
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,	Strikes
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,	Catherine Watt Sister Langholm
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,* Catherine Watt

DATED this twenty eighth day of March one thousand eight hundred and fifty nine.

* 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, William Kay a Licentiate
being a (1) 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) High St.
Sanquhar
Dumfries
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Jane Kerr Prisoner
High St. Sanquhar
and
the said Jane Kerr 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) great general excitement, incoherency in speech she is a lady and in low circumstances a pretty gentleman

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Each Parishioner to the above as stated by her attendant

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

Place of Abode, Sanquhar

DATED this 28th day of March One thousand eight hundred and Fifty-Nine

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 Gilchrist M.D.
being a (1) Graduate of 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) Crichton Royal Institution Dumfries
Dumfries
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Jane Kerr Prisoner
High Street Sanquhar
and
the said Miss 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Great and constant excitement, wildness and incoherence

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Labouring under the delusion that she is about to be Married

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crichton Royal Dumfries

DATED this Twenty Seventh day of March one thousand eight hundred and Fifty Nine

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 Ker is a (1) person of Unsound Mind hereby further certify that the Case of the said Jane Ker is One of Emergency, and I recommend the immediate removal of the said Jane Ker to an Asylum accordingly.

Name, William Kay Lingan

Place of Abode, Langholm

DATED this 28th day of March one thousand eight hundred and Fifty-Nine

(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 Peterkin Carruthers (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Catharine Wall residing in Moffat William Kay Certificates under the hands of 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 Ker, Dressmaker High street Langholm and that the said Jane Ker is a (5) person of unsound mind and a proper Person to be detained and taken care of, no HEREBY AUTHORIZE you to receive the said Jane Ker 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 Jane Ker which accompanied the said Petition.

(SIGNED) John P Carruthers

DATED this 29th day of March one thousand eight hundred and fifty nine

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.

£25
Bishop Lands Norw.
28/3/59

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 Walker of the Commercial Bank Edinburgh humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Walker of Edinburgh, 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 Jane Walker to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) Wm Walker

(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 March one thousand eight hundred and Fifty Nine

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 Walker
2. Sex and Age,	Female. aged 40
3. Married, Single, or Widowed,	Unmarried
4. Condition of Life, and previous Occupation (if any),	Lady. No occupation
5. Religious Persuasion, so far as known,	Established Presbyterian church
6. Previous Place of Abode,	19. Heriots Street Edinburgh
7. Place where Found and Examined,	Commercial Hotel. Dumfries
8. Length of time Insane,	For 4 weeks.
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	40.
11. When and where previously under Examination and Treatment,	None before in an Asylum
12. Duration of existing Attack,	For 4 weeks
13. Supposed Cause,	Unexpected Affliction
14. Whether subject to Epilepsy,	Never.
15. Whether Suicidal,	None exhibited any such tendency
16. Whether Dangerous to others,	Yes.
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,	John Walker, 19. Heriots Street Edinburgh. Her Father. A sister of her grandmother was eccentric
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,* Wm Walker

DATED this 29th day of March one thousand eight hundred and Fifty Nine

* 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, Wm Scott Carmichael being a (1) Member of the Royal College of Surgeons in Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Commercial Hotel, Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mrs Jane Nelson of 19 Melville Street Edinburgh and the said Jane Nelson 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 regarding her marriage with person in Dundreich also moral insanity.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Confirmation of the above by three years repeated acts of violence & mischief and indecent behaviour

(SIGNED) *Name and Medical Designation,* Wm S. Carmichael M. R. C. S. E.

Place of Abode, 22 Northumberland St

DATED this twenty ninth day of March One thousand eight hundred and fifty nine 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 Graduate of the University being a (1) 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) the Commercial Hotel Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mrs Jane Nelson and the said Jane Nelson 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 as to her marriage with Dennis Anderson & the says she is married a Spiritual light.

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Dr Carmichael her medical attendant corroborates my above — she has deep and apathetic her nearest friends

(SIGNED) *Name and Medical Designation,* William Scott M.

Place of Abode, Dumfries

DATED this 29th day of March one thousand eight hundred and 59

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, Mr. Adam Rolland (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Watson of the Commercial Bank Edinburgh Certificates under the hands of William Scott Carmichael Surgeon Edinburgh and William Scott M.D. Dumfries, 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 Watson of Edinburgh petitioners sister and that the said Jane 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 Jane Watson 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 Jane Watson which accompanied the said Petition.

(SIGNED) Wm. Rolland

DATED this Twenty ninth day of March one thousand eight hundred and fifty three years

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.

f26

Mrs Jane Watson

29/3/59

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 David Hogg - Weaver in Thornhill humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that my son David Hogg — 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 Hogg ——— to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) David Hogg

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

DATED this 28th — (3) 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.

1. Christian Name and Surname of Patient at length,	David Hogg
2. Sex and Age,	Male - Twenty Four years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Student
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Thornhill
7. Place where Found and Examined,	Thornhill
8. Length of time Insane,	Six years
9. Whether first Attack,	First
10. Age (if known) on first Attack,	18
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
12. Duration of existing Attack,	Six years
13. Supposed Cause,	Disease of brain
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Dangerous
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,	David Hogg - Back Street - Thornhill. Father — none on either father's or mothers side
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,* David Hogg

DATED this 28th day of March one thousand eight hundred and 59

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1260.

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.*

I, the undersigned, Andrew Crichton Clement being a (1) Doctor of Medicine of the University of Edinburgh & Licentiate 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) Thornhill in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) David Hogg and 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6)
He is Silent & Sullen - Will not answer questions & has all the appearance of one suffering from decline of Brain, & decay of intellect.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Had Father tells me that he is perfectly Sleepy - says although he will not answer questions that he is doing in this Parish constantly talking & muttering to himself -

(SIGNED) *Name and Medical Designation,* Andrew C. Clement

Place of Abode, Thornhill

DATED this 27th day of March One thousand eight hundred and fifty nine.

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.*

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 of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) David Hogg residing in Thornhill and the said David Hogg 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6)
That he is unable to understand and reason and that his actions seem to be impulsive without the guidance of reason or understanding.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
That he can in no way be trusted to take care of himself. He does not ask for food but takes it when it is given to him. When he is hungry or when he is suffering from any uneasiness he is apt to become furious and without discrimination would injure persons or property.

(SIGNED) *Name and Medical Designation,* W. Grierson L.R.C.S.E.

Place of Abode, Thornhill

DATED this 26th day of March one thousand eight hundred and fifty nine

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, Wm Peterson Trotter (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) David Rogg residing in Back Street of Thornhill Certificates under the hands of Andrew C. Chalmers and Thomas B Murdoch, 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 Rogg Student son of Petitioner and that the said David Rogg is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said David Rogg as a Patient into the (6) Public Asylum of Southern Counties and I authorise this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said David Rogg which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this Twenty ninth day of March one thousand eight hundred and fifty nine 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.

David Hoff.
Mar 29th 1859

693
David Hoff
29/3/59

CRICHTON ROYAL INSTITUTION.

Paupers Department.

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 Terreglea.
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., } Treasurers.
S. ADAMSON, Esq., }

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.	Age 23, son of a labouring man; received a good education at School
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	Cause unknown.
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.?	Slight depression of spirits was observed for some short time when one day he fell down in what is said to have been a fit, that upon recovering from the fit which he did in a short time that he was ad was ever after insane.
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?	Not subject to epilepsy or any other ailment
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?	Unable to understand and reason and his actions, impulsive; not dependent upon reason or understanding. Change that have taken place seem only to have been of degree; ailment is on the increase. He seems to have lost the understanding of reason, external senses seem all perfect appetite said to be good.
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.	
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?	See answer to 2 and 5. It is about five years since he first ailed.
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?	See answer to 5 He is quieter at night than during the day.
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	No
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thought excited by any particular subject or event?	Blindly he would injure person or property, but does not seem to reveal upon it or understand what he does, but it is during excitement that he withdraws any recollection of the past as is disposed to speak.
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 prominent propensity, or tendency to crime?	Not that I am aware of
12. What treatment has been resorted to, for what length of time, and with what success?	For 14 months treated in the Southern Counties Asylum, with little or no success Treatment at home, no success
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	About 5 years; has been in the Southern Counties Asylum

W. Griffiths

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 Alexander Young P.F.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Christopher Johnston 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 Christopher Johnston to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Alex Young P.F.

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

DATED this First (3) day of April one thousand eight hundred and fifty nine

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,	Christopher Johnston
2. Sex and Age,	Male - 30 -
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	a Pauper on Tropneer & a vagrant formerly a Hawker of small wares
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Moncrieffstown, Tropneer
7. Place where Found and Examined,	Carpet parish - Dumfries
8. Length of time Insane,	not known
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,	
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,	Tropneer parish
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,* Alex Young

DATED this First day of April one thousand eight hundred and fifty nine

* 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, 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 in Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Christopher Johnstone Pauper and the said Christopher 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) His delusions with regard to dream of his nervous system caused by the influence of a fellow traveller, the want of control over his actions - his peculiar expression & manner

(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 says that he is irritable and repeats the above statements

(SIGNED) *Name and Medical Designation,* William Scott M.D.

Place of Abode, Dumfries.

DATED this 31st day of March One thousand eight hundred and 59

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 Smith being a (1) Graduate of the University of Edinb and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) the Prison Dumfries in the County separately from any other Medical Practitioner visited and personally examined (4) Christopher Johnstone Pauper and the said Christopher 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) Admits that at times not quite right in his mind. Has Incoherent delusions. Insane and Conversation peculiar

(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 informs me that he is Demented and had threatened to injure

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

Place of Abode, Dumfries

DATED this 31st day of March one thousand eight hundred and fifty nine 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, Wm Peterkin Potter Sheriff Substitute of the (2) County of Dumfries having had produced to me with a Petition at the instance of (3) Alexander Young Procurator Fiscal Dumfries Certificates under the hands of William Scott and Alexander Batherick, 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) Christopher Armstrong a vagrant pauper and that the said Christopher Armstrong 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 Christopher Armstrong as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Christopher Armstrong which accompanied the said Petition.

(SIGNED) Wm P. Potter

DATED this 2nd day of April one thousand eight hundred and fifty nine

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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Christopher Johnston

1/4/59

20 & 21 *Vict., Cap.* 71, *Sect.* 84.

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 Mitchell, Farmer

of Waterside in the Parish of Dumfries:

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Mitchell 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 Alexander Mitchell to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Mitchell

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

DATED this 7th (3) day of April one thousand eight hundred and 84

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 Mitchell
2. Sex and Age,	Male 24 Years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	has wrought as a Miller latterly upon farm
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Waterside Mains Parish of Kirk
7. Place where Found and Examined,	do
8. Length of time Insane,	has been noticed for weeks
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	24 years
11. When and where previously under Examination and Treatment,	never under treatment before
12. Duration of existing Attack,	10 weeks up to this date
13. Supposed Cause,	reflecting upon not staying with an uncle
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No but not exactly sure
16. Whether Dangerous to others,	No never has shown any
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	not a pauper
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,	Family reside at Waterside Mains No relation of his was 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,* John Mitchell

DATED this 7th day of April one thousand eight hundred and 84

* 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.

I, the undersigned, Thomas Boyle Pearson being a (1) Licentiate of the Royal College of Surgeons of Edinburgh

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

and being in actual practice as a (2) Surgeon

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

hereby certify, on soul and conscience, that I have this day, at (3) Waterside Main of Keir in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Alexander Mitchell, residing at Waterside Main of Keir — and that the said Alexander Mitchell 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) That he expresses that he is beyond ~~the~~ reflecting upon himself and others, that he is in the mercy of God and is overwhelmed with [illegible] becomes excited, and indicates violence to his brother, complaining pain and confusion of head, is sleepless & restless. he knows that his mind is unsound,

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His relations speak as to what I have myself observed as above stated.

(SIGNED) *Name and Medical Designation,* W Pearson M.D.

Place of Abode, Thornhill

DATED this Sixth day of April One thousand eight hundred and fifty nine.

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.

I, the undersigned, John Dalziel M.D., Edin: & Licentiate, ~~being a (1)~~ Royal College of Surgeons there,

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

and being in actual practice as a (2) General Practitioner as Physician

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

hereby certify, on soul and conscience, that I have this day, at (3) Waterside Main Parish of Keir, Dumfries in the County separately from any other Medical Practitioner, visited and personally examined (4) Alexander Mitchell

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

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

and that the said Alexander Mitchell 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) Upon ground of personal appearance ground of operation of the two tumors upon his head.

(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,* John Dalziel M.D.

Place of Abode, Penpont

DATED this sixth day of April one thousand eight hundred and fifty nine

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 Mollet (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Mitchell, Farmer, Waterside Mains, &c.
Certificates under the hands of Thomas B. Grierson
and John Balzell, 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 Mitchell, Petitioners brother and that the said
Alexander Mitchell is a (5) Lunatic & of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Mitchell as a Patient into the (6) Public Asylum of Southern Counties and I authorise you Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Mitchell which accompanied the said Petition.

(SIGNED) John P. Mollet

DATED this Seventh day of April one thousand eight hundred and fifty nine 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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Alex^r Whitehill

7/4/59

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 Stewart. (1) Shire or Stewartry.

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

Glencaple Dumfries The Petition of Janet McKimmell residing at humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Miss Barbara ~~Colthart~~ Colthart My 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 Miss Barbara Colthart to the Crichton Royal Institution and to sanction her admission into the said Asylum.

(SIGNED) Janet McKimmell

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

DATED this Seventh (2) day of April one thousand eight hundred and fifty nine

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 Colthart
2. Sex and Age,	Female 20
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 of Scotland
6. Previous Place of Abode,	London
7. Place where Found and Examined,	Glencaple
8. Length of time Insane,	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,	
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. 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,	Andrew Colthart Brother Dowfort Cummertrees A Cousin 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,* Janet McKimmell

DATED this Seventh day of April one thousand eight hundred and fifty nine

* 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, James Murray McCulloch being a (1) Physician & graduate of the University of Ed
(2) Physician 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) Barbara Coulthard and th
the said Barbara Coulthard 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) Great excitement attempts to strike, moaning, shouting & absolutely incoherent language &c.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) that Jesus Christ was her husband, that God had given to her & that she bore a child to him; great violence & attempts to strike &c

(SIGNED) *Name and Medical Designation,* James M: McCulloch M.

Place of Abode, 38 Castle Street, Dumfries

DATED this 4th day of April One thousand eight hundred and fifty nine 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 Graduate of the University of Edinburgh &c 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) Glencaple
in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Barbara Coulthard and th
the said Barbara Coulthard 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 delusion more and to the power of the souls of others incoherent and in a great state of excitement

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Her niece informs me that she fancies she is married which is not the

(SIGNED) *Name and Medical Designation,* William Scott M

Place of Abode, Dumfries

DATED this 5th day of April one thousand eight hundred and 59

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 is One of Emergency, and I recommend the immediate removal of the said 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 Pelham Scott (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Ismet McKinnell residing at Glencaple, Dumfries Certificates under the hands of Doctors Mundy McCulloch 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) Barbara Coltbart, Cook of Pelthorpe and that the said Barbara Coltbart is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Barbara Coltbart as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise you to Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Barbara Coltbart which accompanied the said Petition.

(SIGNED) John P. Scott

DATED this Eighth day of April one thousand eight hundred and Fifty nine years.

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.

827

Dept Barbara Colbert

8/4/59

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 Lieutenant Macdonald Todd — residence at Morningside House Edinburgh — humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Mary Todd — 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 Mary Todd — to the Royal Charleston Institution — and to sanction his admission into the said Asylum.

(SIGNED) Lieutenant Macdonald Todd —

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

DATED this 8th eighth (3) day of April one thousand eight hundred and fifty nine —

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 Mary Todd
2. Sex and Age,	About fifty seven
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	A Gentlewoman — no occupation
5. Religious Persuasion, so far as known,	Protestant, Episcopalian
6. Previous Place of Abode,	Edinburgh
7. Place where Found and Examined,	Examined at Dumfries where she has been residing for nearly two years —
8. Length of time Insane,	seems to have been coming on gradually for the last two or three months —
9. Whether first Attack,	No.
10. Age (if known) on first Attack,	—
11. When and where previously under Examination and Treatment,	It is believed for a very short time some years ago in an institution near Edinburgh — Craighton Hall, it is thought. —
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. 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,	Lieutenant General Duncan H. Todd, Morningside House, Edinburgh — The other particulars not known —
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,* Lieutenant Macdonald Todd —

DATED this eighth day of April — one thousand eight hundred and fifty nine —

* 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, William Thos Dalby being a (1) Graduate of the Faculty of Physicians and Surgeons Glasgow and Edinr 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 Three Mar Dumfries in the County Dumfries separately from any other Medical Practitione visited and personally examined (4) Mrs Mary Todd and th the said Mrs Todd 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) She gets on her bed and will not allow any t but the Nurse ought always to be kept on her Knees have been torn to Shreds and that the Patient has that at all times liable for any thing she has to be ab

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) M much the same as above

(SIGNED) *Name and Medical Designation,* William Thos Dalby

Place of Abode, Buccleuch Street Dumf

DATED this 8th day of April One thousand eigh hundred and fifty nine 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 Murray McCulloch 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) No 3 Georges S Dumfries in the County Dumfries separately from any other Medical Practitione visited and personally examined (4) Mrs Mary McDonald Todd and tha the said Mary McDonald Todd is a (5) Lunatic and a proper Person to be detaine 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) Lies in bed most of th being out of the bed clothes & cold, eyes wild & agitated looking, says sh born in Heaven & that her mother & her husband were the same, i & impatient &c.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) & that she refuses food very frequently, alledging that it co poison, medicine, insects & other impurities &c.

(SIGNED) *Name and Medical Designation,* James M. McCulloch M.D.

Place of Abode, 38 Castle Street Dumfries

DATED this 8th day of April one thousand eight hundred and fifty nine 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, John Peterkin Procurator Fiscal Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Lieut. General Victorious Macdonald Tod, residing at Morningside House Edinburgh
Certificates under the hands of William Marshall
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 (4) Mrs Mary Tod residing in Dumfries, his mother and that the said
Mary Tod is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Tod 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 Tod which accompanied the said Petition. Two warrants

(Signed) John P Peterkin

Dated this Ninth day of April one thousand eight hundred and fifty nine Years

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

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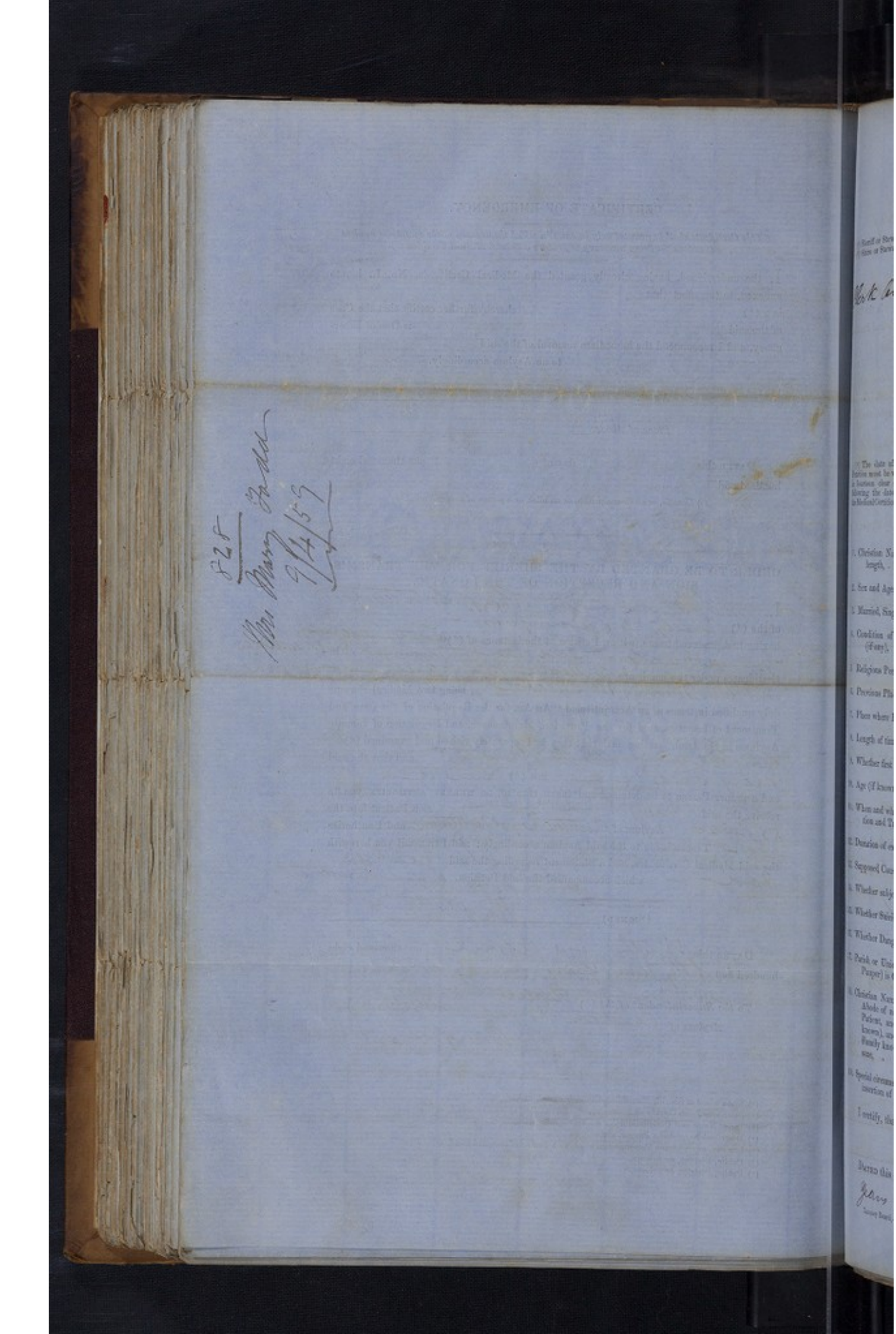
(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.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



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 Thomas Yamming Clerk Academy Street Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Cook or Yamming 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 Jane Cook or Yamming to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(Signed) Thomas Haining

(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 April one thousand eight hundred and fiftynine

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 Cook or Haining
2. Sex and Age,	Female. Twentyeit
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Clerks wife & Domestic Servant formerly
5. Religious Persuasion, so far as known,	Free Church of Scotland
6. Previous Place of Abode,	Dumfries at Many Places
7. Place where Found and Examined,	18 Academy St Dumfries
8. Length of time Insane,	a few hours
9. Whether first Attack,	Forst
10. Age (if known) on first Attack,	Twentyeit
11. When and where previously under Examination and Treatment,	Nowhere
12. Duration of existing Attack,	since 9th April Inst
13. Supposed Cause,	Illhealth &
14. Whether subject to Epilepsy,	Unknown
15. Whether Suicidal,	Unknown
16. Whether Dangerous to others,	Not known to be so
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
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 Haining 18 Academy St. Dumfries Husband no Member of his Family 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, Thomas Haining

Dated this Fourteenth day of April one thousand eight hundred and fiftynine years

* 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.

I, the undersigned, James Murray M'Culloch being a (1) Graduate of the University of Edinburgh, &

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

and being in actual practice as a (2) Physician

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

hereby certify, on soul and conscience, that I have this day, at (3) 18 Academy St Dumfries in the County of Dumfries separately from any other Medical Practitioner,

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

visited and personally examined (4) Jane Cook, or Haining

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

the said Jane Cook, or Haining and 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) Violent, restless, completely incoherent – acute mania, in short

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

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

(SIGNED) *Name and Medical Designation,* James M'. M'Culloch M

Place of Abode, 38 Castle Street, Dumfries

DATED this 14th day of April One thousand eight hundred and fifty nine 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.

I, the undersigned, James Alexander M.D. being a (1) Graduate of the University of Edinburgh

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

and being in actual practice as a (2) Physician

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

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,

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

visited and personally examined (4) Jane Cook or Haining a Clerk's wife residing 18 Academy St and the said Dumfries

(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) incoherence, entire loss of self control with personal defilement

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Said he have ~~committed~~ broken a Commission recently ~~from~~ as affirmed by her Husband

(SIGNED) *Name and Medical Designation,* James Alexander M.D.

Place of Abode, Crichton Royal Dumfries

DATED this fifteenth day of April one thousand eight hundred and fifty nine.

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 Cook, or Haining is a (1) Lunatic hereby further certify that the Case of the said Jane Cook, or Haining is One of Emergency, and I recommend the immediate removal of the said Jane Cook, or Haining to an Asylum accordingly.

Name, James Mc. McCulloch M. D. &c.,

Place of Abode, 38 Castle Street, Dumfries

DATED this 14th day of April one thousand eight hundred and fifty nine 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, James Peterkin Gaitties Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Thomas Haining Clerk residing in Dumfries Certificates under the hands of James Haining McCulloch 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 Cook or Haining, wife of Tailzeur and that the said Jane Cook or Haining is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Cook or Haining as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise then Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Jane Cook or Haining which accompanied the said Petition.

(SIGNED) James Peterkin

DATED this Eighteenth day of April one thousand eight hundred and fifty nine

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.

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Mrs Jane Cook or Gaisford

14/4/59

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 John Lowden Inspector of Poor Urr humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Hough Stewart 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 Hough Stewart to the Crichton Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Lowden Insp^r.

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

DATED this fourteenth (*) day of April one thousand eight hundred and fifty nine 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,	Hough Stewart
2. Sex and Age,	Male 45
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Taylor
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Has always been in Dalbeattie
7. Place where Found and Examined,	Dalbeattie
8. Length of time Insane,	About 12 months
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Never under treatment
12. Duration of existing Attack,	First symptoms observed about a year ago
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	His manners has frequently been of a violent nature
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Urr
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 Stewart Dalbeattie Father
19. 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.

(SIGNED)* *Name,* John Lowden Insp^r.

DATED this fourteenth day of April one thousand eight hundred and fifty nine 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.

I, the undersigned, John Paterson Lewis 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) his own house in Mid Street, Dalbeattie in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Hugh Stewart and the said Hugh Stewart 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 for several weeks past frequently wandering about the streets of public roads in a meaningless manner and at these times observed to be in a peculiar, melancholy, nervous expression of countenance, he says that he has been for sometime in a queer nervous state more easily excited than he was formerly. says he cannot sleep at night when full pain & he lying in his bed and when out of door work his memory appears good & to my mind his statements & answers to questions & conversation that he distinctly remembers my doing so & other various subjects which we then conversed upon

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His wife says that he has frequently threatened to take her life and he has been seized such instruments as a razor & poker & when in these fits of excitement on Saturday night last, he would have struck her with the poker had not their daughter prevented him. His brother & Mother also state that he is subject to fits of violent dangerous

(SIGNED) Name and Medical Designation, John Paterson Lewis, MB

Place of Abode, Dalbeattie

DATED this 14th day of April One thousand eight hundred and fifty nine

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 Mackenzie being a (1) Graduate of Edinburgh University and being in actual practice as a (2) General Practitioner hereby certify, on soul and conscience, that I have this day, at (3) his house in Mid Street, Dalbeattie in the County of Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Hugh Stewart and the said Hugh Stewart 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) Unstable of manner restless in his habits cannot work at any employment for any length of time, ~~stupid~~ nervous excitable

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) That he has threatened to strike his wife with the tongs and was restrained by his daughter by holding of his arm. cannot sleep at night. threatens the Roman & thinks his name is Stewart. at times, has wife to

(SIGNED) Name and Medical Designation, Thomas Mackenzie M.B. Physician and Surgeon

Place of Abode Dalbeattie

DATED this 12th day of April one thousand eight hundred and 59.

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 Stevenson Sutter Sheriff Substitute of the (2) County of Dumfries having had produced to me with a Petition at the instance of (3) John Lowden Inspector of Poor of the Parish of Lowes Certificates under the hands of John Paterson Lowes and Thomas MacKnight, 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) Hugh Stewart, a pauper and that the said Hugh 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 Hugh Stewart 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 Hugh Stewart which accompanied the said Petition.

(SIGNED) John S. Sutter

DATED this Eighteenth day of April one thousand eight hundred and Eighty nine

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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Hugh Stewart
15/4/69

Hugh Stewart
Ap. 15th/69.

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 *of the* (2) Stewartry of Kirkcudbright *and his Substitutes.*—

The Petition of John Watson Insp. of Poor

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Murray, Maiden Name, Herries 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 Murray or Herries to the Crichton Royal Institution and to sanction the admission into the said Asylum.

(SIGNED) John Watson

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

DATED this 22d (3) day of April one thousand eight hundred and Fifty Nine

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 Murray, Maiden Name, Herries
2. Sex and Age,	Female — 62 years
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Farm Servant
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	In Tinwhitlon upwards of 20 years
7. Place where Found and Examined,	Tinwhitlon Village
8. Length of time Insane,	Reported Oct. 9th 1858
9. Whether first Attack,	yes.
10. Age (if known) on first Attack,	61 years
11. When and where previously under Examination and Treatment,	Never and Nowhere
12. Duration of existing Attack,	Since Oct. 9th 1858
13. Supposed Cause,	Gradual Decay of mind or Delay
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,	Tinwhitlon
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 Murray, Son residing in Cheshire. None of the family known to be insane.
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	All inserted

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

(SIGNED)* *Name,* John Watson

DATED this 22d day of April one thousand eight hundred and Fifty Nine

* To be Signed by the Party applying.

Lunacy Board.—Dec.—37.—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.

I, the undersigned, J M Mylchreest being a (1) Fellow of Royal College of Physicians of Edinburgh

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

and being in actual practice as a (2) Medical man

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

hereby certify, on soul and conscience, that I have this day, at (3) Surgery Village in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Mary Murray / Harris Pauper Terraholm and that the said Mary Barnes 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Evident inability to take care of her person or property as ascertained by repeated personal observation of her conduct & by conversing with her

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Known from Mr Watson / Inspector of Poor / from many of the neighbours that she is quite incapable of managing her affairs & that her mother & sister are dead & that she has no relations under certain circumstances

(SIGNED) *Name and Medical Designation,* J M Mylchreest M.D.

Place of Abode, Kirkcudbright

DATED this 21st day of April One thousand eight hundred and Fifty nine.

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.

I, the undersigned, John Sanders Aymat being a (1) M.D. of the Edinburgh University & member of College Surgeons Edinburgh

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

and being in actual practice as a (2) Medical Practitioner

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

hereby certify, on soul and conscience, that I have this day, at (3) Village of Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Murray or Harris, a Pauper and that the said Mary Murray or Harris is a (5) woman 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) That she is often violent & talks of going to Bell & Barnes — that during visits to her apartment & her Memory seems much gone, says the keys were taken from her

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Has been visited by me several times a week almost since previous to her admission & from the Matron and Servants of the House & also from the Inspector of Poor & from many of the neighbours — that she is frequently most violent & threatens to strike her & would do so if possible — cannot make herself understood

(SIGNED) *Name and Medical Designation,* John S Aymat M.D. & Surgeon

Place of Abode, Burgh of Kirkcudbright

DATED this 21st day of April one thousand eight hundred and Fifty nine

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, Robert Macartney ~~Sheriff~~ Sheriff of Ralbray (1) Howard 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 John Sanders Shand, 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 Murray or Herries, a pauper and that the said Mary Murray or Herries 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 Murray or Herries as a Patient into the Crichton Royal Asylum of Dumfries and I authorise Act Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Mary Murray or Herries which accompanied the said Petition.

(SIGNED) Robt Gordon Substitute

DATED this twenty fifth day of April one thousand eight hundred and fifty nine years

To the Superintendent of the (7) Crichton Royal *Asylum of* Dumfries.

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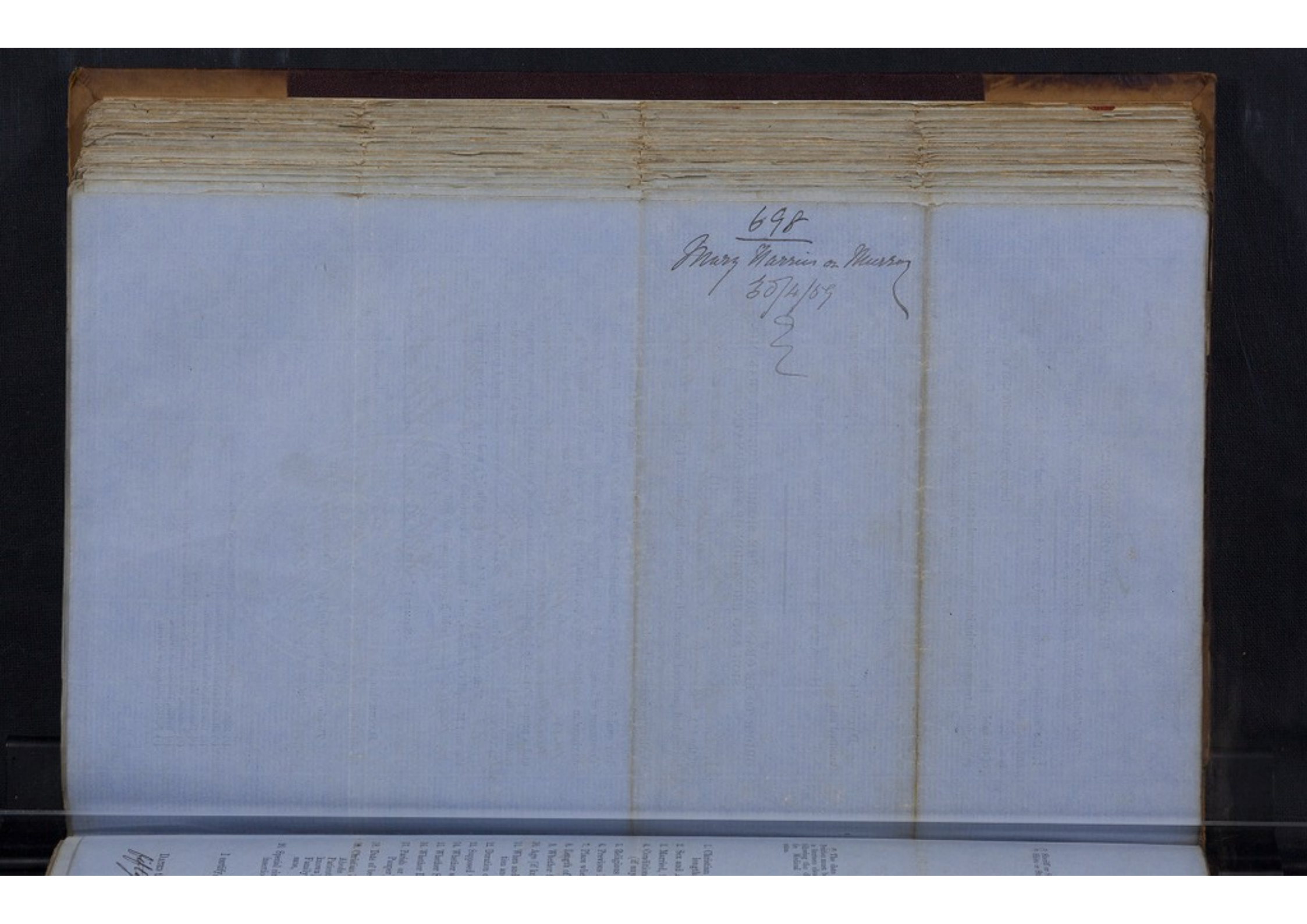
(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.
(7) Public, District, or Private.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Mary Harrison to Thomas
30/4/85

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 Dinwoodie, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Charles Hood Oney 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 Hood Oney to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(Signed) John Dinwoodie 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 April One thousand eight hundred and fifty nine 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,	Charles Hood Oney
2. Sex and Age,	Male 36 years age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	No occupation
5. Religious Persuasion, so far as known,	Episcopal
6. Previous Place of Abode,	Hollybush House &c 11 Lorebarn &c "
7. Place where Found and Examined,	
8. Length of time Insane,	not known
9. Whether first attack,	
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	about 14 Years ago in the Crichtons Royal Institution
12. Duration of existing Attack,	not known
13. Supposed Cause,	
14. Whether subject to Epilepsy,	not subject to Epilepsy
15. Whether Suicidal,	not Suicidal
16. Whether Dangerous to others,	not dangerous, quite harmless
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries Parish
18. Date of becoming Chargeable,	Not Chargeable till he enter the 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 his Family known to be or to have been Insane,	James Oney brother to the said Charles Oney 11 Lorebarn &c Dumfries, no Member of the family are 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, James A. Oney
John Dinwoodie Inspector

Dated this 25th day of April One thousand eight hundred and fifty nine years

* To be signed by the Party applying.

P. 9.

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 Inglis Marshall being a (1) Graduate of the Faculty of Physicians and Surgeons Glasgow and Member of the Faculty of Physicians and Surgeons of Glasgow and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Loreburn Street Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Charles Grey and that the said Charles Grey 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 speaks incoherently lies in bed all day will not get up to work or any subject will not allow other clothing to remain on him unless perfectly

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

Same the same as above

(SIGNED) *Name and Medical Designation,* William Marshall

Place of Abode, Buccleuch Street Dumfries

DATED this 25th day of April One thousand eight hundred and fifty eight 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) graduate of the University of Edinburgh &c. and being in actual practice as a (2) physician hereby certify, on soul and conscience, that I have this day, at (3) Loreburn Street, Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Charles Grey and that the said Charles Grey 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) Absolutely imbecile almost idiotic, crouched up on the bed, refusing clothes &c. = linen & exercise &c. &c.

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

Same as above &c.

(SIGNED) *Name and Medical Designation,* James Murray McCulloch

Place of Abode, 38 Castle Street, Dumfries

DATED this 25th day of April One thousand eight hundred and fifty nine 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, John Pilquin Rollo (2) Sheriff Substitute
of the (3) County of Dumfries
having had produced to me, with a Petition at the instance of (4) John Dinwoodie
Inspector of Poor, Dumfries
Certificates under the hands of William Marshall
and James M. M'Culloch, 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)
Charles Hood Orey, Dumfries, a Pauper and that the said
Charles Hood Orey is a (6) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Charles Hood Orey as a Patient into the (7) Public Asylum of Southern Counties 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 Charles Hood Orey which accompanied the said Petition.

(SIGNED) John P. Rollo

DATED this twenty sixth day of April One thousand eight hundred and fifty nine years

To the Superintendent of the (8) Public
Asylum of Southern Counties, 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.
(6) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(7) Public, District, or Private.
(8) Public, District, or Private.

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Mrs. Wood Owen

2/5/59

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 Jen. Margaret Turner or Copland residing in Dunfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Ann Copland or Turner 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 Copland or Turner to the Dumfries & Galloway Asylum and to sanction her admission into the said Asylum.

(SIGNED) W. A. Turner

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

DATED this Second (3) day of May one thousand eight hundred and fifty nine.

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 Copland or Turner
2. Sex and Age,	Female 65
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Captains wife
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Keneaple
7. Place where Found and Examined,	Keneaple & Dunfries Combs, Asylum
8. Length of time Insane,	a few months
9. Whether first Attack,	no
10. Age (if known) on first Attack,	about 57
11. When and where previously under Examination and Treatment,	Crichton Royal Institution since 21st March last
12. Duration of existing Attack,	
13. Supposed Cause,	a Relapse
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. 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 Ann Copland or Turner a Niece 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,* W. A. Turner

DATED this Second day of May one thousand eight hundred and fifty nine.

* 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.*

I, the undersigned, James Aitchison MB 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 Annandale Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Mrs Ann Heughan Stitcher wife resident at Glencaple in Dumfriesshire and the said Mrs Ann Heughan 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Is labouring under depression, agitation, fear, doubt, and anxiety.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Wishing suicide as stated by her friends

(SIGNED) *Name and Medical Designation,* James Aitchison MB.

Place of Abode, Crichton Royal Dumfries

DATED this second day of May One thousand eight hundred and fifty nine

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.*

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 hereby certify, on soul and conscience, that I have this day, at (3) Glencaple Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Anne Heughan and the said Anne Heughan 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Constant fear & objectless fear & other hallucinations

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) The same &c.

(SIGNED) *Name and Medical Designation,* James M. McCulloch MB

Place of Abode, 38 Castle Street Dumfries

DATED this second day of May one thousand eight hundred and fifty nine

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 Mrs Ann Heughan is a (1) person of unsound mind hereby further certify that the Case of the said Mrs Ann Heughan is One of Emergency, and I recommend the immediate removal of the said Mrs Ann Heughan to an Asylum accordingly.

Name, James Gilchrist M.D

Place of Abode, Creighton House Dumfries

DATED this second day of May one thousand eight hundred and fifty nine

(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 (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Mrs Mary ann Turner or Copland residing in Dumfries Certificates under the hands of James Gilchrist and James Murray M.D. Ullesk, 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 Copland or Heughan and that the said Ann Copland or Heughan is of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ann Copland or Heughan as a Patient into the (5) Public Asylum of Southern Counties 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 Mrs Ann Copland or Heughan which accompanied the said Petition.

(SIGNED) A. Hannay

DATED this Fourth day of May one thousand eight hundred and fifty nine

To the Superintendent of the 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.

May 2d 1859

Mrs Ann Williams
or Kenyon
2/15/59

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) Steward *of the* (2) Stewartry of Kirkcudbright *and his Substitutes,—*

The Petition of James Thomson

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Agnes Mc Munn, 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 Agnes Mc Munn to the Crichton Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) James Thomson Inspr of Poor

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

DATED this Third (3) day of May One thousand eight hundred and fifty nine 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,	Agnes Mc Munn
2. Sex and Age,	Female - 65 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Ordinary Household occupations
5. Religious Persuasion, so far as known,	Protestant - Member of Free Church
6. Previous Place of Abode,	Was Born & has always resided in this Parish
7. Place where Found and Examined,	Millhouse - Parish of Kirkcudbright
8. Length of time Insane,	About four days at this time
9. Whether first attack,	No
10. Age (if known) on first Attack,	58 years
11. When and where previously under Examination and Treatment,	Crichton Institution Dumfries
12. Duration of existing Attack,	About four days
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Not dangerous - had a wrong of words with her relatives & attendants
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Kirkcudbright
18. Date of becoming Chargeable,	May 3rd 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,	Janet Mc Munn. Millhouse. Parish of Kirkcudbright No other Members 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, James Thomson
Insp. of Poor

DATED this Third day of May One thousand eight hundred and fifty nine years

Elisabeth Martin J. 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.*

(6) *State the facts.*

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

I, the undersigned, David Blair
being a (1) L. R. C. S. E.
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Millhouse
Parish of Kirkcudbright in the County of Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Agnes McMinn a
pauper
and that
the said Agnes McMinn 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)
From her incoherency of speech from
absurd ideas of her family wishing her
from her confinement altogether from the fact
having been a former occupier of
of Lunacy Asylum which she was sent to Dumfries

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

(Signed) Name and Medical Designation, David Blair Surgeon

Place of Abode, Kirkcudbright

Dated this second day of May One thousand eight
hundred and fifty nine

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 Sanders Shand
being a (1) M.D. of the University of Edinburgh, & M. R. C. Surgeon of
and being in actual practice as a (2) Medical Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) the Millhouse
Parish of Kirkcudbright in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Agnes McMinn - Pauper
and that
the said Agnes McMinn 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) Incessant talking and
Irrelevant answers - accusing her Relations of telling false stories about her
stealing her property, endeavouring to injure her, & even to destroy her
life by Poison

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
by her Relations with whom she resides, that the same degree of
excitement as mentioned above exists during night except during
a short period of sleep

(Signed) Name and Medical Designation, John S. Shand M.D. Surgeon

Place of Abode, Royal Bank of Kirkcudbright

Dated this second day of May One thousand eight
hundred and fifty nine

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 Dumbar. Gr. (1) Steward Substitute
of the (2) Stewartry of Kirkcudbright
having had produced to me, with a Petition at the instance of (3) James Thomson,
Certificates under the hands of Daniel Blair.
and John Sanders Shand, 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 McMinn a pauper and that the said
agnes McMinn 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 McMinn as a Patient into the (Crichton Asylum of Dumfries and I authorize
der Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said agnes McMinn which accompanied the said Petition.

(SIGNED) W H Dumbar

DATED this third day of May One thousand eight hundred and fifty nine years.

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, or Private.
(7) Public, District, or Private.

May 4th 1859

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Agnes McMinn
4/5/55

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 Andrew Niven Inspector of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Byers 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 Byers to the Crichton Lunatic Asylum and to sanction his admission into the said Asylum.

(SIGNED) And. Niven

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

DATED this 22 (3) day of April one thousand eight hundred and fiftynine

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 Byers
2. Sex and Age,	male 60 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Established church
6. Previous Place of Abode,	Port Patrick
7. Place where Found and Examined,	Port Patrick
8. Length of time Insane,	a few weeks
9. Whether first Attack,	no
10. Age (if known) on first Attack,	54 years
11. When and where previously under Examination and Treatment,	Crichton Asylum Dumfries
12. Duration of existing Attack,	a few 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,	Parish of 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,	Elizabeth McKinnon Sister. not known
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. Niven

DATED this 22 day of April one thousand eight hundred and fiftynine

* 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.

(6) *State the facts.*

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

I, the undersigned, Humphry Robertson being a (1) Master in Surgy. Univ. of Glasgow and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Port Patrick in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Robert Burges residing at Port Patrick and that the said Robert Burges 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 terror of evil that are going to befall him, without any cause

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

(SIGNED) *Name and Medical Designation,* H. Robertson M.D.

Place of Abode, Port Patrick

DATED this 22 day of April One thousand eight hundred and fifty nine

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. Sloan being a (1) Licentiate of the 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) Port Patrick in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Robert Burgon residing in the village of Portpatrick and that the said Robert Burgon 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 fears are unfounded and his apprehension of danger without cause. The form of his insanity is what is called Demonia

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

(SIGNED) *Name and Medical Designation,* John Sloan Surgeon

Place of Abode Sandheads Stand of Stoney

DATED this 24 day of April one thousand eight hundred and fifty nine.

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 Rogan Sheriff Substitute
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Andrew Niven Inspector of Poor
Certificates under the hands of Humphry Robertson
and John C. Sloan, 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 ~~(Buyers)~~ Byers (Pauper) and that the said
Robert 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 Robert Byers as a Patient into the ~~Crichton~~ Lunatic 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 Robert Byers which accompanied the said Petition.

(SIGNED) M. R. Rogan

DATED this twenty fifth day of April one thousand eight hundred and fifty nine

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, or Private.
(7) Public, District, or Private.

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Robert Byers
4/3/59

Robert Byas
May 4th 1859.

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 *of the* (2) Stewartry of Kirkcudbright *and his Substitutes,*—

The Petition of Richard Mewat, Inspector of poor of Kelton humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Mc Munn alias Comelin 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 Mc Munn alias Comelin to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Rich.d Mewat 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 May one thousand eight hundred and fifty nine.

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 Mc Munn alias Comelin
2. Sex and Age,	Male supposed about 30
3. Married, Single, or Widowed,	
4. Condition of Life, and previous Occupation (if any),	Stocking weaver & latterly House Keeper
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Newton, Salcreatch (Castledouglas
7. Place where Found and Examined,	Castledouglas. Kirkcudbright
8. Length of time Insane,	a week
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,	a week prior to
13. Supposed Cause,	Unknown
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	Said to be so
16. Whether Dangerous to others,	Said to be so
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Supposed Buittle where he was born
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,	Mc Munn Castledouglas, Sister to patients Mother. Unknown
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, Rich.d Mewat

DATED this Ninth day of May one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board.—Dec.—37.—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, John Sander Shand
being a (1) M.D. of University of Edinburgh & Member of Royal Colle
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) Royal Burgh
of Kirkcudbright
Kirkcudbright separately from any other Medical Practitioner
visited and personally examined (4) James McMinn or Comelin Pau
and that
the said James McMinn or Comelin 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) That he would be long
talker & spouter & speak, that he would again be Baptized & that
his name, that Him was done before after it was done & that Mother
his general appearance & manner

2. Other facts (if any) indicating Insanity communicated to me by others: (7) by
that he would daily speak of Abraham & Sarah also about
him, or daily in about the forenoon & take Exercise daily
Cold during night, speaks his talk & walks first with his

(SIGNED) *Name and Medical Designation,* John S Shand MD & Surgeon

Place of Abode, Royal Burgh of Kirkcudbright

DATED this ninth day of May One thousand eight
hundred and Fifty nine

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 Blair
being a (1) L.R.C.S.E.
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Lochen
in High Street Kirkcudbright in the County of
Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) James McMinn or Comelin
Pauper
and that
the said James McMinn or Comelin 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) from his gen-
eral appearance & conduct

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
his attendants opinion from his having at-
tempted to cut his throat from his attempting
to bite them & himself & from his tearing
& destroying his bed clothes & bed

(SIGNED) *Name and Medical Designation,* David Blair Surgeon

Place of Abode Kirkcudbright

DATED this ninth day of May one thousand eight
hundred and fifty nine

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 Thomas Mc Dunbar, (1) Ep. Steward Substitute of the (2) Stewartries of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Richard Rewat

Certificates under the hands of John Anderson Shand and David 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) James McMinn or Cuthbert a pauper and that the said James McMinn or Cuthbert 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 McMinn or Cuthbert as a Patient into the (6) Lunatic 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 James Cuthbert which accompanied the said Petition.

(SIGNED) W H Dunbar

DATED this Ninth day of May one thousand eight hundred and fifty nine

To the Superintendent of the (7) 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, or Private.
(7) Public, District or Private.

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James McMinn

10/5/69

James McMinn

May 10th 1865.

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 Michael Hunter, Carter in Minnyhive

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Hunter 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 William Hunter to the Lunatic Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Michael Hunter

(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 May one thousand eight hundred and fifty nine 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 Hunter
2. Sex and Age,	Male 41 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Grieve
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Sandyknowe Dunscore
7. Place where Found and Examined,	Own Home
8. Length of time Insane,	Five days
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	At 14 years
11. When and where previously under Examination and Treatment,	See No 6
12. Duration of existing Attack,	Five 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,	
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,	Michael Hunter, Minnyhive Brother, No Member of the family ever known to be insane
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	No circumstances

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

(SIGNED)* *Name,* Michael Hunter

DATED this 10th day of May one thousand eight hundred and fifty nine years.

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1269.

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, Andrew Lowmer M.D.
being a (1) Member of the College of Physicians 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) Galvie
Dumfries in the County of Dumfries
separately from any other Medical Practitioner, visited and personally examined (4) William Hunter
and that the said William Hunter is a (5) Lunatic
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) At present he is a madman fed by two persons men who guard and handcuffed

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
That he has been noisy in the last five days

(SIGNED) *Name and Medical Designation,* Andrew Lowmer M.D.

Place of Abode, Glencaple

DATED this 10th day of May One thousand eight hundred and fifty nine 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, Hugh Grainger Stewart
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) William Hunter Grocer Sandywell Dunscore and that the said William 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) Talks incoherently and excitedly. Does not know what has taken place in his presence and has lost remembrance of what occurred during a fit of excitement which lasted several days.

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Informed by his brother Michael Hunter that he was violent and threatened violence both to himself and others and that they found it necessary to restrain him.

(SIGNED) *Name and Medical Designation,* Hugh G. Stewart

Place of Abode, Southern Counties Asylum

DATED this twelfth day of May one thousand eight hundred and fifty nine Years.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in case 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 William Hunter therein named is a (1) dangerous lunatic and hereby further certify that the Case of the said Wm Hunter is One of Emergency, and I recommend the immediate removal of the said William Hunter to an Asylum accordingly.

Name, Jno Lorimer M.D.

Place of Abode, Glencairn

DATED this 11th day of May one thousand eight hundred and fifty nine 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 A Trotter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of Michael Hunter Carrier in Minnyhive Lorimer and Hugh Granger 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) William Hunter Grocer in Dumfries and that the said William Hunter is of unsound mind 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 (5) Public Asylum of Southern Counties and I authorise the 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.

(SIGNED) John A Trotter

DATED this Nineteenth day of May one thousand eight hundred and fifty nine

To the Superintendent of the (6) 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.

May 12th 1859

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William Gumbo
12/5/59

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 George Mc Ghie Inspector of Poor Parish of Kirkmahoe humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David Carrie residing at Kirkton Kirkmahoe 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 Carrie to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Geo: Mong: Mc Ghie

(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 May One thousand eight hundred and fifty nine

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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 Carrie
2. Sex and Age,	Male — 25 years
3. Married, Single, or Widowed,	
4. Condition of Life, and previous Occupation (if any),	a Servant
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Carnsalloch, Kirkmahoe
7. Place where Found and Examined,	Kirkton Do
8. Length of time Insane,	about 14 Days
9. Whether first attack,	Yes
10. Age (if known) on first Attack,	25 years
11. When and where previously under Examination and Treatment,	Kirkton Kirkmahoe
12. Duration of existing Attack,	See 8th Query —
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,	Kirkmahoe
18. Date of becoming Chargeable,	12 May 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,	No —
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.

(SIGNED)* *Name,* Geo: Mong: Mc Ghie

DATED this Twelfth day of May One thousand eight hundred and fifty nine

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.

(6) *State the facts.*

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

I, the undersigned, William Grant Marshall being a (1) Graduate of the Faculty of Physicians and Surgeons 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) Kirkton Villa in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) David Currie and that the said David Currie 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) Speaks incoherently, looks his face is dark imagines he is going to receive intercourse with his God which has caused great weakness over his whole frame &c &c

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

Much the same as above

(SIGNED) *Name and Medical Designation,* William Marshall

Place of Abode, Buccleuch Street Dumfries

DATED this 13 day of May One thousand eight hundred and fifty nine 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, James Murray McCulloch being a (1) Graduate of the University of Edinburgh &c. and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Kirkton, Kirk in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) David Currie the said David Currie 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) Imagines that all food is drugged & poisoned, that the fires of hell are in his belly & consuming his soul & that he saw the Glory of God through the head of the bed & that it told him he could not

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

The same &c.

(SIGNED) *Name and Medical Designation,* James M. McCulloch M

Place of Abode, 38 Castle Street, Dumfries

DATED this 12th day of May One thousand eight hundred and fifty nine 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, I Mr Duncan Rotten Sheriff Substitute
of the (2) County of Dumfries George D. Inglis
having had produced to me, with a Petition at the instance of (3) Inspector of Poor of Kirkmahoe
Certificates under the hands of William Marshall
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 (4)
David Currie Labourer, Kirkmahoe, a pauper and that the said
David Currie is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said David Currie 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 David Currie which accompanied the said Petition.

(SIGNED) I Mr D. Sheriff

DATED this Twelfth day of May One thousand eight hundred and fifty three

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.

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David Currie
12/5/59

David Currie
May 12th 1859

May 12th 1835.

CRICHTON ROYAL INSTITUTION,

Bayle Department.

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 STEUART 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., } Treasurers.
S. ADAMSON, Esq., }

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. May 12th 1865.
1. Name age, condition, occupation, disposition, amount of education, and general deportment of the Patient.	David Jarvis Oct 28 Farmer Not known quiet quiet kind
2. What is the cause, predisposing and exciting, moral or physical; and what circumstances may have predisposed to, aggravated, or confirmed the disease?	No cause known Not any in particular
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.?	First observed to be of premonitory Not any
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 Not any Stomachic affection
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?	Depressed in spirits believes himself lost Not known 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.	Has complaints of Stomachic affection All 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?	First attack Worst about a fortnight since
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?	Imagines his soul is lost or Melancholia
9. Does the Patient manifest any disposition to commit suicide? has he made any attempt to do so, and by what means?	No No
10. Does the Patient manifest any disposition to injure other persons or property—to cherish any malicious design—or is the morbid train of thought excited by any particular subject or event?	No Not that I have heard of
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 prominent propensity, or tendency to crime?	No
12. What treatment has been resorted to, for what length of time, and with what success?	Not any
13. How long has the Patient been insane? or has he ever been in any public asylum or private mad-house?	Has been admitted before a month mentioned in Book before recorded.

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 William MacLean Upholsterer in Stranraer humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John MacLean my 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 MacLean to the Southern Counties Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) William MacLean

(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 May one thousand eight hundred and fifty nine 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,	John MacLean
2. Sex and Age,	Male, 27 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Clerk.
5. Religious Persuasion, so far as known,	United Presbyterian
6. Previous Place of Abode,	Stranraer
7. Place where Found and Examined,	Stranraer
8. Length of time Insane,	Nearly two years
9. Whether first Attack,	First attack about two years ago & not since free of the disease
10. Age (if known) on first Attack,	25 years
11. When and where previously under Examination and Treatment,	Not previously under treatment directed to the mental disease
12. Duration of existing Attack,	Since the appearance of the disease about two years ago Quiet intervals, but has intervals of religious mania
13. Supposed Cause,	No
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	never as yet
16. Whether Dangerous to others,	Private Lunatic
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	William MacLean, the petitioner
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,	His Grandmother was insane for some years before her death
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 MacLean

DATED this 10th day of May one thousand eight hundred and fifty-nine

* To be Signed by the Party applying.

Lunacy Board,—Dec.—67.—1858.

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 Orpill
being a (1) Licentiate of the Faculty of Physicians & 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) Charlotte St Stranraer in the County of Wigtown, separately from any other Medical Practitioner visited and personally examined (4) William McLean clerk residing in Charlotte St Stranraer and the said William McLean 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)
I have observed him walking about in a wild manner, talking incoherently to himself; and I have seen him in an excited state speaking violently, incoherently and blasphemously, especially in reference to Jesus Christ, quite contrary to his usual demeanour when in a sane

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
His parents have repeatedly caused me to visit him in consequence of strangers conduct, particularly in getting excited & becoming quite unruly. Before usual times of attack, [illegible] Bible [illegible]

(SIGNED) Name and Medical Designation, John Orpill Surgeon

Place of Abode, Stranraer

DATED this 7th day of May One thousand eight hundred and fifty nine

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) Graduate of the University of Glasgow, 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) the house of Mrs McLean Charlotte Street Stranraer in the County of Wigtown, separately from any other Medical Practitioner visited and personally examined (4) John M'Lean Clerk at present residing in Charlotte Street Stranraer and the said John McLean 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)
I His reserved and reserved manner at time speaking violently, and
II I have noticed him for sometime past walk about the streets, with
expression of countenance quite insane muttering to himself in a
III His violent denunciation against Jesus Christ His erroneous views

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
My own observations are confirmed by the history of his Case as
to me by his Father and Uncle Mr. Alex Thorburn He has at times
hours during night, and wandered long distances from home. Without
object in view on another occasion he escaped from home barefooted
be supposed he had destroyed himself by Clothes [illegible]

(SIGNED) Name and Medical Designation, Ebenezer Fleming M.D.

Place of Abode Stranraer

DATED this Seventh day of May one thousand eight hundred and fifty nine 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, Adam Urquhart Esqre Advocate Sheriff (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) William Mac Lean
upholsterer in 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)
and that the said
John MacLean
John Mac Lean is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Mac Lean as a Patient into the (6) Southern ~~(Asylum of)~~ Counties Asylum 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 John Mac Lean which accompanied the said Petition.

(SIGNED) Adam Urquhart

DATED this eleventh day of May one thousand eight hundred and fifty nine

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.

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John McLean
13/5/59

John McLean
May 13th 1859

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 James Austin Inspector of Poor of Closeburn humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Isabella Kennedy 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 said Asylum.

(SIGNED) James Austin Inspector

(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 May One thousand eight hundred and fifty nine

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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 Kennedy
2. Sex and Age,	Female aet 46
3. Married, Single, or Widowed,	single
4. Condition of Life, and previous Occupation (if any),	Out door worker
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Closeburn village
7. Place where Found and Examined,	Park
8. Length of time Insane,	no Fourth
9. Whether first attack,	—
10. Age (if known) on first Attack,	Resided about 5 years ago
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	no no *
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Closeburn
18. Date of becoming Chargeable,	twelfth May
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 Sharp Burnfoot Penpont Dr Kennedy - 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,* James Austin

DATED this thirteenth day of May One thousand eight hundred and fifty nine

P. p.

* To be signed by the Party applying.

* not under restraint she might injure others

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, Adam Crichton Clarke
being a (1) Doctor of Medicine of Edinburgh & Licentiate of the Royal College of Surgeons
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Park, Closeburn, in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Isabella Kennedy and that the said Isabella Kennedy 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.:—

1. Facts indicating Insanity observed by myself: (6) She is suspicious, maniacal, threatening & violent - incapable of understanding a single question & almost has to be watched as she can lay her hands on -

2. Other facts (if any) indicating Insanity communicated to me by others: (7) From the Matron & Attendants, who assure me she has been in the same state for three days, & other persons.

(SIGNED) *Name and Medical Designation,* Adam C. Clarke

Place of Abode, Thornhill.

DATED this Thirtieth day of June One thousand eight hundred and Fifty nine.

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 Boyle Grierson
being a (1) Licentiate of the Royal College of 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) Park of Closeburn, in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Isabella Kennedy and that the said Isabella Kennedy 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) That she has lost control over her thoughts and actions, and that although her perceptions are correct that she has not the power of reasoning upon them, but thinks and acts impulsively,

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her friends speak of her violence & of her destruction to anyone & property,

(SIGNED) *Name and Medical Designation,* W. Wilson, L.R.C.S.Ed.

Place of Abode, Thornhill

DATED this Thirtieth day of May One thousand eight hundred and Fifty nine

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 Isabella Kennedy is a (1) Lunatic hereby further certify that the Case of the said Isabella Kennedy is One of Emergency, and I recommend the immediate removal of the said Isabella Kennedy to an Asylum accordingly.

Name, Andr. C. Austen M.D.

Place of Abode, Thornhill

DATED this 13th day of May One thousand eight hundred and fifty nine.

(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.

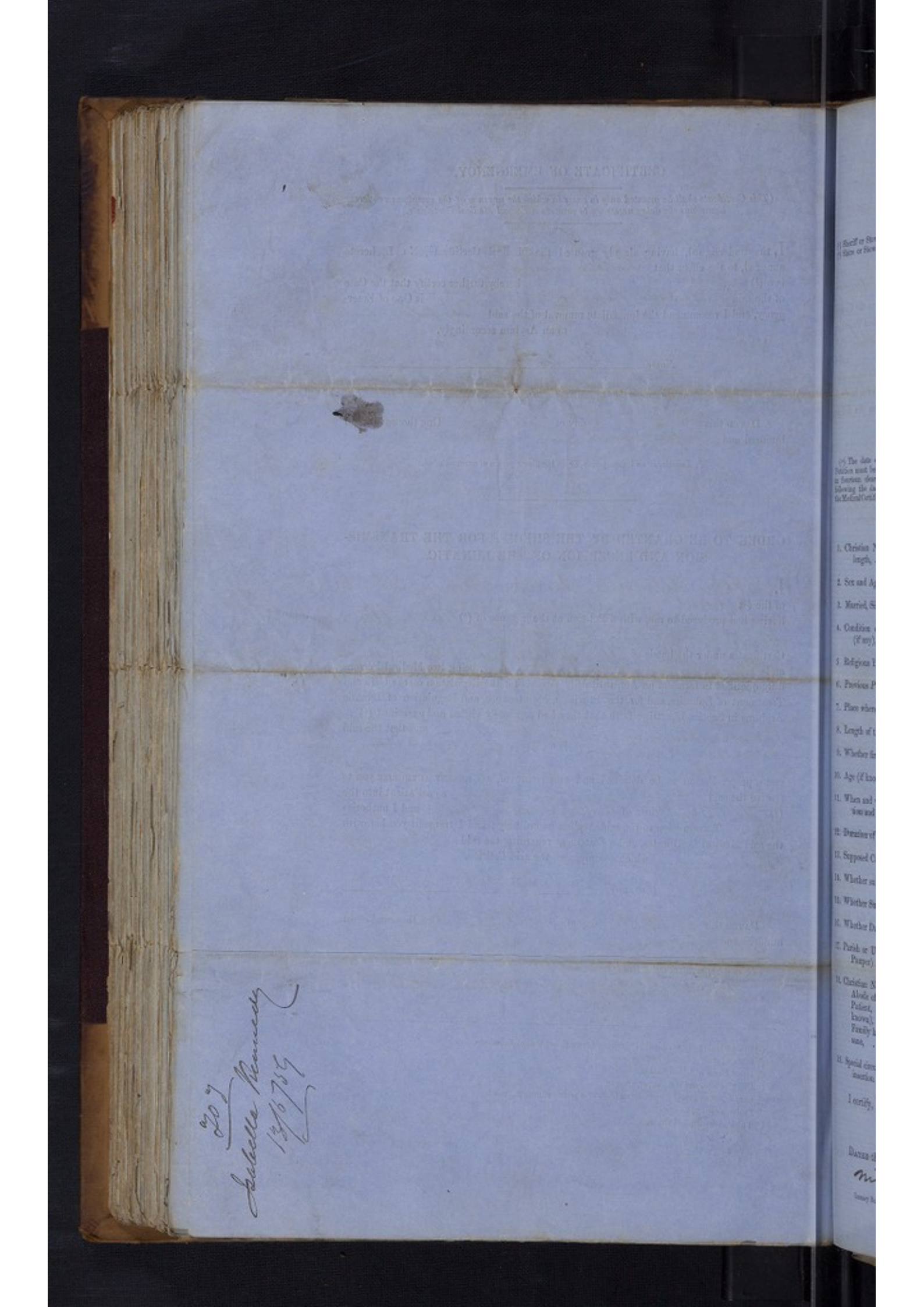
I, John Pitcairn Grotter, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Austen, Inspector of Poor Closeburn Certificates under the hands of Andrew Crichton Chalmers and Thomas Boyle Grierson, being two Medical Persons duly qualified 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) Isabella Kennedy, residing in Closeburn and that the said Isabella Kennedy is a (5) Lunatic 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 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.

(SIGNED) John P Grotter

DATED this Sixteenth day of May One thousand eight hundred and fifty nine.

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.



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 Dumfries *of the* (2) County *and his Substitutes,—*

The Petition of John Bell, Inspector of Poor

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Archibald Blacklock, Shoemaker 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 Blacklock to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Bell Inspector

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

DATED this Sixteenth (3) day of May one thousand eight hundred and fifty nine

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 Blacklock
2. Sex and Age,	male 57
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	Journeyman Shoemaker
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Moffat, Dumfriesshire
7. Place where Found and Examined,	
8. Length of time Insane,	
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,	
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,	Moffat
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,* John Bell Inspector

DATED this Sixteenth day of May one thousand eight hundred and fifty nine 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.

I, the undersigned, William Scott Graduate of the U
being a (1) of Edinburgh

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

and being in actual practice as a (2) Physician

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

hereby certify, on soul and conscience, that I have this day, at (3) the Person
in the County
Dumfries
separately from any other Medical Practitioner

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

visited and personally examined (4) Archibald Blacklock
and th

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

the said Archibald 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) He appears a per
of 50 years of age and he says it is 20 years since
Insane Asylum Glasgow - has no recollection of his wife or
or his father - he says it is upwards of 10 years since
was married, has delusions as to objects & persons

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

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

No report

(SIGNED) *Name and Medical Designation,* William Scott M.D

Place of Abode, Dumfries

DATED this 14th day of May One thousand eigh
hundred and 5 9

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.

I, the undersigned, Patrick Heron, Gradu
being a (1) of the University of Edin

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

and being in actual practice as a (2) Physician

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

hereby certify, on soul and conscience, that I have this day, at (3) the Pau
Dumfries
in the County
separately from any other Medical Practitioner

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

visited and personally examined (4) Archibald Blacklock
and tha

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

the said Archibald Blacklock (5) a 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) On my
answer any question correctly as to
my age, number or position of
family, states that he is upwards of 70
of age, but he appears to be 50 or

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

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

No report

(SIGNED) *Name and Medical Designation,* Patrick Heron

Place of Abode, Dumfries

DATED this 15th day of May one thousand eight
hundred and 59

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 Broomhouse Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of John Bell
Inspector of Poor, Moffat
Certificates under the hands of William Scott
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)
Archibald Blackloch, Shoemaker in Moffat and that the said
Archibald Blackloch 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 Blackloch as a Patient into the
(6) Public Asylum of Southern Counties and I authorise
this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Archibald
Blackloch which accompanied the said Petition.

(SIGNED) John O. Wells

DATED this Sixteenth day of May one thousand eight hundred and fifty nine

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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Nicholas Mc Mahon

16/5/59

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 James A Brown MD

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Edward Bayne 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 Edward Bayne to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) James A Brown

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

DATED this Thirteenth (13) day of May one thousand eight hundred and fifty nine

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 Edward Bayne
2. Sex and Age,	Male,
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Gentleman,
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Lancashire
7. Place where Found and Examined,	Crichton Institution
8. Length of time Insane,	~~One month~~ ~~Months~~ 3 years
9. Whether first Attack,	No
10. Age (if known) on first Attack,	17
11. When and where previously under Examination and Treatment,	Lancashire two years
12. Duration of existing Attack,	Three months
13. Supposed Cause,	A Relapse
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. 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 Bayne Father & Residence at Liverpool Merchant Some of the Family have been 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, James A Brown

DATED this Thirteenth day of May one thousand eight hundred and fifty nine

* 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, 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) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Alexander Stewart Bayne an artist formerly resident at Jesus Lane Cambridge and that the said Alexander Stewart Bayne 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) Excitement, eccentricity incoherence and loss of self control

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

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D.

Place of Abode, Crichton Royal Institution Dumfries

DATED this Seventeenth day of May One thousand eight hundred and fifty nine

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 C Heron M.D. being a (1) 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) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Alexander Stewart Bayne Artist and the said Alexander Stewart Bayne 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) Confusion of thought, want of self-control

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Fortune, and a destructive character

(SIGNED) *Name and Medical Designation,* Patrick C Heron M.D.

Place of Abode, 22 Buccleuch Street Dumfries

DATED this 18th day of May one thousand eight hundred and 59

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 Alexander Stewart Bayne is a (1) Person of unsound mind, hereby further certify that the Case of the said Alexander Stewart Bayne is One of Emergency, and I recommend the immediate removal of the said Alexander Stewart Bayne to an Asylum accordingly.

Name James Gilchrist, MD

Place of Abode, Crichton Royal Dumfries

Dated this twenty-first day of May one thousand eight hundred and fifty-nine

(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 (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of James D. Clement Esq. Certificates under the hands of James Gilchrist 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) Alexander Stewart Bayne, Artist & Hawse Lanarkshire and that the said Alexander Stewart Bayne is 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 Stewart Bayne as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Stewart Bayne which accompanied the said Petition.

(Signed) Alex Hannay

Dated this 19th day of May one thousand eight hundred and fifty-nine

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.
(4) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(4) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(5) Public, District, or Private.
(6) Public, District, or Private.

Alex. Thomas Bryan
1875

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 Wigton *and his Substitutes,—*

The Petition of Isaac M. Connell Inspector of Poor humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that David M'Clelland 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 M'Clelland to the Crichton Asylum and to sanction his admission into the said Asylum.

(SIGNED) Isaac M. Connell, Inspector

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

DATED this 18th (3) day of May One thousand eight hundred and fifty nine.

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 M'Clelland
2. Sex and Age,	44 years old
3. Married, Single, or Widowed,	Sailor
4. Condition of Life, and previous Occupation (if any),	Church of Scotland
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	
7. Place where Found and Examined,	
8. Length of time Insane,	
9. Whether first attack,	Not first attack
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Has been several times in the Crichton Asylum before
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,	Parish of Whithorn
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,	Mary M'Clelland or Todd wife of Patient, Whithorn, 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.

(SIGNED)* Name, Isaac M. Connell Insp. of Poor

DATED this 18th day of May One thousand eight hundred and fifty nine

* To be signed by the Party applying.

P. 5.

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) Doctor of Medicine of the University of Edinburgh & Licentiate of the Royal College of Surgeons Edin. and being in actual practice as a (2) Physician and Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Whithorn in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) David Mc Clelland, a casual pauper residing in the Burgh of Whithorn and that the said David Mc Clelland 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 has been off work & therefore [illegible] for the last 8 Months not on acct of any obvious bodily disease, but chiefly from disorder of mind, manifested by fear, dep[illegible] absence, Hallucinations, Confusion of ideas & want of sustained Power of Will when attempting to work at his trade. also seems to dwell much upon his mental Conditions; viz. occasional pain in every part from head to foot, sense of Crushing [illegible] of sinking from under the earth, which makes him afraid to stir to the Window by putting on his Clothes. He keeps mostly in the house much in bed, but can take Exercise if urged to it. Has quiet, but Taciturn, Monosyllabic, Mutters to himself

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

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

His wife says that he was afflicted with Insomnia [illegible] ago, & frequently wakened in the last during which he entertained the delusion that several respectable persons in this place were conspiring for his injury - &c &c.

(SIGNED) *Name and Medical Designation,* Dunbar White M.D

Place of Abode, Whithorn

DATED this sixteenth day of May One thousand eight hundred and Fifty Nine

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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, Alex[r] M[c] Millan being a (1) Licentiate of the Royal College of Surgeons Edinr and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Whithorn in the County of separately from any other Medical Practitioner, visited and personally examined (4) David M[c] Clelland Casual pauper residing in Burgh of Whithorn and that the said David M[c] Clelland 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 facts stated as by D[r] White are quite correct & all I see them to

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

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

The same stated to me as to D[r] White & as to them all

(SIGNED) *Name and Medical Designation,* Alex[r] M[c] Millan Surgeon

Place of Abode, Whithorn

DATED this day of One thousand eight hundred and

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 Esq. Advocate (2) Sheriff Substitute of the (2) County of Wigtown having had produced to me, with a Petition at the instance of (3) Isaac McConnell Inspector of Poor Certificates under the hands of Dunbar White M.D. and Alexander McMillan 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) David McClelland. and that the said David McClelland is a (5) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said David McClelland as a Patient into the (6) Criechton 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 _____ which accompanied the said Petition.

(SIGNED) M. Rhind

DATED this twentieth day of May One thousand eight hundred and fifty nine.

To the Superintendent of the (7) Criechton 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.

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Daniel McCallum
24/5/45

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 Thompson, Holloway House

Penrith humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Sudan Thompson 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 Sudan Thompson to the Crichton Royal Institution and to sanction ~~his~~ her admission into the said Asylum.

(SIGNED) John Thompson

(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 May one thousand eight hundred and fifty nine

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,	Sudan Thompson
2. Sex and Age,	Female Fifty Years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Gentlewoman
5. Religious Persuasion, so far as known,	Protestant Church of England
6. Previous Place of Abode,	Penrith
7. Place where Found and Examined,	Penrith
8. Length of time Insane,	Six months
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	about forty nine
11. When and where previously under Examination and Treatment,	at Dr Woodcot Institution Hammersmith London
12. Duration of existing Attack,	Six months
13. Supposed Cause,	Recent of life
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. 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,	Mr Thompson Holloway House, Penrith, Cumberland No one of family 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,* John Thompson

DATED this 24th day of May one thousand eight hundred and fifty Nine

* 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, Robert Pearson being a (1) Doctor of Medicine of the University of Edinburgh, a Member of the 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) Holloway in the Parish of Penrith in the County of Cumberland separately from any other Medical Practitioner visited and personally examined (4) Susan Thompson Gentlewoman of Holloway House Penrith and that the said Susan Thompson 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 that she is not married to her husband is jealous & suspicious & frequently refuses to take food

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Apprehends that Dr Gray is impeding her & friends, thinks that she is excommunicated — this information was communicated by

(SIGNED) *Name and Medical Designation,* Robert Pearson M.R.C.S. of England

Place of Abode, Queen St Penrith

DATED this 24th day of May One thousand eight hundred and fifty nine

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, Joseph Pearson being a (1) Doctor of Medicine of the University of Edinburgh, Member of the Royal College of Surgeons of England, and a Licentiate of the Hall London, General Practitioner and being in actual practice as a (2) hereby certify, on soul and conscience, that I have this day, at (3) Holloway House in the Parish of Penrith in the County of Cumberland separately from any other Medical Practitioner visited and personally examined (4) Susan Thompson Gentlewoman of Holloway House, Penrith and that the said Susan Thompson of Holloway House, Penrith 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)
Obstinately refuses to answer questions, and when induced to do so the answer bears no reference to the question asked, apparently extracted when she appears to know better, but soon appears to lapse into her former state.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Imagines that some serious calamity is about to happen.

(SIGNED) *Name and Medical Designation,* Joseph Pearson M.D.

Place of Abode, Mary Port Cumberland

DATED this 24th day of May one thousand eight hundred and fifty nine

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 Falconar Potter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of John Thomson Holloway House, Penrith Cumberland Certificates under the hands of Robert Pearson and Joseph 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 (3) Susan Thomson residing at Holloway House Penrith Cumberland and that the said Susan Thomson is a (4) Person of unsound mind and a proper Person to be detained and taken care of, no HEREBY AUTHORIZE you to receive the said Susan Thomson as a Patient into the (5) Public Asylum of Crichton Royal Institution and I authorise (6) the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Susan Thomson which accompanied the said Petition.

(SIGNED) John F. Potter

DATED this twenty sixth day of May one thousand eight hundred and fifty nine years

To the Superintendent of the (7) Public
Asylum of Crichton Royal 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.

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 George Lockie farmer Mayfield Lochmaben humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Henriette Lockie 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 Henriette Lockie to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) George Lockie

(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 fifty nine.

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,	Henriette Lockie
2. Sex and Age,	Female Aet 49
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Annuitant
5. Religious Persuasion, so far as known,	Free Church
6. Previous Place of Abode,	Mayfield Lochmaben
7. Place where Found and Examined,	do do
8. Length of time Insane,	2 months
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	49 years
11. When and where previously under Examination and Treatment,	No treatment
12. Duration of existing Attack,	2 months
13. Supposed Cause,	Rheumatic fever?
14. Whether subject to Epilepsy,	No Epileptic
15. Whether Suicidal,	threatens suicide
16. Whether Dangerous to others,	Assaults
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,	George Lockie farmer Mayfield Lochmaben brother
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	None of the family known to have been insane before

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

(SIGNED)* *Name,* George Lockie

DATED this ~~twenty fourth~~ day of May one thousand eight hundred and fifty nine

* 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.*

I, the undersigned, William Edward G. C. Dickson being a (1) Graduate of Edinburgh University and being in actual practice as a (2) Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Mayfield Lochinabee Gurnpus in the County separately from any other Medical Practitioner visited and personally examined (4) Henrietta Lockie residing at Mayfield Lochinabee and the said Henrietta Lockie 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Vacant staring eye seems frightened & constantly repeating the phrase "Oh! dear me." &c

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) supposed wrote to be about to attempt suicide frequently a day & has no doubt to do so

(SIGNED) *Name and Medical Designation,* W. Edward G. Dickson M.B.

Place of Abode, Lochinabee

DATED this twenty third day of May One thousand eight hundred and fifty nine

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.*

I, the undersigned, James Gabriel 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) Northwood Cowden Lodge Dumpus Dumpus in the County separately from any other Medical Practitioner visited and personally examined (4) Dorothy Lockie Resident at Mayfield Lochinabee and the said Henrietta Lockie 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Great Trepidation and dread of coming Evil, believes that every thing has gone wrong and that she is or ought to die

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) was discovered two days ago with a rope concealed & attempted for the purpose of destroying herself as stated by her brother

(SIGNED) *Name and Medical Designation,* James Gabriel M.D.

Place of Abode, Cowden Lodge Dumpus

DATED this twenty fifth day of May one thousand eight hundred and fifty nine

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, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) George Locke farmer in Maryfield, Lochmaben Certificates under the hands of William Edward Ingall Colpoys Bicknell 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) Henrietta Locke Maryfield Lochmaben and that the said Henrietta Locke is a (5) person of unsound mind and a proper Person to be detained and taken care of, no HEREBY AUTHORIZE you to receive the said Henrietta Locke 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 Henrietta Locke which accompanied the said Petition.

(SIGNED) John P. Trotter

DATED this 25th day of May one thousand eight hundred and fifty nine

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.

400
Constantia Lawton
25/5/59

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 Wigtown and his Substitutes.

The Petition of John McCallum, Inspector of Poor, Penninghame, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Gordon, Pauper, residing at Clashanessy 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 Gordon to the Crichton Royal Institution, Dumfries and to sanction her admission into the said Asylum.

(SIGNED) John McCallum, Inspector of Poor

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

DATED this seventeenth (3) day of May One thousand eight hundred and fifty nine

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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 Gordon
2. Sex and Age,	Female 32
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Indoor work
5. Religious Persuasion, so far as known,	Not known to Inspector
6. Previous Place of Abode,	Clashanessy
7. Place where Found and Examined,	Clashanessy
8. Length of time Insane,	Say from infancy
9. Whether first attack,	No
10. Age (if known) on first Attack,	Not known
11. When and where previously under Examination and Treatment,	
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,	Penninghame
18. Date of becoming Chargeable,	Previous to 1858
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,	Mr Gordon, Clashanessy, her father. No other member of the 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.

(SIGNED)* Name, John McCallum

DATED this seventeenth day of May One thousand eight hundred and fifty nine

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.

(6) *State the facts.*

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

I, the undersigned, Charles Smith
being a (1) ~~the~~ Licentiate of the 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) Clachaneasy
parish of Penninghame in the County of
Wigtown separately from any other Medical Practitioner,
visited and personally examined (4) Janet Gordon, Pauper, residing
at Clachaneasy and that
the said Janet Gordon 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) conversation and appearance

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

(SIGNED) *Name and Medical Designation,* Charles Smith Surgeon

Place of Abode, Newton Stewart,

DATED this 4th day of April One thousand eight hundred and fifty three

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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 Pearson
being a (1) ~~Licentiate of the Glasgow Archdeacons~~ University
Graduate of the College 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) Clachaneasy
parish of Penninghame in the County of
Wigtown separately from any other Medical Practitioner,
visited and personally examined (4) Janet Gordon, Pauper, residing
at Clachaneasy and that
the said Janet Gordon 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) From her appearance and actions

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

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

Place of Abode, Newton Stewart

DATED this 11th day of May One thousand eight hundred and fifty three

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 Dumfries
having had produced to me, with a Petition at the instance of (3) John McCallum Inspector of Poor Dumfriesshire
Certificates under the hands of Charles Smith Surgeon,
and John Pearson 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)
Janet Gordon, Pauper residing at Cluchanday and that the said
Janet Gordon is an (5) Idiot

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Janet Gordon as a Patient into the (6) Crichton ~~Asylum of~~ Royal 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 Gordon which accompanied the said Petition.

(SIGNED)

DATED this twentieth day of May One thousand eight hundred and fifty nine

To the Superintendent of the (7)
~~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.

711
James Fullerton
1/6/15-3

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 (*) Steward of the (*) Stewartry of Kirkcudbright and his Substitutes,—

The Petition of David Corbett Procurator Fiscal for the County of Kirkcudbright humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Rockhart Hannah Labourer presently prisoner in the Gaol 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 Rockhart Hannah to the Southern Counties Asylum at Dumfries and to sanction his admission into the said Asylum.

(Signed) David Corbett

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

Dated this Second (*) day of June One thousand eight hundred and fifty nine 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,	Rockhart Hannah
2. Sex and Age,	Male - aged 41 years
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	a Labourer
5. Religious Persuasion, so far as known,	a protestant
6. Previous Place of Abode,	Parish in the parish of Kells
7. Place where Found and Examined,	Found in the public road near Carsfad & examined
8. Length of time Insane,	by us at Kirkcudbright
9. Whether first attack,	being upon the twenty first day of May Eighteen hundred fifty nine
10. Age (if known) on first Attack,	Believed to be the
11. When and where previously under Examination and Treatment,	Not Known
12. Duration of existing Attack,	Not Known
13. Supposed Cause,	For nine preceeds of fourteen days
14. Whether subject to Epilepsy,	Not known
15. Whether Suicidal,	Not known
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Yes
18. Date of becoming Chargeable,	To the parish of Kells
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 Hannah Labourer in Carsfad is a Brother. Not known whether any members of his family have 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.

(Signed)* Name, David Corbett

Dated this Second day of June One thousand eight hundred and fifty

Nine

* To be signed by the Party applying.

P. T.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, John Sanderson Shand
being a (1) M.B. of University of Edin
and being in actual practice as a (2) Medical Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) Prison of Kirkcudbright
in the County of Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Lockhart Hannah a Pauper
and that
the said Lockhart Hannah is a (5) man 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 appearance & Conduct - delusion against Relatives, that he
Cats flying in the air - breaking the Windows - putting his clothes into
the fire & wasting the flour of his meal

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
by Keeper of Prison & infirmary - that he walked about muttering & Prayed the
whole Night

(SIGNED) Name and Medical Designation, John S Shand M.B. Surgeon

Place of Abode, Prison of Kirkcudbright

DATED this Second day of June One thousand eight
hundred and Fifty nine

(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.

I, the undersigned, David Blair
being a (1) L.R.C.S.E.
and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) the prison of Kirkcudbright
in the County of Kirkcudbright separately from any other Medical Practitioner,
visited and personally examined (4) Lockhart Hannah
Pauper
and that
the said Lockhart Hannah is a (5) man of un-
sound 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 conduct generally and mental
delusions

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

(SIGNED) Name and Medical Designation, David Blair Surgeon

Place of Abode, Kirkcudbright

DATED this second day of June One thousand eight
hundred and fifty nine

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

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

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

(4) *Insert 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) _____ 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, 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 Jenkins _____ Certificates under the hands of Colin Sanders Shand _____ and David 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) Rockhart Hannay a pauper _____ and that the said Rockhart Hannay _____ 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 Rockhart Hannay _____ 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 Rockhart Hannay _____ which accompanied the said Petition.

(SIGNED) W H Dunbar

DATED this Second day of June One thousand eight hundred and fifty nine years.

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.

7/2
Lee Michael Wamack
2/6/57

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 Dinwoodie, Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Mitchellson, 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 Mary Mitchellson to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John Dinwoodie, Insper

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

DATED this Third (3) day of June One thousand eight hundred and fifty nine

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 Mitchellson
2. Sex and Age,	Female. 26 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Poor — Domestic Servant
5. Religious Persuasion, so far as known,	Established Church of Scotland
6. Previous Place of Abode,	Morin's Close Dumfries
7. Place where Found and Examined,	Do. Do Do
8. Length of time Insane,	Two or More for twelve Months
9. Whether first attack,	Second Attack
10. Age (if known) on first Attack,	20 years
11. When and where previously under Examination and Treatment,	Southern Counties Asylum & Dumfries
12. Duration of existing Attack,	About twelve Months —
13. Supposed Cause,	Not certainly Known
14. Whether subject to Epilepsy,	No —
15. Whether Suicidal,	Has threatened such
16. Whether Dangerous to others,	Very disorderly —
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	3 June 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,	No No
20. Special circumstances (if any) preventing the insertion of any of the above particulars,	Not Certainly Known

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

(SIGNED)* *Name,* John Dinwoodie Inspector

DATED this Third day of June One thousand eight hundred and fifty nine

* 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, Wm Rogers Scott of the Faculty of Physicians and being a (1) Graduate of the University of Glasgow and Fellow 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) Thorns Close Dumfries Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary McNicholson and that, the said Mary McNicholson 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, frequently declares herself a Lost Creature, threatens violence against a woman who lives beside as the States she is a bad woman and keeps a Bro[thel]

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Mother declares that it is her daughter would murder her if she had the opportunity

(SIGNED) *Name and Medical Designation,* Robert Scott

Place of Abode, Buccleuch Street Dumfries

DATED this 23rd day of June One thousand eight hundred and fifty nine 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 Heron Grahame Graduate of the University of Edinburgh being a (1) and being in actual practice as a (2) Physician in Dumfries hereby certify, on soul and conscience, that I have this day, at (3) Thorns Cottage Dumfries Dumfries in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary McNicholson and that, the said Mary McNicholson 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 violent and excited, is restless, constantly moving about, impossible to detain, does not calm, at times, screams loudly, does not appear conscious of her position

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) The Mother states that she can say nothing (for instance) to calm her, and when she

(SIGNED) *Name and Medical Designation,* Patrick Heron Grahame M.D. Edin

Place of Abode, 99 Buccleuch Street Dumfries

DATED this 23rd day of June One thousand eight hundred and fifty

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 is One of Emergency, and I recommend the immediate removal of the said 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 Potter, Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of John Dunwoodie Inspector of Poor of the Parish of Dumfries Certificates under the hands of Wellesley Mitchell 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 Mary Mitchellson, residing in Mousedow, Dumfries and that the said Mary Mitchellson is 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 Mitchellson as a Patient into the (3) 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 Mary Mitchellson which accompanied the said Petition.

(SIGNED) John P Potter

DATED this fourth day of June One thousand eight hundred and fifty nine years

To the Superintendent of the (4) 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.

5/13
Mary Whitehead
1/6/53

20 & 21 *Vict., Cap.* 71, *Sect.* 84.

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 Mary Kerr or Nicholson 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 Kerr or Nicholson to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Dinwoodie

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

DATED this Tenth (3) day of June one thousand eight hundred and Fifty nine

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 Kerr or Nicholson
2. Sex and Age,	Female – 44 years
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Poor. Seamstress or Domestic Servant
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Dumfries & Southern Counties Asylum
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	Supposed to be about a week or Fortnight
9. Whether first Attack,	No.
10. Age (if known) on first Attack,	about 41 years
11. When and where previously under Examination and Treatment,	Dumfries & Southern Counties Asylum
12. Duration of existing Attack,	See Query No 8
13. Supposed Cause,	Intoxicating drinks
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	yes – said to have attempted to drown herself
16. Whether Dangerous to others,	Noisy & furious –
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
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,	No
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Not Exactly Known

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

(SIGNED)* *Name,* John Dinwoodie

DATED this Tenth day of June one thousand eight hundred and Fifty nine

* 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.*

I, the undersigned, William Marshall being a (1) Graduate of the Faculty of Physicians & Surgeons and College of Physicians and Surgeons and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Kirkgate Dumfries in the County of Dumfries separately from any other Medical Practitioner

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

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

visited and personally examined (4) Mary Nicholson and that the said Mary 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) Imagines that she is [illegible] the legs [illegible] great haste [illegible] that [illegible]

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Much the same as above

(SIGNED) *Name and Medical Designation,* William Marshall

Place of Abode, Buccleuch Street Dumfries

DATED this 19th day of June One thousand eight hundred and fifty nine 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.*

I, the undersigned, Patrick C Murray being a (1) Licentiate of the Edinburgh College of Physicians and Surgeons and being in actual practice as a (2) Physician in Dumfries hereby certify, on soul and conscience, that I have this day, at (3) Nith Bank Dumfries in the County of Dumfries separately from any other Medical Practitioner

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

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

visited and personally examined (4) Mary Nicholson and that the said Mary 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) Incoherent [illegible] [illegible] [illegible]

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, Alexander Hannay, Sheriff-Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dunwoodie
Inspector of Poor 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 Mary Nicholson residing in Kirkpatrick Dumfries and that the said Mary Nicholson is a Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Nicholson as a Patient into the (5) 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 Mary Nicholson which accompanied the said Petition.

(SIGNED) Alex Hannay

DATED this Tenth day of June one thousand eight hundred and Fifty nine.

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.

3/14

Mary Ann Nicholson

10/6/59

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 Mary Corson Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Bryson my daut 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 Bryson to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Mary Corson

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

DATED this seventeenth (3) day of June one thousand eight hundred and fifty nine

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 Bryson
2. Sex and Age,	Female 53
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Weaver
5. Religious Persuasion, so far as known,	Presbyterian
6. Previous Place of Abode,	Kirkbean
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	a week
9. Whether first Attack,	No
10. Age (if known) on first Attack,	Not Known
11. When and where previously under Examination and Treatment,	In Southern Counties Asylum Dumfries
12. Duration of existing Attack,	a week
13. Supposed Cause,	~~Not known~~ Hereditary
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,	Kirkbean
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,	Mrs Corson sister ~~Not known~~ a sister has been so
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,* Mary Corson

DATED this seventeenth day of June one thousand eight hundred and fifty nine

* 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, Alexander Goldwick
being a (1) Graduate of the University of Edinb
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) 100 [illegible] St
Street, Dumfries
Dumfries
in the County of
separately from any other Medical Practitioner
visited and personally examined (4) Helen Bryson
and that
the said Helen Bryson 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 excite
Incipient, incoherent talking

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr
Cecilia informs me that she is very excite
Inde not obtain, violent at times

(SIGNED) *Name and Medical Designation,* Alex Goldwick M.
Place of Abode, Dumfries
DATED this 16 day of June One thousand eight
hundred and fifty Nine

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 Aitchison MB
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) Bellevue
Crichton Asylum Dumfries
Dumfries
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Helen Bryson a Pauper
recently resident in Kirkcudbright
and that
the said Helen Bryson 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) Violence
to excitement speech incoherent

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Has slept little during the night
as stated by attendant

(SIGNED) *Name and Medical Designation,* Thomas Aitchison MB
Place of Abode, Crichton Royal Dumfries
DATED this twenty seventh day of June one thousand eight
hundred and fifty nine.

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 Helen Bryson is a (1) Person of unsound mind hereby further certify that the Case of the said Helen Bryson is One of Emergency, and I recommend the immediate removal of the said Helen Bryson to an Asylum accordingly.

Name, Alex. Borthwick. M. D

Place of Abode, Dumfries

DATED this 15th day of June one thousand eight hundred and fifty nine

(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 (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Mary Cowan in Dumfries Certificates under the hands of Alexander Borthwick 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) Helen Bryson a pauper and that the said Helen Bryson 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 Bryson 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 Helen Bryson which accompanied the said Petition.

(SIGNED) Alex Hannay

DATED this 15th day of June one thousand eight hundred and fifty nine 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.

Copy

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,*—

residing at Lower Ballynetty Ireland

The Petition of John Carson humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Carson 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 Carson to the Dumfries Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) John Carson

(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 June one thousand eight hundred and Sixty nine

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 Carson
2. Sex and Age,	Male 54
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Farmer
5. Religious Persuasion, so far as known,	Protestant Episcopalian
6. Previous Place of Abode,	Lagganallen Colvend Dee
7. Place where Found and Examined,	
8. Length of time Insane,	about four months
9. Whether first Attack,	Second
10. Age (if known) on first Attack,	44
11. When and where previously under Examination and Treatment,	Treated at home
12. Duration of existing Attack,	About four months
13. Supposed Cause,	Vexation
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. 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 Carson Brother Lower Ballynetty Ireland Sister and 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,* John Carson

DATED this eighteenth day of June one thousand eight hundred and Sixty nine.

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1260.

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.*

I, the undersigned, Alexander Mcknull being a (1) Surgeon and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Laggan Island in the County separately from any other Medical Practitione visited and personally examined (4) James Carson Farmer La and th

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

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

the said James Carson is a (5) Person of unso 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) From his hav Taken an ounce of laudanum some one

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) other circumstances as related by his f and stated in the an

(SIGNED) *Name and Medical Designation,* Alexander Mcknull

Place of Abode, Rushbrook Village

DATED this 16th day of June One thousand eigh hundred and

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.*

I, the undersigned, James Gibson 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) Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) James Carson Farmer Laggan Colvend in the County of Dumfries and, that

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

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

the said James Carson 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 de pression unprovoked attempts and fear - known to Protect himself from his suicidal tendencies

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Said to have taken an ounce of Laudanum to accomplish self de struction as stated by his brother.

(SIGNED) *Name and Medical Designation,* James Gibson MD

Place of Abode, Royal Institution Dumfries

DATED this eighteenth day of June one thousand eight hundred and [illegible]

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, Alexander Hannay (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Carson residing
at Lower Ballantyre, Ireland
Certificates under the hands of Alexander Maxwell Surgeon Kirkcam
and James Gilmour C Royal Institution, 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 (James Carson Farmer Laggan Colvend and that the said James Carson 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 Carson as a Patient into the (6) Public Asylum of Crichton Royal Institution and I authorise us Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Carson which accompanied the said Petition.

(SIGNED) A. Hannay

DATED this 18th day of June one thousand eight hundred and

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.

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Thomas Gibson
10/6/59

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 Peebles *and his Substitutes,—*

The Petition of Isaac M'Connell Inspector of Poor

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Marshall 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 Marshall to the Crichton Asylum, Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Isaac M'Connell

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

DATED this (3) day of June one thousand eight hundred and fifty nine

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 Marshall
2. Sex and Age,	33 years old
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Domestic Servant
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Whithorn
7. Place where Found and Examined,	
8. Length of time Insane,	About six weeks since first appearance of symptoms.
9. Whether first Attack,	
10. Age (if known) on first Attack,	First attack
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	Has threatened harm to herself & others
16. Whether Dangerous to others,	
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Whithorn
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,	Grace Marshall, her mother. Whithorn. Not Known
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, Isaac M'Connell

DATED this 16th day of June one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1260.

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 M^c Millan being a (1) Licentiate of Edinburgh 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) her House in Whithorn in the County of Wigtown separately from any other Medical Practitioner visited and personally examined (4) Mary Marsall a servant at Whi and th the said Mary Marthall 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) About six weeks a observed her manner changed: from being a quiet girl she became an talker, repeating the same thing without meaning, and very irritable with cation in so much that, she broke two panes of glass and had to be forcibly he prevent further damage. She has been more or less unmanageable ever since.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Relatives & Neighbours all say she unable to take care of herself

(SIGNED) *Name and Medical Designation,* Alex^r M^c Millan Surgeon

Place of Abode, Whithorn

DATED this 16th day of June One thousand eigh hundred and fifty nine

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 Broadfoot being a (1) ~~Surgeon~~ Licentiate of the Royal College of Surg Edinburgh, and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) her house in the main street of Whithorn in the County o Wigtown separately from any other Medical Practitioner visited and personally examined (4) Mary Marshal a servant girl in Whith and tha the said Mary Marshall 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) By her own account she frequently troubled with unusual perversion or illusions of the senses hearing, taste & smell. She sleeps ill at night in consequence of "queer thi seen in her head", and she often suspects her relatives and neighbours against her. She talks incessantly, and sometimes without coherence. She is

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) I learn from an authentic source that she pursued some she had done her no harm to a certain house, and broke some p of a window when she found the door bolted against her. Many other

(SIGNED) *Name and Medical Designation,* R^t Broadfoot Surgeon

Place of Abode, Whithorn

DATED this Sixteenth day of June one thousand eight hundred and fifty nine

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 Bayne advocate (1) Sheriff Substitute
of the (2) County of Nigtown
having had produced to me, with a Petition at the instance of (3) Isaac McConnell Inspector of Poor
Certificates under the hands of Alexander McMillan Surgeon
and Robert Bradfoot 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 Marshall, pauper, and that the said
Mary Marshall is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Marshall as a Patient into the (6) Crichton Asylum of 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 Mary Marshall which accompanied the said Petition.

(SIGNED) M. Bayne

DATED this twenty first day of June one thousand eight hundred and fifty nine

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, or Private.
(7) Public, District, or Private.

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Mary Brookes
22/6/59

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 Perth *and his Substitutes.*

The Petition of Agnes Laidlaw

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that her brother John Laidlaw at present a Patient in the Asylum of Perth 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 Laidlaw to the Asylum of Crichton Institution in Dumfries. May it therefore please your Lordship to authorize the Transfer of the said John Laidlaw to the Crichton R. Institution and to sanction his admission into the said Asylum accordingly.

(SIGNED) * Agnes Laidlaw

Designation,

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

DATED this 21st (3) day of June one thousand eight hundred and fifty nine.

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 Laidlaw
2. Sex and Age,	Male 60
3. Married, Single, or Widowed,	Widower
4. Condition of Life, and previous Occupation (if any),	Officer in the Army
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Haddington
7. Place where Found and Examined,	Perth Royal Asylum
8. Length of time Insane,	Other years
9. Whether First Attack,	Third Attack.
10. Age (if known) on First Attack,	26.
11. When and where previously under Examination and Treatment,	In Murray's Royal Asylum, Perth for 20 years.
12. Duration of Existing Attack,	17 years
13. Supposed Cause,	Jealousy
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,	Pauper
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 Laidlaw, sister of the Patient, residing in Haddington No relatives of the Patient 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,* Agnes Laidlaw

DATED this 21st day of June one thousand eight hundred and 59.

* 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.

I, the undersigned David R. Stirling being a (1) M.D. Edin. & L.R.C.S.E.
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Murray Royal
Perth
in the county of Perth
separately from any other Medical Practitioner, personally examined (4) Mr John Laidlaw
and that the said Mr John Laidlaw 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) *Here state the facts.*

1. Facts indicating Insanity observed by myself: (6)
He fancies himself the handsomest man living—demands universal respect is irritable when addressed by equals. Many delusions are apparent arising from the

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

2. Facts indicating Insanity communicated to me by others: (7) Mental state
The Physicians in charge of Murray's Institution fully confirm the above facts & state many others of the same morbid condition

(SIGNED) *Name and Medical Designation,* David R. Stirling M.D. Ed.

Place of Abode, 22 St John Street Perth

DATED this 24th day of June One thousand eight hundred and fifty nine

---

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.

I, the undersigned, John Lorimer
being a (1) M.D. and L.R.C.S.E. Edinburgh —
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Murray Royal
Asylum, Perth,
in the county of Perth
separately from any other Medical Practitioner, personally examined (4) Mr John Laidlaw —
and that the said Mr John Laidlaw 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) *Here state the facts.*

1. Facts indicating Insanity observed by myself: (6) Exhibits, to a morbid extent, a reserved and reserve disposition. Violent & fabricate. Imagines himself persecuted & superior acquirements, and observing the tendencies of fate coming

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

2. Facts indicating Insanity communicated to me by others: (7) contact with him — has delusions regarding his connection with Ladies of rank: disclaims all family connection & his daughter, who visited him lately
Subject occasionally to violent attacks of fury —

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

Place of Abode, Murray's Royal Asylum, Perth

DATED this 24th day of June One thousand eight hundred and fifty nine —

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

I, Hugh Barclay (1) Sheriff Substitute of the (2) County of Perth having had produced to me, with a Petition for Transfer at the instance of (3) James Laidlaw Certificates under the hands of David H Stirling MD Perth and John Fownes MD 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) John Laidlaw at present a patient in the Asylum of James Murray's Perth and that the said John Laidlaw 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 Laidlaw from the Asylum of Perth to the Asylum of Crichton Institution Dumfries and I authorize his Transmission to the Asylum of Dumfries accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Laidlaw which accompanied the said Petition.

(SIGNED) Hugh Barclay

DATED this twenty fourth day of June one thousand eight hundred and fifty nine.

To the Superintendent of the (6) Royal *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.

833

Mr John Liddiard

30/6/59

Certified Copy Judgment of the Steward Substitute of the Stewartry of Kirkcudbright pronounced in the Petition presented to him by David Hutchison Gordon, Esquire, Procurator Fiscal of said Stewartry against Margaret Collins or Wells now or lately wandering thro' the Stewartry.

"Kirkcudbright 28th June 1859. The Steward Substitute having considered this application with the Medical Certificate and the evidence adduced finds that the said Margaret Collins or Wells is a Lunatic and in a state threatening danger to the Lieges therefore grants warrant for committing her to the (Prison of Wigtown Kirkcudbright) Southern Counties Asylum at Dumfries there to be detained in terms of the 85th Section of the Act of Parliament referred to in the said application; & Decerns. Three words delete.

(signed) H H Dunbar"

A true Copy

J. M. Nicholson
Pro. Clk. Depute

for Nine Years

Inverness Courier, — Dec. — 57. — 2200.

* To be Signed by the Party applying.

833

Mr. John Liddlow

313

Margaret Collins or Wells
2/7/59

Certified Copy Interlocutor
In
Petition, The P. G.
of
M. Collins or Wells
3 June 1859

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) County of Dumfries *and his Substitutes,—*

The Petition of John Lowden Inspector of Urr

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Sharpe or McMillan 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 Sharpe or McMillan to the Southern Counties asylum and to sanction her admission into the said Asylum.

(SIGNED) John Lowden Insp. Urr

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

DATED this twenty eight (3) day of July one thousand eight hundred and fifty nine 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 Sharpe or McMillan
2. Sex and Age,	female. about 32 years
3. Married, Single, or Widowed,	married
4. Condition of Life, and previous Occupation (if any),	—
5. Religious Persuasion, so far as known,	—
6. Previous Place of Abode,	—
7. Place where Found and Examined,	Springholm
8. Length of time Insane,	about fourteen day
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,	—
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,	Urr
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 McMillan, husband, Not Known
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 Lowden Insp.

DATED this twenty eight day of July one thousand eight hundred and fifty nine years

* To be Signed by the Party applying.

Lidsey 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.*

I, the undersigned, John Paterson Lewis M.D 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) Springholm in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Jane Sharpe or McMillan Pauper and that the said Jane Sharpe or McMillan 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Insane expression countenance — says that it is a week six days, — Many questions when of the most simple nature will not answer at all and at times appear confused to give an answer

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She says that she made an attempt to drown herself. Told him that she had killed the minister of the parish & had his body under :- Insanity frequently that she is in hell

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

Place of Abode, Palbeattie

DATED this 28th day of July One thousand eight hundred and Fifty nine

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.*

I, the undersigned, ~~James Finlayson L.R.C.P.S.~~ James Finlayson M.D. Surgeon being a (1) Graduate of the University of Glasgow and being in actual practice as a (2) ~~Surgeon~~ Physician hereby certify, on soul and conscience, that I have this day, at (3) Springholm in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) Jane Sharpe or McMillan Pauper and that the said Jane Sharpe or McMillan 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Present appearance countenance Speaks rationally & when questioned the answers are rational & to the point as to what would be likely

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) She has frequently threatened to drown herself & has been in the habit of leaving the house at all hours of the night & when questioned by others she has given as her reason that she has killed the minister of the parish & that his body is under the sea & that she is in hell

(SIGNED) *Name and Medical Designation,* James Finlayson M.D

Place of Abode, Castle Douglas

DATED this 28th day of July one thousand eight hundred and Fifty nine

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, John Adam Depute Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of John Lowden Inspector of the Poor of the parish of Urr Certificates under the hands of John Patterson Lewis and James Findlay, 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 (3) James Sharpe or Millan wife of John M'Millan, Agricultural Labourer and that the said James Sharpe or M'Millan is a (4) Lunatic and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said James Sharpe or Millan as a Patient into the (5) 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 James Sharpe or M'Millan which accompanied the said Petition.

(SIGNED) John D. Adam

DATED this twenty ninth day of July one thousand eight hundred and 1919 nine years

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

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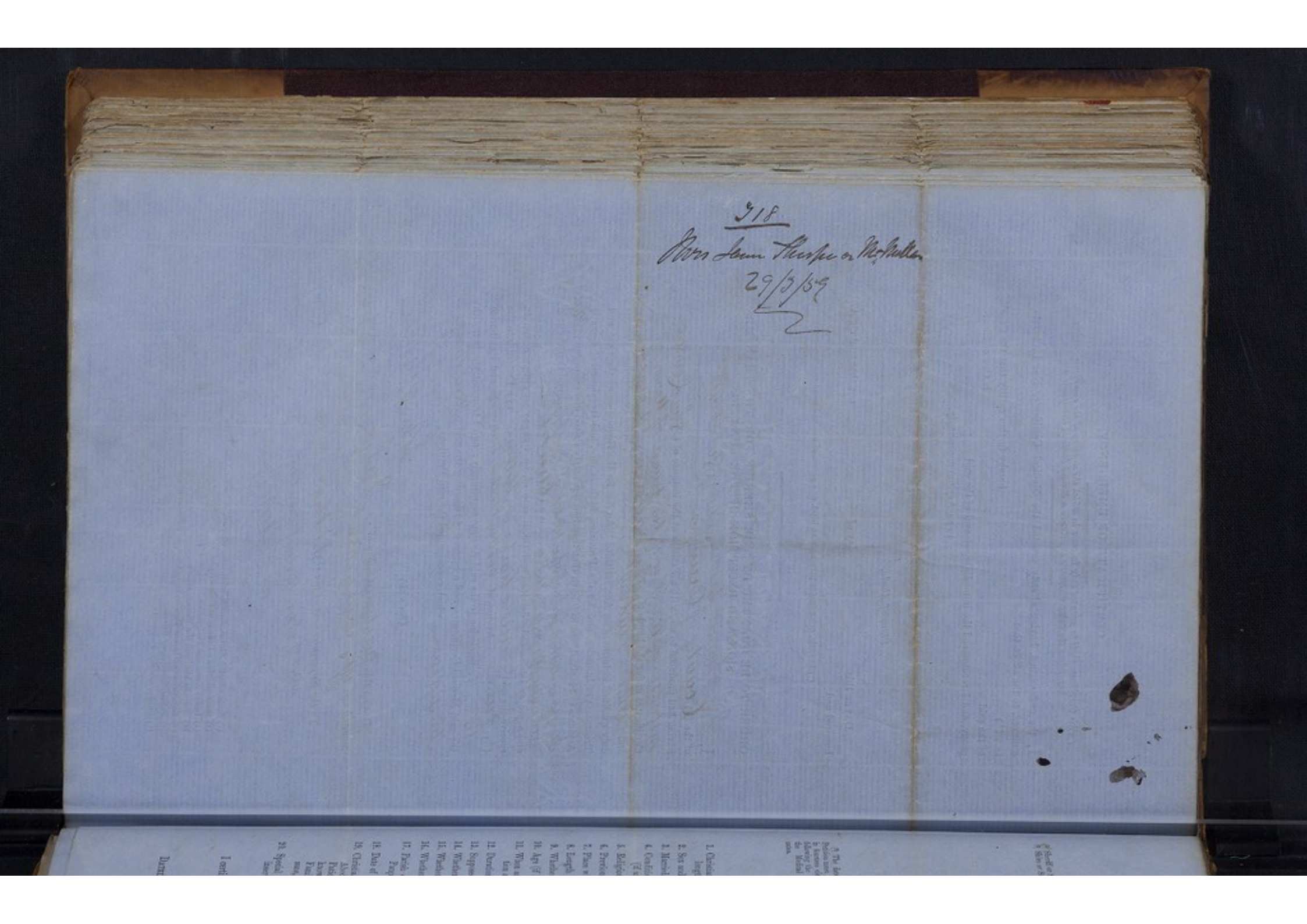
(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.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



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 John Dinwoodie Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Catharine Smith 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 Catharine Smith to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(Signed) John Dinwoodie

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

Dated this 30th (*) day of July One thousand eight hundred and fifty nine

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,	Catharine Smith
2. Sex and Age,	female 33 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Poor
5. Religious Persuasion, so far as known,	Roman Catholic
6. Previous Place of Abode,	Dumfries & Quebec in America
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	about four years
9. Whether first attack,	yes
10. Age (if known) on first Attack,	about 29 years
11. When and where previously under Examination and Treatment,	Quebec & Dumfries
12. Duration of existing Attack,	about four years
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	furious at times
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
18. Date of becoming Chargeable,	30 July 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,	The Patient had a brother, John Mr Chrystal who was also insane now deceased
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 Dinwoodie Inspector

Dated this 30th day of July One thousand eight hundred and fifty nine

* 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 Marshall being a (1) Graduate of the Faculty of Physicians and Glasgow and Fellow 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) New Road Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Catherine Smith and that the said Catherine Smith 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) Speaks incoher... does not recollect her own name or the ... the Lodge in Dumfries from which she ha... came yesterday. Has a flow Conversation with... person there, but forgets ...

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her Relatives state that she at times ... furious and very difficult of being ...

(SIGNED) *Name and Medical Designation,* William Marshall

Place of Abode, Buccleuch Street Dumfries

DATED this 30 day of July One thousand eight hundred and fifty nine 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 Heenan being a (1) Graduate of the University of ... and being in actual practice as a (2) Physician in Dumfries hereby certify, on soul and conscience, that I have this day, at (3) New Road Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Catherine Smith and that the said Catherine Smith 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 a confu... is unable to give a proper answer to ... questions put to her. Is very excitable ... abusive to a person in a house, is violent ... and is ... conducts herself.

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) As ... Attendant ... her state that ... time she is furious, & that they ... in the house, and can scarcely ... controll her.

(SIGNED) *Name and Medical Designation,* Patrick Heenan

Place of Abode ... Buccleuch ... Dumfries

DATED this 30 day of July One thousand eight hundred and fifty nine

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.

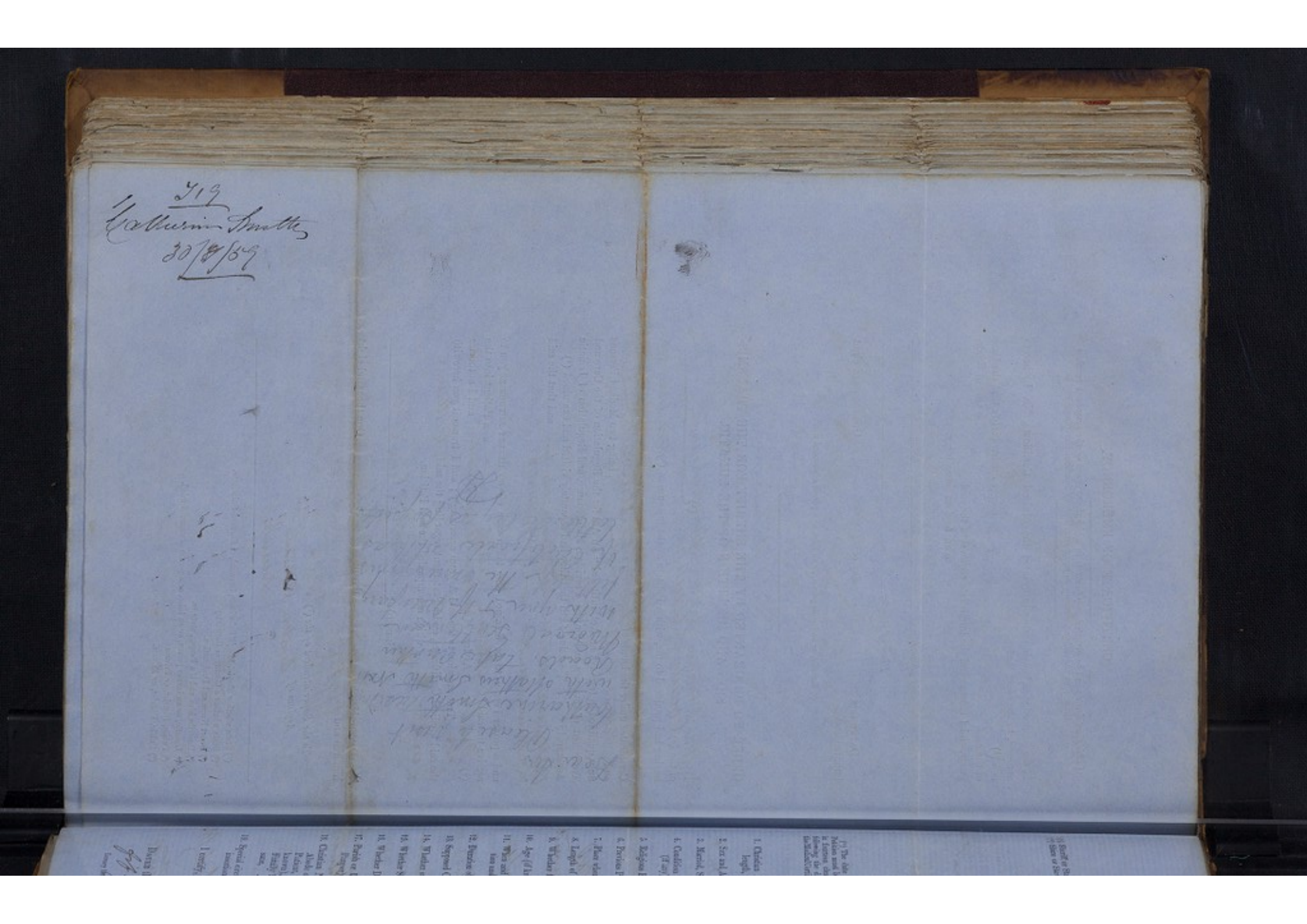
I, John Pitcairn Proctor Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Dunnoodie
Inspector of Poor, Dumfries
Certificates under the hands of William Marshall
and Patrick Murray, being two Medical Persons
duly qualified in terms 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 (4)
Catherine Smith, New Roads, Dumfries and that the said
Catherine Smith is a (5) Lunatic
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Catherine Smith as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorize per Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Catherine Smith which accompanied the said Petition.

(SIGNED) John P. Proctor

DATED this 30th day of July One thousand eight hundred and fifty nine

To the Superintendent of the 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.



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 Eliza Caldwell

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Shields 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 William Shields to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(Signed) Eliza Caldwell

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

Dated this twenty fifth (*) day of July one thousand eight hundred and fifty nine

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 Shields
2. Sex and Age,	Male - age - 28
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Painter
5. Religious Persuasion, so far as known,	
6. Previous Place of Abode,	Crichton Institution Dumfries
7. Place where Found and Examined,	Do
8. Length of time Insane,	Eight years
9. Whether first Attack,	Second
10. Age (if known) on first Attack,	Twenty Years
11. When and where previously under Examination and Treatment,	Crichton R. Institution Dumfries
12. Duration of existing Attack,	Some months
13. Supposed Cause,	
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,	
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,	Eliza Caldwell Sister Dumfries not known
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,* Eliza Caldwell

Dated this twenty fifth day of July one thousand eight hundred and fifty nine

* 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, James Greene
being a (1) Graduate of Medicine of the University Edinburgh, &c
and being in actual practice as a (2) Physician
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 Shields Pauper resident in the Crichton Royal Institution and that the said William Shields 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 depression of mind, listless, morose and totally incapable, bodily and Mental exertion

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

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

(SIGNED) *Name and Medical Designation,* James Greene M.D. Surgeon

Place of Abode, Dumfries

DATED this 24th day of July One thousand eight hundred and fifty-nine

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 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) William Shields Pauper resident at Crichton Royal Institution Dumfries and that the said William Shields 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) depressed, taciturn, Catharsis, inaptitude for work or occupation

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

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

(SIGNED) *Name and Medical Designation,* James Aitchison M.D

Place of Abode, Crichton Royal Dumfries

DATED this twenty fifth day of July one thousand eight hundred and fifty-nine

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 D. Trotter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of Eliza Caldwell residing in Irvine Certificates under the hands of James Greive, Physician, Dumfries. and James Redmond, Auchlochan Institution, 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 Shields, pauper, present in the Crichton Institution and that the said William Shields 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 Shields as a Patient into the (6) Public Asylum of Southern Counties at Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Shields which accompanied the said Petition.

(SIGNED) John D. Trotter

DATED this twenty seventh day of July one thousand eight hundred and fifty nine

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.

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 Dinwoodie, Inspector of Poor for the Parish of Dumfries, humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Murdoch or Carrie 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 Murdoch or Carrie to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) John Dinwoodie, Inspector

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

DATED this 2nd (3) day of August one thousand eight hundred and fifty nine

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 Murdoch or Carrie
2. Sex and Age,	Female 2[illegible] 40 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Married
5. Religious Persuasion, so far as known,	Belongs to the Established Church of Scotland
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	About two weeks
9. Whether first Attack,	Second attack
10. Age (if known) on first Attack,	39 years
11. When and where previously under Examination and Treatment,	Dumfries
12. Duration of existing Attack,	About two weeks
13. Supposed Cause,	The use of Intoxicating liquors
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Has never been so as yet
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Dumfries
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,	Not Known
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	[illegible]

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

(SIGNED)* Name, John Dinwoodie, Inspector

DATED this 2nd day of August one thousand eight hundred and fifty nine

* 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, Alexander Borthwick M. [illegible] 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 County Police Office, English Street, Dumfries, in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Ellen Currie the said Ellen Currie 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. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Found her talking in a loud incoherent manner, Was using use of obscene and violent language

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Mr Dinwoodie informs me that she was in the same condition for two days past

(SIGNED) *Name and Medical Designation,* Alex Borthwick M. [illegible]

Place of Abode, Dumfries

DATED this 22d day of July One thousand eight hundred and fifty nine

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 Marshall being a (1) Graduate of the Faculty of Physicians & Surgeons Glasgow & Licentiate of the 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) the County Police Office Dumfries in the County of Dumfries, separately from any other Medical Practitioner, visited and personally examined (4) Ellen Currie the said Ellen Currie 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. :—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) Was dressed fully & acted and spoke [illegible] talked incoherently and in fits of [illegible] & suffering from Insanity & was out of [illegible] (Marks)

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Much the same as above

(SIGNED) *Name and Medical Designation,* W Marshall

Place of Abode Buccleuch Street Dumfries

DATED this 30th day of July one thousand eight hundred and fifty nine 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 Ellen Currie is a (1) Lunatic hereby further certify that the Case of the said Ellen Currie is One of Emergency, and I recommend the immediate removal of the said Ellen Currie to an Asylum accordingly.

Name, Wm Forsythe M. Ch. D

Place of Abode, Dumfries

DATED this 2d day of August one thousand eight hundred and fifty nine

(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 Stoan Inglis Sheriff Substitute (2)
of the (3) County of Dumfries
having had produced to me, with a Petition at the instance of John Dunwoody Inspector of Poor Dumfries
Certificates under the hands of Alexander Bertram
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) Ellen Murdoch or Currie residing in Dumfries and that the said Ellen Murdoch or Currie is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Ellen Murdoch or Currie 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 Ellen Murdoch or Currie which accompanied the said Petition.

(SIGNED) John S. Inglis

DATED this 2d day of August one thousand eight hundred and fifty nine

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

321
Helen Murdock or Porter
2/6/59

Certified copy Judgment of the Steward Substitute of Kirkcudbright in the Petition presented at the instance of David Nicholson Gordon, Procurator Fiscal of the Stewartry of Kirkcudbright, against Catharine Hayland or Flyn, wife of Patrick Flyn, Mason; residing in Balbeattie, in the Parish of Urr.

"At Kirkcudbright the Twenty seventh day of July, Eighteen hundred and fifty nine years, The Steward Substitute having considered the said Petition, Medical Certificate, Public Advertisements, and evidence adduced in support of this Application, finds that the said Catharine Hayland or Flyn, is a lunatic and in a state threatening to be dangerous to the Liege, and therefore grants warrant to commit the said Catharine Hayland or Flyn to the Southern Counties Asylum at Dumfries, until she

J. M. Nicholson

DATED this 30th day of August one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1000.

she shall be cured of her lunacy, or
under sufficient caution shall be
found acted in the Books of this
Court for her safe custody elsewhere
under a penalty to be specified
upon application made thereanent,
and the Managers, Directors, and
Keepers of the said Asylum are
hereby authorised to receive the
said Catharine Hayland or Flyn
accordingly; Finds from the evidence
adduced that the said Catharine
Hayland or Flyn is a pauper and
unable to defray the expense of
her Keeping and Maintenance
in said Asylum, and in respect
the Parish of Urr in this Stewartry
is the Parish in which the said
Catharine Hayland or Flyn was
apprehended; Therefore decerns
in favour of David Hutchison
Gordon, Esqr. Procurator Fiscal of
Court against the said Parish
of Urr for the amount of the
Annual

Wm Nicholson

£21 Allow Thousands or Pauper

annual keeping and maintenance of the said Catharine Hayland or Flyn in said Asylum, said sum to be paid quarterly and in advance by equal instalments, commencing the first terms payment upon the date of admission of the said Catharine Hayland or Flyn to said Asylum and thereafter quarterly and termly so long as the said Catharine Hayland or Flyn shall continue an inmate of said Asylum in virtue of this warrant; Further finds the said parish of Urr liable to the Petitioner in the Expenses of Apprehending the said Catharine Hayland or Flyn and of the present enquiry as the same shall be taxed by the Auditor of this Court. To whom remits the said Account when lodged, reserving always to the said Parish of Urr recourse against all others who may be liable for the keeping and maintenance of the said

Wm Nicholson

DATED this [illegible] day of August one thousand eight hundred and [illegible]

* To be Signed by the Party applying.

said Catharine Hayland or Flynn and the said Expenses as accords of law; and further grants warrant for committing the said Catharine Hayland or Flyn to the Prison of Kirkcudbright, or to the custody of Christina McRobert or Price, as a place of safe custody until her transmission to said asylum & Decems. (signed) H. H. Dunbar

A true copy. Certified by

Wm. Nicholson
Steward Clerk Depute.

No 21
Petition Thos Clarke or Boyle

DATED this 20th day of August one thousand eight hundred and Fifty Nine

* To be Signed by the Party applying.

Lunacy Board.—Dec.—37.—1200.

721

Helen Thursdon or Boris

722

Catherine Hayland
or Flynn

2/8/59

Certified Copy
Steward Substitutes Judg-
ment &c.

The Procurator Fiscal
of
Catharine Hayland or Flyn

1859

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 Malcolm McFarlane Inspector of Poor Lesmahagow Lanarkshire humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Andrew Parker 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 Andrew Parker to the Crichton Royal Institution, Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Malcolm M'Farlane

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

DATED this tenth (3) day of August one thousand eight hundred and fifty nine.

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 Parker
2. Sex and Age,	Male 42 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Carpenter
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	202 High Street, Dumbarton & Lately Garnyad Asylum Glasgow
7. Place where Found and Examined,	Garnyad Asylum - Glasgow
8. Length of time Insane,	nearly five years
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	about 37 years
11. When and where previously under Examination and Treatment,	From May 4th 1859 till August 9th 1859 in Garnyad Asylum - Glasgow
12. Duration of existing Attack,	about five years
13. Supposed Cause,	Sun Stroke, while in Australia
14. Whether subject to Epilepsy,	Not
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	Has to before being brought to Garnyad Asylum Has not been so while there
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Lesmahagow - Lanarkshire
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 Parker 202 High Street, Dumbarton is his father None known 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, Malcolm M'Farlane

DATED this tenth day of August one thousand eight hundred and fifty nine

* 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, James Ker
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) Gamped Asylum Glasgow in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (4) Andrew Parker Carpenter at present an inmate of Gamped Asylum and a pauper, and that the said Andrew Parker 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 a sullen and downcast expression of Countenance – is generally very taciturn and reserved – frequently will not answer when addressed – rambling in his discourse – is at times low and desponding and has an inclination to destroy himself

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His father told me that shortly before being brought to Gamped Asylum he attempted to kill him (i.e. his father)

(SIGNED) *Name and Medical Designation,* Jno Ker – M.D.

Place of Abode, Gamped Asylum – Glasgow

DATED this Eighth day of August One thousand eight hundred and fifty nine

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 Welker
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) Gamped Asylum Glasgow in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (4) Andrew Parker a Carpenter but a pauper at present an inmate of Gamped Asylum and that the said Andrew Parker 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 a nervous Sullen Expression of Countenance, he talks incoherently and frequently shows a disinclination to Suicide

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

(SIGNED) *Name and Medical Designation,* David Welker Surgeon

Place of Abode 71 Leadhall St Glasgow

DATED this Eighth day of August one thousand eight hundred and fifty nine

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 Andrew Parker is a (1) person of unsound mind hereby further certify that the Case of the said Andrew Parker is One of Emergency, and I recommend the immediate removal of the said Andrew Parker to an Asylum accordingly.

Name, James Hill - M.D.

Place of Abode, Gamrie Aberdeenshire

DATED this Eighth day of August one thousand eight hundred and fifty nine

(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 Cumming (1) Sheriff Substitute of the (2) County of Banffshire having had produced to me, with a Petition at the instance of Malcolm M'Farlane Inspector of Poor, Lesmoir Aberdeenshire Certificates under the hands of James Hill, M.D. Gamrie and David 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 (3) Andrew Parker, lately an inmate of Banff Asylum and that the said Andrew Parker is a (4) person of unsound mind

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Andrew Parker as a Patient into the (5) 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 Andrew Parker which accompanied the said Petition.

(SIGNED) Alexander

DATED this Tenth day of August one thousand eight hundred and fifty nine

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.
(7) Public, District or Private.

423
Anderson Robert
9/8/52

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 The Inspector of the Poor Parish of Hoddom humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Ann Scott 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 Hoddom

(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 August One thousand eight hundred and fifty nine

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,	47 Years
3. Married, Single, or Widowed,	Widowed
4. Condition of Life, and previous Occupation (if any),	Home Servant
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Lockerbie
7. Place where Found and Examined,	Lockerbie
8. Length of time Insane,	attacks since 1854
9. Whether first attack,	No
10. Age (if known) on first Attack,	42 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,	No
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	No
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Hoddom
18. Date of becoming Chargeable,	25 Dec. 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,	Ann Cunningham Lockerbie — Mother Father was reckoned Silly
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 Inspector of Poor Hoddom

DATED this Fifteenth day of August One thousand eight hundred and fifty nine

* To be signed by the Party applying.

P. p.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, William Bell of Surgeon Royal Navy being a (1)

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 County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Ann Scott Pauper and that the said Ann Scott being a lunatic she 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) she is conscious that her mind is so far unsound as to as render her unable to do what is right and on the same State of Mind in which she has been when admitted into the Lochside Institution from time to

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

(SIGNED) Name and Medical Designation, } Surgeon R. N

Place of Abode, Smallholm Ecclefechan

DATED this 17th day of Aug One thousand eight hundred and fifty Nine.

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

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

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

(4) *Insert 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 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) the village of Ecclefechan, Parish of Hoddam 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.:—

1. Facts indicating Insanity observed by myself: (6)
She is very much depressed in mind, restless, unwilling to take food, and in much the same state of mind as she was a few years ago, when she attempted to commit Suicide

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 16th day of August One thousand eight hundred and fifty nine

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

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

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

(4) *Insert 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, Alexander Hannay (1) Sheriff Substitute of the (2) County of Dumfries & William Graham having had produced to me, with a Petition at the instance of (3) Inspector of Poor of Hoddam Certificates under the hands of William Bell 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 Scott, in Ecclefechan, a pauper, and that the said Ann Scott is a (5) Lunatic and 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 the 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) A. Hannay

DATED this Sixteenth day of August One thousand eight hundred and fifty nine

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.

No 26
Anne Hesse
10/10/57

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 Robert Hetherington Penrith Cumberland humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Moses Hetherington was last Nov 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 Moses Hetherington to the Carlisle Royal Infirmary and to sanction his admission into the said Asylum.

(SIGNED) Robert Hetherington

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

DATED this 25th (3) day of August one thousand eight hundred and fifty nine

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,	Moses Hetherington
2. Sex and Age,	Male 36
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Clergyman
5. Religious Persuasion, so far as known,	Episcopal Church
6. Previous Place of Abode,	Penrith Cumberland
7. Place where Found and Examined,	do do
8. Length of time Insane,	about ten months
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	35
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	
13. Supposed Cause,	Intemperance doubtful
14. Whether subject to Epilepsy,	
15. Whether Suicidal,	Doubtful
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,	Joseph Hetherington father Penrith Cumberland None Known
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,* Robert Hetherington

DATED this twenty fifth day of August one thousand eight hundred and fifty nine years

* To be Signed by the Party applying.

Stanley 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.*

I, the undersigned, Edward Bowman being a (1) Licentiate of the Royal College of Surgeons Edinburgh & Licentiate of Apothecaries Hall London and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Rickerby in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) the Revd. Moses Hetherington and that the said Revd. Moses Hetherington 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Mental Recklessness extreme restlessness of body - tearing his hair off by the roots on floor on the neck, the result of self inflicted violence -

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) at the common commencement of his attacks he corresponded with imaginary persons by letters, all of which were destroyed by the relatives -

(SIGNED) *Name and Medical Designation,* Edward Bowman Surgeon

Place of Abode, Castle Street Carlisle

DATED this 24th day of August One thousand eight hundred and fifty three.

MEDICAL CERTIFICATE, No. II.

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

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

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

I, the undersigned, George Bonnersley being a (1) Member of the Royal College of Surgeons of England & 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) Rickerby in the County of Cumberland separately from any other Medical Practitioner, visited and personally examined (4) the Revd. Moses Hetherington a clergyman residing at Rickerby Cumberland and that the said Revd. Moses Hetherington 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) I have observed persistent state of his intellect & memory generally - he had on instance an Abscess [illegible] in his arm some time ago - he remonstrated on occasions by saying that some horrible instrument was used & [illegible] a state of excitement in relating it to me -

(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 relatives at his own home that he suffers frequently from sleepless nights - & that he is during such periods much excited - so much so, that he requires a constant male attendant.

(SIGNED) *Name and Medical Designation,* Geo: Bonnersley Surgeon

Place of Abode, Carlisle.

DATED this 17th day of August one thousand eight hundred and fifty three.

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 farther 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, Alexander Hannay (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Hetherington Rickerby Cumberland Certificates under the hands of Edward Rowman and George Temperley, 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 the Reverend Moses Hetherington of Rickerby aforesaid and that the said Moses Hetherington is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Moses Hetherington as a Patient into the (5) Public Asylum of Crichton Royal Institution Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Moses Hetherington which accompanied the said Petition.

(SIGNED) A. Hannay

DATED this twenty fifth day of August one thousand eight hundred and fifty three years

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.

£36
Moses Nettleton
25/8/1853

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 Joseph Wells, Inspector of Poor

Maxwelltown humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Gibson 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 Gibson, farm servant, Maxwelltown, Roxb. to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Joseph Wells

(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 August one thousand eight hundred and Fifty three 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,	John Gibson
2. Sex and Age,	Male 53 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,	Established Church
6. Previous Place of Abode,	Maxwelltown Roxburgh
7. Place where Found and Examined,	Do Do
8. Length of time Insane,	3 weeks at least.
9. Whether first Attack,	First Attack
10. Age (if known) on first Attack,	53 years
11. When and where previously under Examination and Treatment,	There is good reason for believing that excessive use of snuff is the cause — he frequently uses 3 oz before breakfast —
12. Duration of existing Attack,	
13. Supposed Cause,	
14. Whether subject to Epilepsy,	Not so far as can be ascertained.
15. Whether Suicidal,	Yes
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Roxburgh
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,* Joseph Wells Inspector Roxburgh

DATED this Thirty first day of August one thousand eight hundred and Fifty three

* 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, John Chisholm 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) 6 Church Maxwelltown Kirkcudbright in the County separately from any other Medical Practitioner visited and personally examined (4) John Gibson a Pauper and that the said John Gibson a Person is at (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.:—

1. Facts indicating Insanity observed by myself: (6)
Delusions — Confusion of Ideas — Violence —

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Wife says that she cannot keep him in a fit the Lunatic Night — That he has attempted suicide — & has threatened to murder her

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

Place of Abode, Buccleuch Street

DATED this 30th day of August One thousand eight hundred and fifty nine

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 Robertson M.D. being a (1) Graduate of the University of Edin Physician & Surgeon hereby certify, on soul and conscience, that I have this day, at (3) 6 Church Street, Maxwelltown Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) John Gibson a Pauper and that the said John Gibson 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) Incoherent & Confusion - Delusions, Impaired Intellect

2. Other facts (if any) indicating Insanity communicated to me by others (7) Wife states that he is often outrageous and violent towards her, and that he has attempted Suicide

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

Place of Abode, Dumfries

DATED this 30th day of August one thousand eight hundred and fifty nine

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, Alexander Stanway (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 of the parish of Dryfesdale, Stewartry of Kirkcudbright Certificates under the hands of John Gibson 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) John Gibson, residing at 6 Church St Maxwelltown and that the said John 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 John Gibson as a Patient into the (6) Public Asylum of Southern Counties Asylum Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said John Gibson which accompanied the said Petition.

(SIGNED) A. Stanway

DATED this thirty first day of August one thousand eight hundred and fifty nine

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.

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 Cumfries *of the* (2) Shire *and his Substitutes,—*

The Petition of Samuel Maxwell Banks

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Samuel Maxwell Banks Esq Snr 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 Maxwell Banks to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Samuel Maxwell Banks

(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 August one thousand eight hundred and fifty nine

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, ... Wm Samuel Maxwell Banks
2. Sex and Age, ... Male
3. Married, Single, or Widowed, . . . Married – 2 young Children
4. Condition of Life, and previous Occupation (if any), . . . Surgeon – Acquired money also in China by trade in Musk, & other drugs – also in Australia by Stock farming –
5. Religious Persuasion, so far as known, . . Presbyterian
6. Previous Place of Abode, In Carlisle for last year & a half – Abroad for 12 years in China & 5 years in Australia
7. Place where Found and Examined, Abbey St Carlisle
8. Length of time Insane, Eight or ten days Monomania
9. Whether first Attack, Yes
10. Age (if known) on first Attack, About forty seven years
11. When and where previously under Examination and Treatment, . . . Carlisle
12. Duration of existing Attack, 8 or 10 days
13. Supposed Cause, Pecuniary Speculations – Mr Hunter his partner turned bad & absconded after robbing him – in Australia & Declaration of the New Rushes turned out only middling
14. Whether subject to Epilepsy, No
15. Whether Suicidal, ... Not – has once or twice perhaps thrice had a slight and transient Hemiplegic attack
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, ... Wm Samuel Maxwell Banks – his father – of Dalbeattie – a retired Farmer Mrs Maxwell Banks – his wife – Carlisle
19. Special circumstances (if any) preventing the insertion of any of the above particulars, None known

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

(SIGNED)* *Name*, Samuel Maxwell Banks

DATED this 31st day of August one thousand eight hundred and 59

* 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, being (1) Physician & Doctor of Medicine Robert Elliott Hodgkin
(2) Physician and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Carlisle
in the County of Cumberland separately from any other Medical Practitioner,
visited and personally examined (4) Mr Samuel Maryonbanks Surgeon and that
the said Mr Maryonbanks is a (5) mental & disordered Patient, 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 speech wandering & desultory showing his mind wandering from subject to subject as if flying over all Carlisle & the one a thousand pounds sterling for a penny stamp

(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,* Robert Elliott Hodgkin

Place of Abode, 5 Crescent Carlisle

DATED this 30th day of August One thousand eight hundred and fifty nine.

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, Edward Bowman being a (1) Licentiate of the Royal College of Surgeons Edinburgh & Licentiate of Apothecary's Hall
(2) Surgeon and being in actual practice as a (2) Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Castle Street
in the County of Cumberland separately from any other Medical Practitioner,
visited and personally examined (4) Samuel Maryonbanks Surgeon and that
the said Samuel Maryonbanks 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 declarations that he had purchased the Street in which he resides - that for a penny stamp he could realise a thousand pounds - and other wild notions of his position and 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 about to be made a peer of the realm - & that he had purchased the town of Carlisle and adjacent coast -

(SIGNED) *Name and Medical Designation,* Edward Bowman

Place of Abode, Castle Street Carlisle

DATED this 31st day of August one thousand eight hundred and fifty nine -

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 Mr Samuel Marjoribanks Dumfries is a (1) Mentally deranged person, hereby further certify that the Case of the said Mr Samuel Marjoribanks is One of Emergency, and I recommend the immediate removal of the said Samuel Marjoribanks Dumfries to an Asylum accordingly.

Name, Robert Elliot M.D.

Place of Abode, 2 The Crescent Carlisle

DATED this 31st day of August one thousand eight hundred and fifty nine

(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 Kennedy (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Samuel Marjoribanks, Carlisle Cumberland Certificates under the hands of Robert Elliot and Edward Bowman, 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 Samuel Marjoribanks son of the said Samuel Marjoribanks and that the said Samuel Marjoribanks is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Samuel Marjoribanks as a Patient into the (5) Public Asylum of Crichton Royal Institution Dumfries and I authorise his Transmission to the said Asylum accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Samuel Marjoribanks which accompanied the said Petition.

(SIGNED) Alex Kennedy

DATED this First day of September one thousand eight hundred and fifty nine

To the Superintendent of the (7) Public

Asylum of Crichton Royal 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.

837

Samuel Margoshes

31/5/65

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 William Hamilton Inspector of Poor Holywood.

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Jane Morine or Adamson 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 Morine or Adamson to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) William Hamilton Inspector Holywood.

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

DATED this fifth (*) day of September one thousand eight hundred and fifty nine 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 Morine or Adamson.
2. Sex and Age,	Female.
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Farmer's daughter - assisting in working the farm.
5. Religious Persuasion, so far as known,	A Member of the Church of Scotland.
6. Previous Place of Abode,	Holywood.
7. Place where Found and Examined,	Morington Holywood.
8. Length of time Insane,	Since last Spring.
9. Whether first Attack,	Yes.
10. Age (if known) on first Attack,	About 60 years of age.
11. When and where previously under Examination and Treatment,	None.
12. Duration of existing Attack,	Since last Spring.
13. Supposed Cause,	Not Known.
14. Whether subject to Epilepsy,	Not so.
15. Whether Suicidal,	Longs for death.
16. Whether Dangerous to others,	Not dangerous.
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Chargeable to the Parish Holywood.
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,	Her husband's name is Thomas Morine residing at Morington in the Parish of Holywood. None known to have been 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, William Hamilton Inspector Holywood

DATED this fifth day of September one thousand eight hundred and fifty nine 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.

(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) Mornesby
in the County o
separately from any other Medical Practitioner
visited and personally examined (4) Jane Morine or Adam
and that
the said Jane Morine 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)

She is moch insane. Melancholic and
thinks she is about to be destroyed, an
longs for death.

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

Her husband says she has been de
since the Spring. and runs out of her
house unclothed and thinks that every thing
is going to kill her

(SIGNED) *Name and Medical Designation,* William Scott

Place of Abode, Annfield

DATED this 5th day of September One thousand eight
hundred and 59

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 Borthwick
being a (1) Graduate of the University of Edinburg
and being in actual practice as a (2) Physician & Surgeon
hereby certify, on soul and conscience, that I have this day, at (3) Mornington
in the parish of Holywood and
in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Jane Morine a Adamson
a Pauper and that
the said Jane Morine or 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) Is melancholic
melancholic labours under delusion
and wishes she were destroyed

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

Husband states that she wanders from home, that
often cries aloud, gets not undressed and longs for death

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

Place of Abode Annfield

DATED this 2d day of September one thousand eight
hundred and fifty nine

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

(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, Mr Pleasance Fyfer Sheriff Substitute of the (1) County of Dumfries having had produced to me with a Petition at the instance of (2) William Hamilton Inspector of Poor of Holywood and Certificates under the hands of William Scott M.D. and Alexander Borthwick 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 (3) Jane Morrice or Dowson at Kirkmahoe, a pauper and that the said Jane Morrice or Dowson is a (4) person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Jane Morrice or Dowson as a Patient into the (5) 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 Morrice or Dowson which accompanied the said Petition.

(SIGNED) Pleasance Fyfer

DATED this Fifth day of September one thousand eight hundred and fifty nine years

To the Superintendent of the (6) 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.

No 23
Lewis Mortimer or Adams
5 St 155

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 Substitute of the (2) Stewartry of Kirkcudbright *and his Substitutes,*—

The Petition of Robert Webster

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander McMath, my brother-in-law 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 McMath to the Asylum at Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Robert Webster

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

DATED this 27th (3) day of September one thousand eight hundred and fifty nine

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 McMath
2. Sex and Age,	Male — 47 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Member of Presbyterian Church of England
5. Religious Persuasion, so far as known,	London
6. Previous Place of Abode,	Sheriff of Kells
7. Place where Found and Examined,	two years
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,	two years
12. Duration of existing Attack,	Losses in business
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. 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 Webster, Sheriff of Kells his Wife. No Member of his family known to the insane that I am aware of
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,* Robert Webster

DATED this 27th day of September one thousand eight hundred and fifty nine

* 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.

I, the undersigned, Patrick Anderson L.R.C.S. Edin being a (1)

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

and being in actual practice as a (2) General Practitioner

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

hereby certify, on soul and conscience, that I have this day, at (3) Lands of Ke in the County o separately from any other Medical Practitioner,

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

visited and personally examined (4) Alex. McMath, Draper, La London now residing at Lands of Kells and tha

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

the said Alex. McMath is a (5) person of un 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) Extreme melanc and depression concerning his Pecuniary affairs, and delusion concerning his bodily condition – he inform me that he has not slept for two years

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) his wife informs me that he attempted on on occasion to poison himself with laudanum, and sometimes of cutting his throat – he threatens himself

(SIGNED) *Name and Medical Designation,* Patk. Anderson L.R.C.

Place of Abode, Castle Douglas

DATED this Twenty fifth day of September One thousand eight hundred and Fifty Nine

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.

I, the undersigned, James Laidlaw being a (1) Licentiate of the Royal College of Surgeons of Edinburgh

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

and being in actual practice as a (2) general practitioner

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

hereby certify, on soul and conscience, that I have this day, at (3) Lands of Ke in the County of Kirkcudbright separately from any other Medical Practitioner,

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

visited and personally examined (4) Alexander McMath, Draper, London now residing at Lands of Kells and that

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

the said Alexander McMath 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) Extreme melanc & despondency concerning his worldly affairs. L labours under the delusion that he has not slept for the last two years.

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Her brother-in-law informs me that he once attempted to poison himself – & that he frequ speaks of cutting his throat & drowning himself

(SIGNED) *Name and Medical Designation,* James Laidlaw L.R.C.

Place of Abode, Castle Douglas

DATED this twenty fifth day of September one thousand eight hundred and fifty nine

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, David Blair, Esquire (1) Steward Substitute of the (2) Stewartry of Kirkcudbright having had produced to me, with a Petition at the instance of (3) Robert Webster Certificates under the hands of Patrick Anderson and James Laidlaw, 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 McMath and that the said Alexander McMath 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 McMath as a Patient into the Lunatic Asylum of Dumfries and I authorise this Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander McMath which accompanied the said Petition.

(SIGNED) David Blair

DATED this Twenty fourth day of September one thousand eight hundred and fifty nine

To the Superintendent of the (7) Lunatic Asylum
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.

830.

Alexander Mc. Master.

29/9/82.

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 Wigtown — *and his Substitute,*—

The Petition of James Henry Inspector of Poor for the Parish of Inch humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Kannah — 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 Kannah — to the Crichton Lunatic Asylum Dumfries and to sanction his admission into the said Asylum.

(SIGNED) James Henry

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

DATED this Twenty first (*) day of September one thousand eight hundred and fifty nine 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 Kannah
2. Sex and Age,	a Male aged 60 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	a Pauper in Rhins of Galloway Poorhouse a Labourer
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Oughtrahure
7. Place where Found and Examined,	In Rhins Poorhouse
8. Length of time Insane,	about three months
9. Whether first Attack,	first known attack
10. Age (if known) on first Attack,	Sixty years
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	three months
13. Supposed Cause,	Supposed the a moral Cause
14. Whether subject to Epilepsy,	Has not been Subject to epilepsy
15. Whether Suicidal,	Not Suicidal
16. Whether Dangerous to others,	apparently dangerous at times
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	The Parish of Inch
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 Davidson - Oughtrahure His Wife Not any member of his Family 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,* James Henry

DATED this twenty first day of September one thousand eight hundred and fifty nine

* 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.

(6) *State the facts.*

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

I, the undersigned, Robert Wilson
being a (1) L.R.C.P.Edr. & Member of the Royal College of Surgeons England
and being in actual practice as a (2) General Practitioner
hereby certify, on soul and conscience, that I have this day, at (3) the Rhins of Galloway Union Poor House Stranraer in the County of Wigtown
separately from any other Medical Practitioner, visited and personally examined (4) William Hannay
and that the said William Hannay 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 conversation is incoherent and his actions and talk are those of an insane person

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

The Governor of the Poorhouse corroborates the above and says he is sometimes disposed to be unruly

(SIGNED) *Name and Medical Designation,* Robert Wilson Surgeon

Place of Abode, Stranraer

DATED this Nineteenth day of September One thousand eight hundred and fifty nine

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) Graduate of the University of Glasgow and a licentiate of 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) the Rhins of Galloway Union Poor House, Stranraer in the County of Wigtown
separately from any other Medical Practitioner, visited and personally examined (4) William Hannay a pauper patient
and that the said William Hannay 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 General. Refuses in an insane and unconnected manner

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

The Governor of the Poor House under whose care he has been for sometime informs me that he has on several occasions attempted violence on persons and attempted to destroy property but that on his occasions he tried to injure or destroy the window.

(SIGNED) *Name and Medical Designation,* Ebenezer Fleming. M.D.

Place of Abode Stranraer

DATED this Twentieth day of September one thousand eight hundred and fifty nine 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, Thomas Murray Esq. Sheriff Substitute (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) James Henry Inspector of Poor for the Parish of Penn
Certificates under the hands of Robert Mason 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)
William Hunnah and that the said
William Hunnah 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 Hunnay as a Patient into the (6) Crichton Asylum of 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 William Hunnah which accompanied the said Petition.

(SIGNED) Thos Murray

DATED this twenty second day of September one thousand eight hundred and fifty nine.

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, or Private.
(7) Public, District, or Private.

728.

William Hannah

9/10/59.

Petition

of

James Henry

for

Order for admission of

William Hannay

to

Crichton Royal Lunatic

Asylum Dumfries

11 Oct 1859

Ann

Order annexed dated 22d

September 1859

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 Inspector of the Poor of the Parish of Stranraer humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Campbell or Armstrong Pauper Wife of William Armstrong Tailor Greenvale Street Stranraer 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 Campbell or Armstrong to the Crichton Royal Institution Dumfries and to sanction her admission into the said Asylum.

(SIGNED) H. Watt Inspector of Poor Stranraer

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

DATED this First (3) day of October one thousand eight hundred and fifty nine 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,	Mary Campbell or Armstrong
2. Sex and Age,	Female Aged Sixtyone years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Housekeeping
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Stranraer
7. Place where Found and Examined,	Stranraer
8. Length of time Insane,	Occasionally ill for the last forty years
9. Whether first Attack,	No
10. Age (if known) on first Attack,	Twentyone years
11. When and where previously under Examination and Treatment,	Stranraer
12. Duration of existing Attack,	Four Months
13. Supposed Cause,	After birth of first child
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	Yes if not well watched
16. Whether Dangerous to others,	Yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of 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,	Husband William Armstrong Tailor Greenvale Street Stranraer 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, H. Watt Inspector of Poor Stranraer

DATED this First day of October one thousand eight hundred and Fifty nine years

[L]

* 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, David Easton being a (1) Doctor of Medicine and 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) Green Vale Street Stranraer in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Mary Campbell or Armstrong Wife of Wm Armstrong Tailor Green Vale St Stranraer and that the said Mary Campbell or Armstrong 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 quite insane in her actions, often very violent and would if not prevented injure herself and those around her. Her conversation is most obscene & foul & by night & by day she does not sleep, is almost constantly talking & using threats.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The above facts are corroborated by her husband & neighbours.

(SIGNED) *Name and Medical Designation,* David Easton M. D.

Place of Abode, Stranraer.

DATED this Twenty Sixth day of September One thousand eight hundred and Fifty Nine

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 an (1) M.D. of the University of Glasgow, 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) Greenvale Street Stranraer in the County of Wigtown separately from any other Medical Practitioner, visited and personally examined (4) Mary Armstrong or Campbell Wife of Wm Armstrong Tailor Greenvale Street Stranraer Pauper and that the said Mary Armstrong or Campbell 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 aspect, conversation and general deportment betoken insanity, in my presence she conducted herself in a most violent manner, threatening her husband, and those around her, and wielding a knife which she had a short time before secreted for the purpose. By reason she was kept constantly chained to her bed. She is in a blasphemous & obscene manner & is much irritated when

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Her Husband and neighbours corroborate the above facts and testify upon oath that she only does sleeps to avail herself of every opportunity of securing articles with which she might commit acts of violence.

(SIGNED) *Name and Medical Designation,* Ebenezer Fleming M.D.

Place of Abode Stranraer

DATED this Twenty eighth day of September one thousand eight hundred and fifty nine 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, Macdonald Rhind Esq Sheriff Substitute (1)
of the (2) County of Wigtown
having had produced to me, with a Petition at the instance of (3) Henry Wall Inspector of the Poor of the Parish of Stranraer
Certificates under the hands of David Easton M.D.
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) Mary Campbell or Armstrong pauper wife of William Armstrong and that the said Mary Campbell or Armstrong is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Campbell or Armstrong as a Patient into the (6) Chrichton Royal ~~Asylum of~~ 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 Campbell or Armstrong which accompanied the said Petition.

(SIGNED)

DATED this fourth day of October one thousand eight hundred and fifty nine years.

To the Superintendent of the (7) Chrichton 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, or Private.
(7) Public, District, or Private.

No. 329

Thos. Clements, Belle Co. Texas

Dec. 2/1865

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 Wigtown and his Substitutes,—

The Petition of Malcolm M^c Farlane Inspector of Poor of Leswalt humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert M^c Ewen Portree Stranraer 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 M^c Ewen to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

(SIGNED) Malcolm M^c Farlane

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

DATED this Twenty fourth (*) day of September one thousand eight hundred and fifty nine

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 M^c Ewen
2. Sex and Age,	Male and about forty years old
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Reformed Presbyterian Church
6. Previous Place of Abode,	Parish of Leswalt
7. Place where Found and Examined,	Portree Main Street Stranraer Parish of Leswalt
8. Length of time Insane,	Eccentrick for a length of time but appears somewhat recently and within these two months has shewn signs of Delusion and insanity.
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	About forty years of age
11. When and where previously under Examination and Treatment,	Never before
12. Duration of existing Attack,	about two months past
13. Supposed Cause,	Not known
14. Whether subject to Epilepsy,	No but to outbreaks
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 Leswalt
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 M^c Ewen Farmer in Ochnatterach Parish of Leswalt Brother German. Not known that any of the family 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,* Malcolm M^c Farlane

DATED this Twenty fourth day of September one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, David Easton

being a (1) Doctor of medicine, and licentiate of The Royal College of Surgeons 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 house of Mrs Murray Fortune Stranraer in the County of Wigton

separately from any other Medical Practitioner, visited and personally examined (4) Robert McEwen. Pauper and that

the said Robert McEwen - - - - - 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 conversation quite unconnected, He labours under a variety of supposing himself at times to be possessed of consid property - is in dread of being surrounded by enemies, K his Razor almost constantly beside him - has a means o thinks himself much wronged - & is in dread of Starvat

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The above corroborated by Mrs Murray - Also that he restless during the night, walks about the greater part of his room - Sometimes spends the night on the stairs Sometimes is much excited -

(SIGNED) Name and Medical Designation, David Easton M.D.

Place of Abode, Stranraer.

DATED this Twenty third day of September One thousand eigh hundred and Fifty nine -

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

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

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

(4) *Insert 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, Ebenezer Fleming

being a (1) Graduate of the University of Glasgow, 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) the house of Mrs Murray Fortune Stranraer in the County of Wigtown

separately from any other Medical Practitioner visited and personally examined (4) Robert McEwen. a Banker and this patient

the said Robert McEwen 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 converses in an unconnected manner, expresses great fear of want. He was however very cautious, and always anxious not to commit himself in any way -

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

Mrs Murray his landlady & others in the house informed me, that he is of outrageous. that he has on two seperate occasions gone out at night the weather was most inclement - & stayed out all night - without assigning reason for doing so. that he is subject to mental allusions, expressing of fears robbed &c in some other way injured

(SIGNED) Name and Medical Designation, Ebenezer Fleming M.D.

Place of Abode Stranraer.

DATED this Twenty fourth day of September one thousand eigh hundred and fifty nine 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 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, 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) Malcolm Mc Farland Inspector of Poor of Leswalt
Certificates under the hands of David Easton M.D. Surgeon
and Ebenezer Fleming M.D. 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)
Robert McEwen Fordine Stranraer - a pauper — and that the said
Robert McEwen 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 McEwen as a Patient into the (6) Crichton Royal ~~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 Robert McEwen which accompanied the said Petition. one marginal addition and two words deleted before subscription.

(SIGNED)

DATED this twenty seventh day of September one thousand eight hundred and fifty nine years

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, or Private.
(7) Public, District, or Private.

No. 220

Petition for Habeas Corpus

5/10/54

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 Dinwoodie Inspector of Poor for the Parish of Dumfries humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Sarah Mc. Ravie 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 Mc. Ravie to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Dinwoodie Inspector

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

DATED this Eighth (3) day of October one thousand eight hundred and fifty nine

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 Mc. Ravie
2. Sex and Age,	Female about 60 years
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Poor – Seamstress
5. Religious Persuasion, so far as known,	Not known
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,	No
10. Age (if known) on first Attack,	No
11. When and where previously under Examination and Treatment,	Dumfries & Southern Counties Asylum
12. Duration of existing Attack,	About a fortnight
13. Supposed Cause,	said to be from a fright
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. 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 No
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	Not particulary known

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

(SIGNED)* *Name,* John Dinwoodie

DATED this Eighth day of October one thousand eight hundred and Fifty nine

* To be Signed by the Party applying.

Lunacy Board.—Dec.—37.—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 Marshall being a (1) Graduate of the Faculty of Physicians 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) Shakespeare Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Sarah McKerrie and that the said Sarah McKerrie 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 talks to strangers through her window at night & does not recognise persons from outdoors there and indeed has a whole mental aberration

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her neighbour Woman Mrs McGhie states much the same as above

(SIGNED) *Name and Medical Designation,* William Marshall

Place of Abode, Buccleuch St Dumfries

DATED this 8th day of October One thousand eight hundred and 59

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 Borthwick M.D. being a (1) Graduate 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) Buccleuch Street, Dumfries in the County of Dumfries separately from any other Medical Practitioner visited and personally examined (4) Sarah Mc Ranney a Pauper and that the said Sarah Mc Ranney 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 unsettled, depressed in Spirits and Taciturn

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Mr McMinn informs me that she has been in the state described above for two days, and that she wanders about at night

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

Place of Abode, Dumfries

DATED this 5th day of September one thousand eight hundred and fifty nine

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 Alexander Proctor 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 Alexander Bordinick, 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 Mc Ravie, Shakespeare Street, Dumfries and that the said Sarah Mc Ravie 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 Sarah Mc Ravie 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 Sarah Mc Ravie which accompanied the said Petition.

(SIGNED) John P Proctor

DATED this Eighth day of October, one thousand eight hundred and fifty three.

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.
(6) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(7) Public, District, or Private.
(7) Public, District, or Private.

531
Hawk McCormick
Aug 1857

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 Stewart.
(2) Shire or Stewartry.

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

The Petition of Thomas Hunter, Inspector of Poor for the Parish of Kirkcowan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that John Glen, labourer, residing at Grange of Blackcraik, 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 Glen, to the Crichton Royal Institution at Dumfries, and to sanction his admission into the said Asylum.

(SIGNED) Thos Hunter Inspector

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

DATED this Seventh (3) day of October, — one thousand eight hundred and fifty nine.

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 Glen.
2. Sex and Age,	Male,- aged thirty six. (36)
3. Married, Single, or Widowed,	Married.
4. Condition of Life, and previous Occupation (if any),	Labourer, a Farm Servant.
5. Religious Persuasion, so far as known,	Originally Roman Catholic. Lattaly for 15 Years past has attended Established Church of Scotland.
6. Previous Place of Abode,	At Lane of Muckram, thereafter for 7 Years preceding
7. Place where Found and Examined,	10th Saturday 1857. at Kirkcowan Village. at Wigtown.
8. Length of time Insane,	Since 20 September 1839.-
9. Whether first Attack,	Yes.-
10. Age (if known) on first Attack,	(36)
11. When and where previously under Examination and Treatment,	Never.-
12. Duration of existing Attack,	Since 20 September 1839.
13. Supposed Cause,	Religious Monomania.
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No.
16. Whether Dangerous to others,	He has threatened to stick his wife, & spit in the face of her and others.-
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Parish of Kirkcowan, Wigtownshire.
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,	Patients Wife resides at "Grange of Blackcraik by Wigtown," Not known that any of his family have been insane.- Wife's name is Mrs Mary Murray or Glen.
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, Thos Hunter Inspector

DATED this Seventh day of October, — one thousand eight hundred and fifty nine.

* To be Signed by the Party applying.

Lunacy Board.—Dec.—37.—1000.

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, Sam[l] Snowdon, 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) Wigtown
" " " " in the County of
Wigtown " " " separately from any other Medical Practitioner,
visited and personally examined (4) John Glen Farm Servant
Colvend parish of Grange & Blackwoods and that
the said John Glen (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)
Glen had taken off all his clothes, and lay on the ground shivering & howling. He took no notice to no questions & did not seem to recognise any one, nor to know where or who he was.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) viz. from
I am credibly informed that Glen considers himself a
fourth person in the Godhead, & that he pours
grass himself rattle, & that he receives direct com-
munications from

(SIGNED) Name and Medical Designation, Samuel Snowdon M.D

Place of Abode, Wigtown, N.B.

DATED this Sixth day of October, One thousand eight hundred and fifty nine.

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 Eyart
being a (1) Member of the Royal College Surgeons of E
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) John Glen Farm Servant
the said John Glen " " is a (5) Lunatic 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.:—

1. Facts indicating Insanity observed by myself: (6)
Glen had taken off his clothes & lays upon his b
going through the action of washing the floor w
his bare hands, upon which he had recluded ma
terials. did not comprehend when questioned

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) his
proposing me that he said he saw the Saviour u
foot of the bed & that he said he was in hea
afterwards that he was in hell. That he believ
himself one of the Godhead

(SIGNED) Name and Medical Designation, John Eyart. M R C

Place of Abode Wigtown. N. B

DATED this Sixth day of October one thousand eight hundred and fifty nine

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 Esq Advocate Sheriff Substitute (1)
of the (2) County of Nigtown
having had produced to me, with a Petition at the instance of (3) Thomas Hunter Inspector of Poor for the Parish of Kirkcowan — Certificates under the hands of Samuel Sheardon M.D. — and John Ewart 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)
John Glen (Pauper) and that the said
John Glen is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said John Glen as a Patient into the (6) Crichton Asylum of 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 John Glen which accompanied the said Petition.

(SIGNED) M. Rhind

DATED this seventh day of october one thousand eight hundred and fifty nine

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.

432
John Glen
10/10/55

Petition
To The Sheriff of Kings-
-township
By
The Inspector of the
Parish of Kilkenny
For
Removal of John Glen
an insane Pauper to
the Cruchton Royal
Institution.—
7 October
1859.

(Order annexed)

20 and 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 ~~Lanark~~ Dumfries *and his Substitutes:*

The Petition of Henry Watt

Inspector of Poor of the Parish of Stranraer

Humbly Sheweth,

That it appears from the subjoined Statement and accompanying Medical Certificates, that Thomas Sproatt Tailor - Pauper residing at Glasgow Royal Asylum.

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 Thomas Sproat to the Crichton Royal Institution Dumfries and to sanction his admission into the said Asylum.

H. Watt *Inspector of Poor.* Stranraer

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

DATED this tenth (1) day of October One thousand eight hundred and fifty nine 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,	Thomas Sproat
2. Sex and Age,	Male - about 36 years
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,	10 Young Street Calton Glasgow
7. Place where Found and Examined,	Glasgow Royal Asylum for Lunatics
8. Length of time Insane,	18 Garnhead about 9 months
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	about 36 years
11. When and where previously under Examination and Treatment,	Has been confined & treated in the Glasgow Royal asylum for Lunatics during the last nine months
12. Duration of existing Attack,	about 9 months
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,	
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 Sproat father of patient residing at 29 Crichton Street Glasgow. No other member of the family have 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.

H. Watt *Inspector of Poor.* Stranraer

DATED this tenth day of October One thousand eight hundred and fifty nine 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.

(6) State the facts.

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

I, the undersigned, John Cameron
being a (1) Graduate in Medicine of the University of Glasgow & Licentiate of the Faculty of Physicians
and being in actual practice as a (2) Glasgow Physician
hereby certify, on soul and conscience, that I have this day, at (3) the Glasgow Royal Asylum for Lunatics Gartnavel — in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (4) Thomas Sproat pauper present an inmate of the Glasgow Royal Asylum, Gartnavel and that the said Thomas Sproat 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) — Excitement, Restlessness & Incoherence — Delusions about wealth position & power — & other Sym. of General paralysis

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

From the records of the Asylum that he has been a patient here since 16th April last & treated without improvement —

Name and Medical Designation, John Cameron MD —

Place of Abode, Gartnavel

DATED this Third day of October One thousand eight hundred and fifty nine 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 Boyd Cooke
being a (1) Graduate in 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) the Glasgow Royal Lunatic Asylum Gartnavel in the County of Lanark separately from any other Medical Practitioner, visited and personally examined (4) Thomas Sproat pauper present residing in the Glasgow Royal Asylum, Gartnavel and that the said Thomas Sproat 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) So very incoherent — Subject to paroxysms of excitement and violence. Ignores that his wealth is bounded & that he is omnipotent — Embarrassment of speech and other sips of General Pa

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

From the Asylum Records that he has been a patient here since 16th April 18

Name and Medical Designation, John B Cooke M.D

Place of Abode, Gartnavel

DATED this Third day of October One thousand eight hundred and fifty nine. 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 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 Pitcairn Grotter (1) Sheriff Substitute
of the (2) County of Dumfries
having had produced to me with a petition at the instance of (3) Henry Watt,
Inspector of Poor, Thornhill
Certificates under the hands of John Cameron
and John Boyd Caskie, 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 Sproat
Tailor, a Pauper, and that the said
Thomas Sproat is a (5) Lunatic

and a proper person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Thomas Sproat as a Patient into the (6) Public Asylum of Crichton Royal Institution, 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 Thomas Sproat which accompanied the said Petition.

John P. Grotter Sheriff.

DATED this Twelfth day of October One thousand eight hundred and Seventy nine years.

To the Superintendent of the (7) Public
Asylum of Crichton Royal 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 , 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.

333
Norman Murrah
12/10/59

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 McLellan, Inspecter of poor of the parish of Annan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Morran, Labourer, at Creca 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 Morran to the Southern Counties Asylum at Dumfries and to sanction his admission into the said Asylum.

(SIGNED) John McLellan Insp^r of Poor parish of Annan

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

DATED this 21st (3) day of October one thousand eight hundred and fifty nine.

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 Morran
2. Sex and Age,	Male; aged 50
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer, & Farm Servant
5 Religious Persuasion, so far as known,	Protestant Religion
6. Previous Place of Abode,	Creca, parish of Annan
7. Place where Found and Examined,	at Annan
8. Length of time Insane,	Symptoms of Mental Aberration have been observed & proved upon Morran for 4 or 5 years—latterly much increased.
9. Whether first Attack,	
10. Age (if known) on first Attack,	When a boy received an injury on the head inflicted by the kick of a horse, leaving the mark of a cut on the forehead but whether or how far this may be assigned as the cause of his insanity cannot be solved
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	Getting worse for 4 or 5 years
13. Supposed Cause,	See Statement above
14. Whether subject to Epilepsy,	Not subject to Epilepsy
15. Whether Suicidal,	Is not suicidal
16. Whether Dangerous to others,	Has on one or two occasions shown violence towards his relations on being contradicted, but quite harmless in his conduct amongst Strangers—Dreads that his brother is going to Rivet him, and is troubled about his Means & Estates
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	The Parish of Annan
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,	George Morran, General Dealer, at Creca, Brother of the Patient
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 McLellan Inspector of poor

DATED this 21st day of October one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board.—Dec.—37.—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, Agnew Alex. M. Rogie being a (1) Licentiate of the Royal College of Surgeons of Edin., M.D. 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) Mr McLellan's office, High Street, Annan, in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Alexander Morran, Pauper, Creca, Annan and that the said Alexander Morran 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 being possessed of enormous wealth & large estates, viz. being continually called of them by his relations. Is rambling and incoherent in answers also: is easily excited & very violent.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Has fits (according to relations & others) frequently during which he is very violent. Has been under similar circumstances in Asylum.

(SIGNED) *Name and Medical Designation,* A. Alex. A. Rogie, M.D. & Ed.

Place of Abode, Friars Park, Annan.

DATED this twenty first day of October One thousand eight hundred and fifty-nine.

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 Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Mr McLellan's office, High Street, Annan in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Alexander Morran, Pauper Creca, Annan and that the said Alexander Morran 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 general appearance, and his delusions of having property to a large amount, and being robbed by his Relations, and Rambling Conversation

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Relations & others state that he has of late frequently threatened violence and has on two instances offered some

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

Place of Abode, Edward Street Annan

DATED this 21st day of October one thousand eight hundred and fifty nine

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 ~~John Adam Sheriff~~ Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Mrs McLellan ~~the Petitioner of Dior of Drumfries~~ Certificates under the hands of Agnew Black Bozie M.D. and William Lovat, 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) Alexander Morrice, Labourer, Ecca, a Pauper and that the said Alexander Morrice 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 Morrice as a Patient into the (6) Public Asylum of Southern Counties, Dumfries and I authorise the Transmission to the said Asylum accordingly: and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Alexander Morrice which accompanied the said Petition.

(SIGNED) _____

Dated this Twenty Second day of October one thousand eight hundred and fifty nine years

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.

534
Mary Ann Morrow
21/10/67

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 Williamson

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Williamson 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 Williamson to the Southern County Asylum, and to sanction his admission into the said Asylum.

(SIGNED) Thos Williamson

(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 October one thousand eight hundred and fifty nine

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 Williamson
2. Sex and Age,	Male — 19
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Medical Student
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Annan
7. Place where Found and Examined,	Annan
8. Length of time Insane,	Twenty eight days
9. Whether first Attack,	first attack
10. Age (if known) on first Attack,	19 years
11. When and where previously under Examination and Treatment,	never
12. Duration of existing Attack,	Twenty eight days
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. 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 Williamson Annan his father, no member of whose family has ever 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,* Thos Williamson

DATED this twenty second day of October one thousand eight hundred and fifty nine

* 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, [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) James Williamson and that the said James Williamson 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 General behaviour is unlike what it formerly was — defective memory, [illegible]

2. Other facts (if any) indicating Insanity communicated to me by others: (7) his not being easily managed, [illegible] his attempting to throw away or destroy [illegible] dish or knife [illegible]

(SIGNED) *Name and Medical Designation,* [illegible]

Place of Abode, [illegible]

DATED this [illegible] day of October One thousand eight hundred and fifty three

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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, [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) James Williamson and that the said James Williamson 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 deterioration and incoherence of self control

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

(SIGNED) *Name and Medical Designation,* [illegible]

Place of Abode, [illegible]

DATED this [illegible] day of October one thousand eight hundred and fifty three.

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 James Williamson is a (1) person of unsound mind hereby further certify that the Case of the said James Williamson is One of Emergency, and I recommend the immediate removal of the said James Williamson to an Asylum accordingly.

Name, William Ewart

Place of Abode, Edinburgh Street, Annan

DATED this 14th day of October one thousand eight hundred and fifty nine

(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 Kennedy (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Thomas Williamson Surgeon Annan William Ewart and James Sidebottom, 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 Williamson, a pauper and that the said James Williamson 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 Williamson as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Williamson which accompanied the said Petition.

(SIGNED) A Kennedy

DATED this Fourteenth day of October one thousand eight hundred and fifty nine

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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Anna Williamson

22/10/85

20 & 21 *Vict., Cap.* 71, *Sect.* 84.

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 Laidlaw residing at Killside humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mrs Agnes Porteous or Laidlaw his Petitioners 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 Agnes Porteous or Laidlaw to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Wm Laidlaw

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

DATED this Twentyeighth (3) day of October one thousand eight hundred and fifty nine

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 Porteous or Laidlaw
2. Sex and Age,	Female – age supposed about 70
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Wife of Thomas Laidlaw at Oldwalls in Parish of Dryfesdale
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	At Oldwalls & other neighbouring Places for upwards of 40 years
7. Place where Found and Examined,	
8. Length of time Insane,	upwards of two years
9. Whether first Attack,	First Attack
10. Age (if known) on first Attack,	About 68 years
11. When and where previously under Examination and Treatment,	
12. Duration of existing Attack,	upwards of two years
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. 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 Laidlaw residing at Oldwalls in the Parish of Dryfesdale – husband – None of his Family 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,* Wm Laidlaw

DATED this Twentyeighth day of October one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board,—Dec.—57.—1240.

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 Edin^r and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Oldwells in the Parish of Dryfesdale and — in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mrs Agnes Laidlaw wife of Thomas Laidlaw residing there and that the said Mrs Laidlaw 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 the delusion that she is not at home, although she has resided in her present dwelling or others adjacent for the last 40 years. She supposes herself possessed of many cows, in the collection of which she is constantly employed, and but for restraint, would wander for some when told she has no cows, she becomes frantic work eager, and threatens injury of others. She has on several occasions attempted to cross the adjoining river risk of her life

(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,* Jas T Wilson Surgeon

Place of Abode, Lockerbie

DATED this 22nd day of October One thousand eight hundred and fifty nine

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 Clerk Wilson being a (1) Licentiate of the Faculty of Phys & Surgeons Glasgow and being in actual practice as a (2) Surgeon, hereby certify, on soul and conscience, that I have this day, at (3) Oldwalls in the Parish of Dryfesdale — and — in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Mrs Agnes Laidlaw wife of Thomas Laidlaw residing there — and that the said Mrs Laidlaw 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 that she has Children some where, else than at home or where they are out and has Cows &c that she has out and wanders about in search for them or something that is not

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Is very violent at times Saw a number of cuts & wounds upon her daughters arms - said they had been done by her

(SIGNED) *Name and Medical Designation,* Geo C Wilson — Surgeon

Place of Abode, Lockerbie

DATED this 22 day of October one thousand eight hundred and fifty nine

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, Mr Pitcairn Trotter Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) William Laidlaw residing at Hillside Thomson Wilson, Surgeon, Certificates under the hands of James Thomson Wilson, Surgeon, and George Clark Wilson 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) Mrs Agnes Porteous or Laidlaw at Orrells, Dryfesdale and that the said Agnes Porteous or Laidlaw 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 Porteous or Laidlaw as a Patient into the 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 Agnes Porteous or Laidlaw which accompanied the said Petition.

(SIGNED) _____

DATED this Twenty ninth day of October one thousand eight hundred and fifty nine

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.

536
Agnes Hoskins &c
Llanidloes
2/11/57

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 Lowden Inspr. of Poor Ure

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Hugh Stewart 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 Hugh Stewart to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(Signed) John Lowden Inspr. Ure

(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 November one thousand eight hundred and fifty nine 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,	Hugh Stewart
2. Sex and Age,	Male
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Sailor
5. Religious Persuasion, so far as known,	Established Church
6. Previous Place of Abode,	Dalbeattie
7. Place where Found and Examined,	Dalbeattie
8. Length of time Insane,	
9. Whether first Attack,	Second attack
10. Age (if known) on first Attack,	
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,	Ure
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 Stewart wife Ref Known
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 Lowden Inspr. Ure

Dated this fourth day of November one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board,—Pcc.—37.—1209.

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.*

I, the undersigned, Wm Paterson Lewis MB 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) Dalbeattie Kirkcudbright separately from any other Medical Practitioner visited and personally examined (4) Hugh Stewart

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

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

and that the said Hugh Stewart 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 been constantly during the visit in a most singular manner — when questioned replies in very incoherently — says he is under the influence of evil spirits & that the whole has conspired the public against him — that them spirits informed him some ago that somebody be visiting him & sending him off to the Sky Cairn — says this is now ~

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) master visit that violent by times — & walks the street almost constantly night and day —

(SIGNED) *Name and Medical Designation,* Wm Paterson Lewis MB

Place of Abode, Dalbeattie

DATED this 4th day of November One thousand eight hundred and fifty nine

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.*

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) Dalbeattie Kirkcudbright in the County of separately from any other Medical Practitioner, visited and personally examined (4) Hugh Stewart

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

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

and that the said Hugh Stewart 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 the delusion that a Spirit almost constantly talks to him in an audible voice prompting him to do certain actions. General conversation quite incoherent

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Neighbours confirm above statements & in addition that he walks the streets frequently during the night & behaves a great anxiety to his wife

(SIGNED) *Name and Medical Designation,* James Laidlaw LRCS

Place of Abode, Castle Douglas

DATED this fourth day of November one thousand eight hundred and fifty nine

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 Aleyn Proctor, Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Lowden
Inspector of Poor, &c.
Certificates under the hands of James Paterson Lewis M.D.
and James Laidlaw, , 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 Hugh Stewart residing in Dalbeattie and that the said Hugh Stewart is a person of unsound mind and a proper Person to be detained and taken care of, I do HEREBY AUTHORIZE you to receive the said Hugh Stewart as a Patient into the (6) Public Asylum of Southern Counties Dumfries and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Hugh Stewart which accompanied the said Petition.

(SIGNED) John Aleyn Proctor

DATED this Fourth day of November one thousand eight hundred and Fifty nine

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.

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 Milroy Kirkconnan Mylnwinnan humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that James Milroy 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 Milroy to the Crichton Royal Institution and to sanction his admission into the said Asylum.

(SIGNED) John Milroy

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

DATED this seventeenth (3) day of August one thousand eight hundred and fifty nine

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 Milroy
2. Sex and Age,	Male 21
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Clerk in Bank
5. Religious Persuasion, so far as known,	Church of Scotland
6. Previous Place of Abode,	Kirkconnan Mylnwinnan
7. Place where Found and Examined,	Dumfries
8. Length of time Insane,	Two years
9. Whether first Attack,	Yes
10. Age (if known) on first Attack,	19
11. When and where previously under Examination and Treatment,	In Parkhead Asylum about 6 months
12. Duration of existing Attack,	
13. Supposed Cause,	Masturbation
14. Whether subject to Epilepsy,	no
15. Whether Suicidal,	not to for as I know
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,	Thomas Milroy Kirkconnan Mylnwinnan Father 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,* John Milroy

DATED this seventeenth day of August one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board.—Dec.—57.—1200.

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.*

I, the undersigned, Patrick Murray being a (1) 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) Upon Green Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) James Milroy and that the said James Milroy 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Excited manner Answers questions rambling, but with hesitation, is unable at times question. Ideas appear to be confused.

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) The Brother states that he sometimes sees things which are not there and is unable to work.

(SIGNED) *Name and Medical Designation,* Patrick Murray

Place of Abode, 99 Buccleuch St

DATED this 17th day of August One thousand eight hundred and Fifty nine

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.*

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) Castle Douglas Kirkcudbright in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) James Milroy Banker's Clerk and that the said James Milroy 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) Excited manner Cannot settle to work Answers questions hesitates in answering Ideas confused Conversation rambling

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Cannot settle to work as stated by his brother

(SIGNED) *Name and Medical Designation,* James Gilchrist M.D

Place of Abode, Castle Douglas Kirkcud.

DATED this seventeenth day of August one thousand eight hundred and fifty nine

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, Alexander Hannay (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Jas Milroy Parkconan Weigoushire Patrick Murray M.D. Certificates under the hands of and James Gilchrist 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 Milroy at Parkconan Cottage and that the said James Milroy 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 Milroy as a Patient into the (6) Public Asylum of Auchtertool Royal Institution and I authorise his Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said James Milroy which accompanied the said Petition.

(SIGNED) A. Hannay

DATED this 17th day of August one thousand eight hundred and fifty nine

To the Superintendent of the (7) Public Royal Institution
Asylum of Auchtertool
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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James Nutter
10/6/52
S.E. Dr.
388
11/11/52

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 Substitute *of the* (2) County of Wigtown *and his Substitutes,—*

The Petition of Jane Gifford

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Ann Gifford 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 Gifford her to the Crichton Royal Institution Dumfries and to sanction her admission into the said Asylum.

(SIGNED) Jane Gifford

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

DATED this eighth (3) day of August one thousand eight hundred and fifty nine

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 Gifford
2. Sex and Age,	Female, thirty 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,	Free church
6. Previous Place of Abode,	Glasserton
7. Place where Found and Examined,	Whithorn
8. Length of time Insane,	twelve months
9. Whether first Attack,	First
10. Age (if known) on first Attack,	Twenty nine
11. When and where previously under Examination and Treatment,	Port Patrick
12. Duration of existing Attack,	twelve months
13. Supposed Cause,	fright
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. 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 Gifford, her mother
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,* Jane Gifford

DATED this eighth day of August one thousand eight hundred and fifty nine

* 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.*

I, the undersigned, Robert Broadfoot Whitburn being a (1) Licentiate of the Royal College of Surgeons in Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Whitburn A Royal Burgh Wigtown in the County of separately from any other Medical Practitioner

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

visited and personally examined (4) Mary Ann Gifford residing in Main Street of Whitburn and that

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

the said Mary Ann Gifford 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) That I found her this morning – Sunday – sitting on the ground at the street end utterly heedless of the people passing to church, or of the persons gathered around her – that she engaged any grand question put in meaning laugh or titter &c &c. That she was brought home by her mother from the

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Some of her acquaintances inform me that she talked very absurdly, and were related to much alarm in the Parish they had to send for a person to

(Signed) *Name and Medical Designation,* Robert Broadfoot Surgeon

Place of Abode, Whitburn

Dated this 7 day of August One thousand eight hundred and fifty nine

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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.*

I, the undersigned, Mrs M'Millan Whitburn being a (1) Licentiate of the Royal College of Surgeons in Edinburgh and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Whitburn A Royal Burgh Wigtown in the County of separately from any other Medical Practitioner,

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

visited and personally examined (4) Mary Ann Gifford residing in Main Street of Whitburn and that

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

the said Mary Ann Gifford 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 her this morning at 8 o'clock wandering and looking into a window her Mother watching her something would befall her did not know me thought it was one of her delusions too numerous to mention

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7) Said to a Neighbour that had died was buried that I have now three days of having seen her wandering in the street two o'clock without any assignable reason

(Signed) *Name and Medical Designation,* Mrs M'Millan Surgeon

Place of Abode, Whitburn

Dated this 7th day of August one thousand eight hundred and fifty Nine

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 the said Mary Ann Gifford is a (1) Lunatic hereby further certify that the Case of the said Mary Ann Gifford is One of Emergency, and I recommend the immediate removal of the said Mary Ann Gifford to an Asylum accordingly.

Name, Robt Broadfoot Surgeon

Place of Abode, Moffat

DATED this eighth day of August one thousand eight hundred and fifty nine.

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

ge from the Lunatic
ces in which she has stain for
a certificate of amendment and of renewal
nsmissible &c

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 Dumfries having had produced to me, with a Petition at the instance of (3) Jane Gifford

Certificates under the hands of Robert Broadfoot Surgeon and Alexander Mc Millan 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 Gifford and that the said Mary Ann Gifford 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 Gifford as a Patient into the (6) Crichton ~~(Asylum of)~~ Royal 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 Mary Ann Gifford which accompanied the said Petition.

(SIGNED) M. Rhind

DATED this ninth day of August one thousand eight hundred and fifty nine

To the Superintendent of the (7) 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, or Private.
(7) Public, District, or Private.

324.
Mary Campbell
10/5/59
839
E. R. &c.
11/11/59
S2

20 & 21 *Vict., Cap.* 71, *Sect.* 84.

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 Monteith Rome

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Margaret Bell or Welsh 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 or Welsh to the Southern Counties Asylum and to sanction her admission into the said Asylum.

(SIGNED) R. M. Rome

(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 November one thousand eight hundred and Fifty Nine

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 Bell or Welsh
2. Sex and Age,	Fifty three
3. Married, Single, or Widowed,	Widow
4. Condition of Life, and previous Occupation (if any),	Outwasher
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Langholm
7. Place where Found and Examined,	Cell
8. Length of time Insane,	Reported to mean the 7th inst
9. Whether first Attack,	2nd attack
10. Age (if known) on first Attack,	
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
12. Duration of existing Attack,	Been coming on for some weeks
13. Supposed Cause,	No
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,	Langholm Parish
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 Welsh Son residence not known
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,* R. M. Rome

DATED this Fourteenth day of November one thousand eight hundred and Fifty Nine

* 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, Rob.t William[illegible] Surgeon being a (1) Member of Royal Col. Surgeons [illegible] and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Mrs M'[illegible] Coffee House Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Margaret Bell [illegible] residing in Kirk Wynd Longholm and that the said Margaret Keith 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) Fits of Melancholy and Excitement occasionally wandering about in a wild and muttering state

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Have been told by herself that She has fairies

(SIGNED) *Name and Medical Designation,* Thomas W. Bl[illegible]

Place of Abode, Church Street [illegible]

DATED this fourteenth day of November One thousand eight hundred and fifty nine

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 Inman 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 Southern Counties Asylum Dumfries in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Margaret Bell or Keith Pauper residing Kirkwynd Longholm and that the said Margaret Bell or Keith 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) Seems to be in a State of extreme uncertainty regarding everything, does not sit still but walks about as if seeking for something in an incoherent manner

2. Other facts (if any) indicating Insanity communicated to me by others. (7) I have heard from the Inspector of Poor that She has fairies

(SIGNED) *Name and Medical Designation,* William Inman M.D

Place of Abode, Southern Counties Asylum

DATED this 14th day of November one thousand eight hundred and fifty nine

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 Irvine Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) Robert Howie Cleff Rowe, residing in Langholm Certificates under the hands of Thomas Williamson Surgeon and William Inman, 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) Margaret Bell or Veitch residing in Langholm and that the said Margaret Bell or Veitch is 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 Bell or Veitch as a Patient into the (5) Public Asylum of Southern Counties Asylum Dumfries and I authorise (6) Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said Margaret Bell or Veitch which accompanied the said Petition.

(SIGNED) John P. Irvine

DATED this Fifteenth day of November one thousand eight hundred and fifty nine

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.

339
Margaret Bell or Scarlett
14/11/85

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 Geo. Osborne, Inspector of Poor Sanquhar humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Alexander Gilchrist, Wanlockhead 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 Gilchrist to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) Geo. Osborne, Inspector of Poor

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

DATED this Nineteenth (3) day of November One thousand eight hundred and fifty nine.

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 Gilchrist
2. Sex and Age,	Male — Aged 28 years
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Humble Condition — a Miner
5. Religious Persuasion, so far as known,	Free Church of Scotland
6. Previous Place of Abode,	In North of England for 12 Months prior to previously at Wanlockhead, where he was born.
7. Place where Found and Examined,	North of England - but not ascertained —
8. Length of time Insane,	8 or 10 days.
9. Whether first attack,	First attack
10. Age (if known) on first Attack,	28 years
11. When and where previously under Examination and Treatment,	Under no previous treatment
12. Duration of existing Attack,	8 or 10 days
13. Supposed Cause,	The Religious State of his Soul —
14. Whether subject to Epilepsy,	Not Subject to Epilepsy
15. Whether Suicidal,	Not Suicidal
16. Whether Dangerous to others,	Occasionally Violent
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Sanquhar parish - Dumfries-shire
18. Date of becoming Chargeable,	17 Nov. 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 Gilchrist, Wanlockhead, parish of Sanquhar is Father of the Patient — a Brother had a slight alienation of mind after a long illness
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,* Geo. Osborne, Insp.r of Poor

DATED this eighteenth day of November One thousand eight hundred and fifty nine.

* 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 Watson, Surgeon, Wanlockhead
being a (1) Licentiate of the Royal College of Surgeons, Edinburgh
and being in actual practice as a (2) Surgeon at Wanlockhead
hereby certify, on soul and conscience, that I have this day, at (3) Meadowfoot
Wanlockhead - Parish of Sanquhar in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Alexander Gilchrist, Wanlockhead
Parish of Sanquhar, a Pauper and that
the said Alexander Gilchrist 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 variable - o
-ccasionally sullen, - at other times violent - screams o
-mmits at times, & distorts his countenance - has threat
-ed to injure several of his relations - Imagines h
in the power of the Devil & - Is sometimes very violent

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Often extremely violent - Threatens his relatives
Sometimes undermines himself in combats with the
screams occasionally, & sometimes attempts to bite
Reinod from John Moffat and Alexander Hamm

(Signed) Name and Medical Designation, William Watson

Place of Abode, Wanlockhead

Dated this eighteenth day of November One thousand eight hundred and fifty nine

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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 Ray, Surgeon Sanquhar
being a (1) Licentiate of the Faculty of Physicians
and Surgeons of Glasgow
and being in actual practice as a (2) Surgeon in Sanquhar
hereby certify, on soul and conscience, that I have this day, at (3) Sanquhar
Parkmuir, Station in the County of
Dumfries separately from any other Medical Practitioner,
visited and personally examined (4) Alexander Gilchrist
Wanlockhead, a Pauper and that
the said Alexander 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) Absent. Taciturn
thinks his Body is swollen, and his
language is incoherent

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7)
He is sometimes very violent, swearing, attempting to bite, cries out that the Enemies he has
to contend to conquer the Devil. Derives
from his Brother Hugh Gilchrist & George McC

(Signed) Name and Medical Designation, William Ray Surgeon

Place of Abode, Sanquhar

Dated this nineteenth day of November One thousand eight hundred and fifty nine

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 Alexander Gilchrist, Waulockhead is a (1) Lunatic, and hereby further certify that the Case of the said Alexander Gilchrist is One of Emergency, and I recommend the immediate removal of the said Alexander Gilchrist to an Asylum accordingly.

Name, William Watson Surgeon

Place of Abode, Waulockhead by Leadhills

DATED this eighteenth day of November One thousand eight hundred and fifty nine

(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 Malcolm Trotter (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) George Osborne Inspector of Poor of Sanquhar Certificates under the hands of William Watson and William Kay, 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 Gilchrist, Waulockhead, Pauper and that the said Alexander Gilchrist is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Alexander Gilchrist 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 Alexander Gilchrist which accompanied the said Petition.

(SIGNED) John Malcolm Trotter

DATED this twenty seven day of November One thousand eight hundred and fifty nine

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.

No. 140
Alfred Blackwell
19/4/65

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) County of Dumfries and his Substitutes,—

The Petition of Joseph Crichton Inspector of Poor of the Parish of Canonbie

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Helen Steel Brackhead Canonbie 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 Helen Steel Brackhead Canonbie to the Southern Counties Asylum Dumfries and to sanction her admission into the said Asylum.

(SIGNED) J. Crichton Inspr

(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 November One thousand eight hundred and fifty nine

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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,	Helen Steel
2. Sex and Age,	Female age 64
3. Married, Single, or Widowed,	Groom Steward
4. Condition of Life, and previous Occupation (if any),	Church of Scotland
5. Religious Persuasion, so far as known,	Brackhead Canonbie
6. Previous Place of Abode,	Brackhead cottage
7. Place where Found and Examined,	about 16 years
8. Length of time Insane,	not known
9. Whether first attack,	48 years of age
10. Age (if known) on first Attack,	Hudson cottage
11. When and where previously under Examination and Treatment,	not known
12. Duration of existing Attack,	Never
13. Supposed Cause,	occasionaly
14. Whether subject to Epilepsy,	No
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Parish of Canonbie
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Her father
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,	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, J. Crichton Inspector

DATED this Twenty first day of November One thousand eight hundred and fifty nine

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.

(6) *State the facts.*

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

I, the undersigned, William Sefton Burgle M. D. Edin.
being a (1) Member 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) Brackenrae
in the parish of Canonbie in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Helen Steel - Brackenrae
Pauper
the said Helen Steel 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) From the conversation I have had with her, I consider that her intellect is of a decayed state. There is considerable incoherence of thought & talk & I consider the home not a suitable one for a very unsettled state.

2. Other facts (if any) indicating Insanity communicated to me by others: (7) She also
gives home also been communicated to me by
the person she at present resides with.

(SIGNED) *Name and Medical Designation,* W. J. Burgle M. D. Surg.

Place of Abode, Langholm

DATED this 12th day of November One thousand eight hundred and forty nine

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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, Adam Macmillan
being a (1) Member of the 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) Brackenrae
in the Parish of Canonbie in the County of Dumfries
separately from any other Medical Practitioner,
visited and personally examined (4) Helen Steel Brackenrae
Pauper
the said Helen Steel and that
is a (5) Lunatic or
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 wandering
incoherent - Expression of my mind
& conduct - Impression she labored at night
for fear of having the house sent last

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

(SIGNED) *Name and Medical Designation,* Adam Macmillan Surgeon

Place of Abode, Establishment

DATED this 13th day of November One thousand eight hundred and forty nine

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 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 Cummertrees
Certificates under the hands of William Hunter Carlyle, Surgeon
and Amias Macaulay, 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 Helen Steel, a pauper, Brachead, Cummertrees and that the said Helen Steel is a (4) person of unsound mind
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Helen Steel as a Patient into the (5) 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 Steel which accompanied the said Petition.

(SIGNED) John P. Trotter.

DATED this twenty third day of November One thousand eight hundred and fifty eleven

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.

Y41
Helen Steel
26/11/59

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 Hewetson Inspector of Poor Penpont humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Robert Hunter 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 Robert Hunter to the Southern Counties Asylum and to sanction his admission into the said Asylum.

(SIGNED) John Hewetson Inspector of Poor Parish of Penpont

(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 November One thousand eight hundred and fifty nine / 1859 /

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 Hunter
2. Sex and Age,	Male, Aged 20
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Church of Scotland.
6. Previous Place of Abode,	Dumfries
7. Place where Found and Examined,	Sanquhar
8. Length of time Insane,	Several Weeks, it has come on gradually
9. Whether first attack,	No
10. Age (if known) on first Attack,	18 years
11. When and where previously under Examination and Treatment,	Southern Counties Asylum
12. Duration of existing Attack,	Several Weeks
13. Supposed Cause,	None
14. Whether subject to Epilepsy,	No.
15. Whether Suicidal,	No
16. Whether Dangerous to others,	Abuses his parents
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Penpont Parish Dumfries Shire
18. Date of becoming Chargeable,	Two Weeks 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 his Family known to be or to have been Insane,	Hugh Hunter, Ironfoot Sanquhar Father of Pauper. None number of his Family previously 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.

(SIGNED)* Name, John Hewetson Inspector of Poor Penpont

DATED this Twenty Sixth day of November One thousand eight hundred and fifty nine / 1859 /

P. p.

* To be signed by the Party applying.

MEDICAL CERTIFICATE, No. I.

I, the undersigned, John Dalziel

(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 of the University of Edinburgh, and a Member of the Royal College of Surgeons, Edinburgh,

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

and being in actual practice as a (2) Physician & Surgeon

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

hereby certify, on soul and conscience, that I have this day, at (3) Langholm,

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

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

visited and personally examined (4) Robert Hunter, Pauper, Langholm,

and that

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

the said Robert 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.:—

(6) *State the facts.*

1. Facts indicating Insanity observed by myself: (6) – Extravagant estimate of his own powers, – this estimate being entertained as absolute

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) – Inveterate belief in a conspiracy being entered into against him. – Communicated by his parents & by his near neighbours (under same roof) John Halliday & his (John Halliday's) wife.

(SIGNED) *Name and Medical Designation,* John Dalziel, Physician & Surgeon

Place of Abode, Penpont, by Thornhill, Dumfries-shire

DATED this twentieth day of November One thousand eight hundred and fifty nine.

MEDICAL CERTIFICATE, No. II.

I, the undersigned, William Ray Surgeon

(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 and Surgeons of Glasgow.

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

and being in actual practice as a (2) Surgeon

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

hereby certify, on soul and conscience, that I have this day, at (3) Langholm

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

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

visited and personally examined (4) Robert Hunter, Langholm a Pauper

and that

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

the said Robert 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.:—

(6) *State the facts.*

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

He is restless, talks incessantly and is disoriented in his language and ideas; is suspicious that his Parents & others wrong him; has extravagant views of his own capabilities as he can speak several languages.

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

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

Threatens violence to his Parents who are afraid to leave him in the House. Keeps a rifle, knife, and disturbs the inmates and neighbours — from his Father & Mother. as also from Mrs Halliday –

(SIGNED) *Name and Medical Designation,* William Ray Surgeon

Place of Abode, Langholm

DATED this twenty fifth day of November One thousand eight hundred and fifty nine —

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 Stewart Rotton Clerk Substitute —
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) John Newton
Inspector of Poor Ruthwell
Certificates under the hands of John Daly M.D. Physician Surgeon
and William Kay 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) Robert Hunter, a pauper, Sanquhar and that the said Robert 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 Robert Hunter — 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 Hunter which accompanied the said Petition.

(SIGNED) [signature]

DATED this twenty sixth day of December One thousand eight hundred and fifty nine.

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.

No 42
Old Town Hamlet
2/12/85

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) Shirriff of the (2) County of Dumfries *and his Substitutes,—*

Borland & Cowend

The Petition of Charles Bee farmer humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Janet Bee my 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 Janet Bee to the Cuelton Royal Institution and to sanction ~~his~~ her admission into the said Asylum.

(SIGNED) Charles Bee

(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 December one thousand eight hundred and fifty nine

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 Bee
2. Sex and Age,	26 Female
3. Married, Single, or Widowed,	Single never Married
4. Condition of Life, and previous Occupation (if any),	wrought in a farm
5. Religious Persuasion, so far as known,	Protistant.
6. Previous Place of Abode,	none
7. Place where Found and Examined,	Borland
8. Length of time Insane,	2 Years
9. Whether first Attack,	Borland
10. Age (if known) on first Attack,	24 Years
11. When and where previously under Examination and Treatment,	at Home
12. Duration of existing Attack,	two years
13. Supposed Cause,	thought to be cold
14. Whether subject to Epilepsy,	never
15. Whether Suicidal,	no attempts
16. Whether Dangerous to others,	never
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,	
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,* Charles Bee

DATED this 13 day of December one thousand eight hundred and 59

* 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, Thomas Mackenzie M.D. Member of
being a (1) 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) Boulevard Hôtel
in the County of Seine
separately from any other Medical Practitioner,
visited and personally examined (4) Janet Bee Spouse of
and that
the said Janet Bee Spouse of 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) Does not know
the day of the week or month has many numbers in the year
or the Parish Clergymans name or who lives in the Parish
Repeats a statement he had made ten minutes before (Correct Date)

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7)
Her husband and Mother told me that she was
excited when no Doctor could take her out on May 8th to the
Asylum unable when he said that she wanted to leave
herself any longer

(SIGNED) *Name and Medical Designation,* Thomas Mackenzie M.D.

Place of Abode, 28 Rue Lille

DATED this second day of December One thousand eight hundred and 59

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 Coldstream M.D.
being a (1) Graduate of the University
of Edinburgh Physician to
and being in actual practice as a (2) Physician
hereby certify, on soul and conscience, that I have this day, at (3) Aberdeen
Royal Institution for Lunatics
in the County of
separately from any other Medical Practitioner,
visited and personally examined (4) Janet Bee formerly
Daughter Usually resident at Boulogne
Widow
and that
the said Janet Bee 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
loss of self control occasional
violence and excitement

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

2. Other facts (if any) indicating Insanity communicated to me by others. (7)
Excited and violent as stated
by her Husband

(SIGNED) *Name and Medical Designation,* James Coldstream M.D.

Place of Abode, Christian Hospice

DATED this 13th day of December one thousand eight hundred and fifty nine

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 Balcanquall Scott Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Charles Rae, farmer Boreland of Colvend Kirkcudbright
certificates under the hands of Thomas Mackenzie
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)
Janet Rae at Boreland of Colvend and that the said
Janet Rae 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 Rae 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 Janet Rae which accompanied the said Petition.

(SIGNED) Wm. D. Scott

DATED this Fourteenth day of December one thousand eight hundred and fifty nine

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

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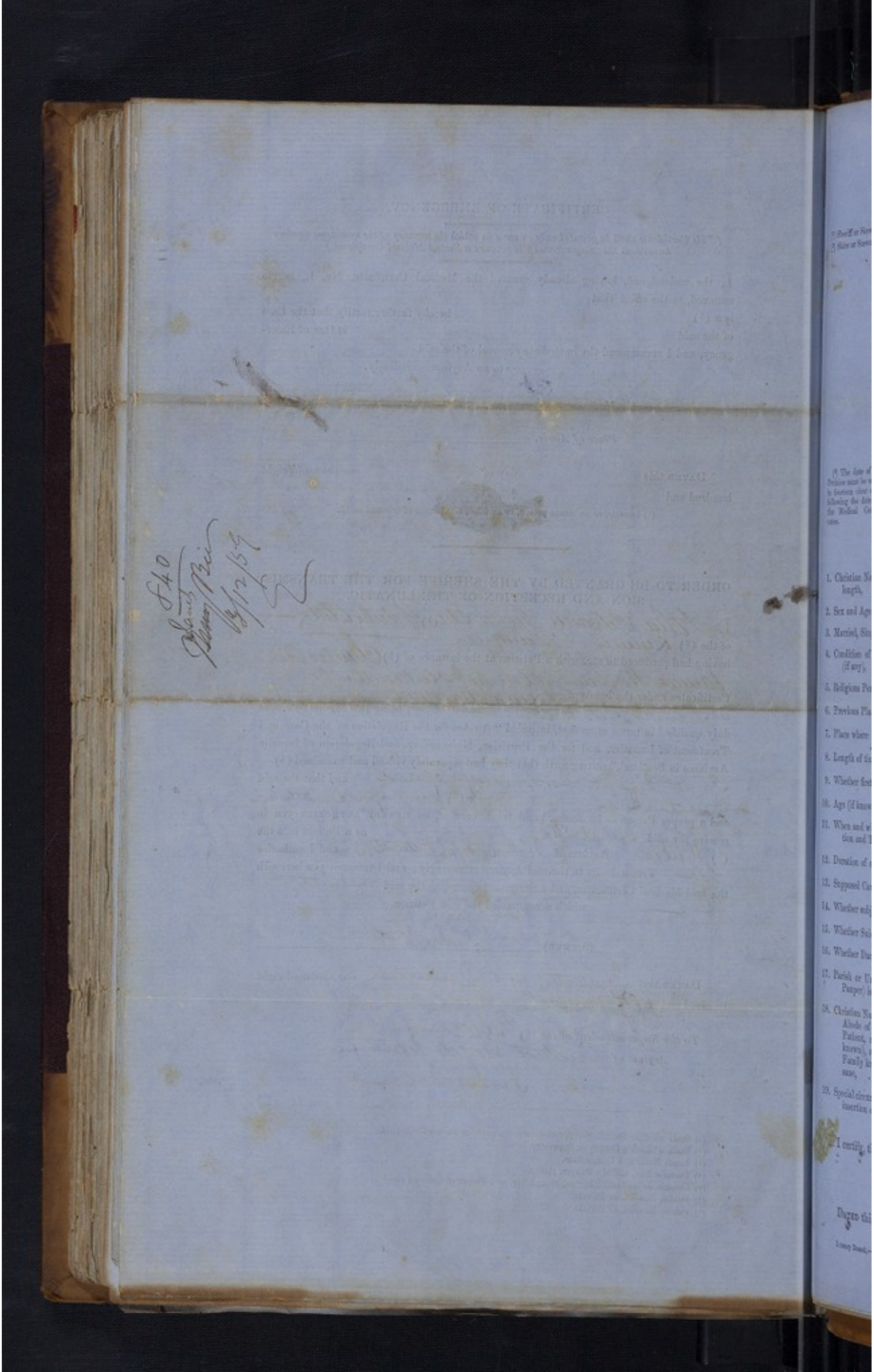
(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.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



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 Wigtown and his Substitutes,—

The Petition of John McCallum Inspector of Poor Newton Stewart humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Mary Douglas, Pauper, Clachanreasy now residing at Knowe 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 Douglas, Knowe to the Crichton Royal Institution Dumfries and to sanction her admission into the said Asylum.

(SIGNED) John McCallum

(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 November one thousand eight hundred and fifty nine

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 Douglas
2. Sex and Age,	Female 44 years of age
3. Married, Single, or Widowed,	Single
4. Condition of Life, and previous Occupation (if any),	House Keeper
5. Religious Persuasion, so far as known,	She was a member of the Church of Scotland
6. Previous Place of Abode,	Clachanreasy
7. Place where Found and Examined,	Knowe Village
8. Length of time Insane,	Not known to petitioner
9. Whether first Attack,	Not known to petitioner
10. Age (if known) on first Attack,	Not known to petitioner
11. When and where previously under Examination and Treatment,	Not under treatment before so far as known to me
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,	Penninghame
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,	1. Mary Douglas, Knowe Village 2. Not any known 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, John McCallum Inspector of Poor for the parish of Penninghame, Newton Stewart

DATED this Twenty first day of November one thousand eight hundred and fifty nine

* To be Signed by the Party applying.

Lunacy Board,—Dec.—27.—1858.

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 Smith being a (1) Licentiate of Glasgow College and being in actual practice as a (2) Surgeon hereby certify, on soul and conscience, that I have this day, at (3) Knowe Village Parish of Penninghame Wigtown in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Douglas, pauper, Knowe Village and that the said Mary 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) From her actions and conversation

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Troublesome to her relations and neighbours

(SIGNED) *Name and Medical Designation,* Charles Smith Surgeon

Place of Abode,

DATED this nineteenth day of November One thousand eight hundred and forty nine

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 Pearson being a (1) Graduate of Glasgow College and being in actual practice as a (2) Physician hereby certify, on soul and conscience, that I have this day, at (3) Knowe Village Parish of Penninghame Wigtown in the County of separately from any other Medical Practitioner, visited and personally examined (4) Mary Douglas Pauper and that the said Mary 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) - Conversation

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

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Relations complain much of her —

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

Place of Abode Newton Stewart

DATED this 17th day of Nov. one thousand eight hundred and 59

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 Esqre Advocate Sheriff Substitute (1)
of the (2) County of Nairn
having had produced to me, with a Petition at the instance of (3) John McCallum Inspector of Poor Newton Stewart
Certificates under the hands of Charles Smith, Surgeon —
and John Pearson 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)
Mary Douglas pauper — and that the said
Mary Douglas — is a (5) insane person
and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Mary Douglas — 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 Mary Douglas — which accompanied the said Petition.

(SIGNED) A. Macd Rhind Substitute

DATED this twenty ninth day of November one thousand eight hundred and fifty nine

To the Superintendent of the (7) Crichton
Asylum of Dumfries — 3

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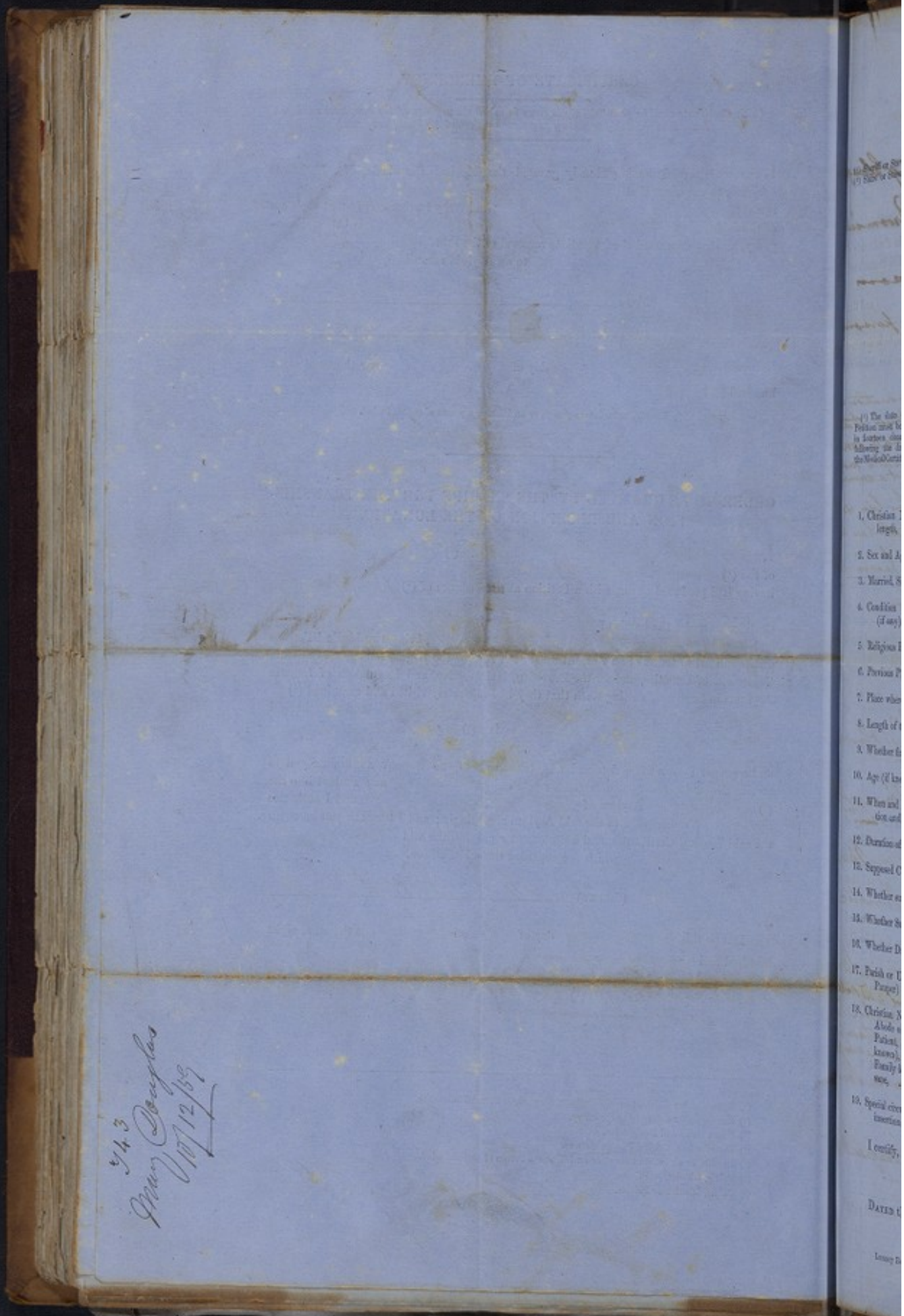
(1) State whether Sheriff, Sheriff-Substitute, Steward, or Steward-Substitute.
(2) State whether a County or Stewartry.
(3) Insert Name and Designation.
(4) Describe him, and if a Pauper, state so.
(5) Lunatic, or an Insane Person, or an Idiot, or a Person of unsound mind.
(6) Public, District, or Private.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



20 & 21 *Vict., Cap.* 71, *Sect.* 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 Dunbarton *and his Substitutes,—*

The Petition of And^{r} M^{c}Ewan Insp^{r} of poor Burgh

humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that William Robson 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 Robson — to the Southern Counties Asylum — and to sanction his admission into the said Asylum.

(SIGNED) And^{r} M^{c}Ewan Insp^{r} of poor Burgh

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

DATED this Nineteenth (3) day of December — one thousand eight hundred and ~~fifty~~ fifty nine 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 Robson —
2. Sex and Age,	Male. Twenty eight years of age
3. Married, Single, or Widowed,	Married —
4. Condition of Life, and previous Occupation (if any),	Poor Ploughman
5. Religious Persuasion, so far as known,	Protestant
6. Previous Place of Abode,	Broomhill of Menteith
7. Place where Found and Examined,	Do — Do —
8. Length of time Insane,	~~not known~~ About a month
9. Whether first Attack,	Do — Do —
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~~ Improprieties of Conduct
14. Whether subject to Epilepsy,	yes — —
15. Whether Suicidal,	no
16. Whether Dangerous to others,	Apparently Harmless
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,	His nearest relative known of is — Robson a fluker in the Village of Monans Hamlet Parish who is an Uncle — not Known whether any Member of his family insane or not — —
19. Special circumstances (if any) preventing the insertion of any of the above particulars,	He was an left an Orphan and any relation is known of his family is relatives

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

(SIGNED)* Name, And^{r} M^{c}Ewan Insp^{r} of poor Burgh of Dunbarton

DATED this Nineteenth day of December one thousand eight hundred and fifty nine

* 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.*

I, the undersigned, John Paterson Lewis 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) Broomielaw in the County of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) William Robson a Pauper and that the said William Robson is a (5) a person of insane mind and a proper Person to be detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) His conversation rambling & incoherent though he said that he knew that his mind was wrong & that it was caused by his taking the sacrament after enchatte, conduct & says that he is against the whole world gave away his watch because he was so that a gentleman

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) His wife informed me that he threatened to take away his life ago & that he often imagines that he sees things at night when he hold of her & ask her protect him

(SIGNED) *Name and Medical Designation,* John Paterson Lewis

Place of Abode, Dalbeattie

DATED this 17th day of Dec. One thousand eight hundred and fifty nine

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.*

I, the undersigned, Thomas MacKenzie M.D. being a (1) Member 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) Broomielaw in the ~~County~~ Stewartry of Kirkcudbright separately from any other Medical Practitioner, visited and personally examined (4) William Robson Pauper and that the said William 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.:—

(4) *Insert 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.*

1. Facts indicating Insanity observed by myself: (6) That he was violent a debtor and that he had taken the money & the head and pushed & punished for it raves about a watch he sent to Maxwell to see Brooks dying about his head at night & threatens to stab his wife & children & says that he is some one that he wife and

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

2. Other facts (if any) indicating Insanity communicated to me by others: (7) Her husband says he has more than once threatened to take her own life

(SIGNED) *Name and Medical Designation,* Thomas MacKenzie M.D.

Place of Abode, Dalbeattie

DATED this 17th day of December one thousand eight hundred and fifty nine.

CERTIFICATE OF EMERGENCY.

(This Certificate shall be granted only in case 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 Falconar Trotter, Sheriff Substitute
of the (2) County of Dumfries
having had produced to me, with a Petition at the instance of (3) Andrew M^c Ewan Inspector of Poor, Burrile, Kirkcudbrightshire Certificates under the hands of John Paterson Lewis, M. D. and Thomas MacKnight, 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 Robson, a pauper Burrowfield Annexe and that the said William Robson is a person of unsound mind and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said William Robson as a Patient into the (5) Public Asylum of Southern Counties Dumfries and I authorise the Transmission to the said Asylum accordingly; and I transmit you herewith the said Medical Certificates, and a Statement regarding the said William Robson which accompanied the said Petition.

(SIGNED) John F. Trotter

DATED this twenty sixth day of December one thousand eight hundred and fifty nine

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.

~~William Robson~~

944

William Robson

20/12/59

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 Fraser Interim Inspector Parish of Applegarth humbly sheweth that it appears from the subjoined Statement and accompanying Medical Certificates, that Adam Beck Labourer 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 Beck to the Dumfries & Galloway Royal Asylum and to sanction his admission into the said Asylum.

(SIGNED) James Fraser Interim Inspector

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

DATED this Thirtieth (3) day of December one thousand eight hundred and fifty nine

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,	Adam Beck
2. Sex and Age,	Male about 42
3. Married, Single, or Widowed,	Married
4. Condition of Life, and previous Occupation (if any),	Labourer
5. Religious Persuasion, so far as known,	Church Scotland
6. Previous Place of Abode,	In Annan for some years
7. Place where Found and Examined,	Annan (Poor H)
8. Length of time Insane,	Two days
9. Whether first Attack,	Second Attack
10. Age (if known) on first Attack,	perhaps 41 years
11. When and where previously under Examination and Treatment,	No where
12. Duration of existing Attack,	Two days
13. Supposed Cause,	unknown
14. Whether subject to Epilepsy,	Yes Unknown
15. Whether Suicidal,	yes
16. Whether Dangerous to others,	yes
17. Parish or Union to which the Lunatic (if a Pauper) is Chargeable,	Applegarth
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,	Wifey Beck his wife Mary Annesley of his family have been insane & Epileptic
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 Fraser Interim Inspector, Parish of Applegarth

DATED this Thirtieth day of December one thousand eight hundred and fifty nine

* 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, Thomas Williamson being a (1) Licentiate of the Roy. Col. of Surgeons of Edin^r and being in actual practice as a (2) General Medical Practitioner, hereby certify, on soul and conscience, that I have this day, at (3) Port Stout Annan in the County of Dumfries separately from any other Medical Practitioner, visited and personally examined (4) Adam Beck a pauper residing in Annan and that the said Adam Beck is a (5) dangerous 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 and has long been subject to fits, more or less violent, during the intervals he is sane and sensible. During the interval he was on the 29th of December when I saw him in a state of excitement and made gestures of a threatening and alarming character towards his wife

2. Other facts (if any) indicating Insanity communicated to me by others: (7) I was informed by his wife that both on the night of the 28th and 29th he threatened to kill her and made such violent efforts to reach her that it required four men to restrain him

(SIGNED) *Name and Medical Designation,* Tho^s Williamson Licen^t

Place of Abode, Annan

DATED this Thirtieth day of December One thousand eight hundred and Fifty Nine

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 Edgar being a (1) Licentiate of the Roy. Col. 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) Port Stout in the County of separately from any other Medical Practitioner, visited and personally examinod (4) Adam Beck a pauper residing in Annan and that the said Adam Beck 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 returns incoherent answers. Does not know whether he has got fits or not and is absent in mind

2. Other Facts (if any) indicating Insanity communicated to me by others: (7) Have been told by Wife Sister & one of his Keepers that he is most dangerous for himself his own life and I am to look by his own that he considers his life in danger

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

Place of Abode Port Stout Annan

DATED this (30) Thirtieth day of Dec one thousand eight hundred and (59) fifty nine

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 Adam Beck is a (1) dangerous Lunatic hereby further certify that the Case of the said Adam Beck is One of Emergency, and I recommend the immediate removal of the said Adam Beck to an Asylum accordingly.

Name, Phc Williamson Surgeon

Place of Abode, Annan

DATED this Fortieth day of December one thousand eight hundred and Sixty nine

(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 (1) Sheriff Substitute of the (2) County of Dumfries having had produced to me, with a Petition at the instance of (3) James Frazer Interim Inspector of Applegarth Parish Certificates under the hands of Ronald Williamson and William Edgar, 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 Beck a pauper, residing in Annan and that the said Adam Beck is a (5) Lunatic

and a proper Person to be detained and taken care of, DO HEREBY AUTHORIZE you to receive the said Adam Beck 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 Adam Beck which accompanied the said Petition.

(SIGNED) Alex Hannay

DATED this Third day of January one thousand eight hundred and Sixty Years

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.

945 Beck
Adam ~~Beck~~
30/12/59